



## INDEPENDENT AUDITOR'S REPORT

### Central Coast Local Health District

To Members of the New South Wales Parliament

### Opinion

I have audited the accompanying financial statements of Central Coast Local Health District (the District), which comprise the Statement by the Accountable Authority, the Statement of Comprehensive Income for the year ended 30 June 2025, the Statement of Financial Position as at 30 June 2025, the Statement of Changes in Equity and the Statement of Cash Flows for the year then ended, and notes to the financial statements, including a Statement of Material Accounting Policy Information and other explanatory information of the District and the consolidated entity. The consolidated entity comprises the District and the entities it controlled at the year's end or from time to time during the financial year.

In my opinion, the financial statements:

- have been prepared in accordance with Australian Accounting Standards and the applicable financial reporting requirements of the *Government Sector Finance Act 2018* (GSF Act), the *Government Sector Finance Regulation 2024* (GSF Regulation) and the Treasurer's Directions
- presents fairly the financial position, financial performance and cash flows of the District and the consolidated entity.

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

### Basis for Opinion

I conducted my audit in accordance with Australian Auditing Standards. My responsibilities under the standards are described in the 'Auditor's Responsibilities for the Audit of the Financial Statements' section of my report.

I am independent of the District and the consolidated entity in accordance with the requirements of the:

- Australian Auditing Standards
- Accounting Professional and Ethical Standards Board's APES 110 'Code of Ethics for Professional Accountants (including Independence Standards)' (APES 110).

Parliament promotes independence by ensuring the Auditor-General and the Audit Office of New South Wales are not compromised in their roles 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
- precluding the Auditor-General from providing non-audit services.

I have fulfilled my other ethical responsibilities in accordance with APES 110.

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

## **The Chief Executive's Responsibilities 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 and the GSF Act, GSF Regulation and Treasurer's Directions. The Chief Executive's responsibility also includes such internal control as the Chief Executive determines is necessary to enable the preparation and fair presentation of the financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Chief Executive is responsible for assessing the ability of the District and the consolidated entity to continue as a going concern, disclosing as applicable, matters related to going concern and using the going concern basis of accounting.

## **Auditor's Responsibilities for the Audit of the Financial Statements**

My objectives are to:

- obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error
- issue an Independent Auditor's Report including my opinion.

Reasonable assurance is a high level of assurance, but does not guarantee an audit conducted in accordance with Australian Auditing Standards will always detect material misstatements. Misstatements can arise from fraud or error. Misstatements are considered material if, individually or in aggregate, they could reasonably be expected to influence the economic decisions users take based on the financial statements.

A description of my responsibilities for the audit of the financial statements is located at the Auditing and Assurance Standards Board website at: [www.auasb.gov.au/media/apzlw0y/ar3\\_2024.pdf](http://www.auasb.gov.au/media/apzlw0y/ar3_2024.pdf). The description forms part of my auditor's report.

The scope of my audit does not include, nor provide assurance:

- that the District and the consolidated entity carried out their activities effectively, efficiently and economically
- about the assumptions used in formulating the budget figures disclosed in the financial statements
- about the security and controls over the electronic publication of the audited financial statements on any website where they may be presented
- about any other information which may have been hyperlinked to/from the financial statements.



Manuel Moncada  
Director, Financial Audit Services

Delegate of the Auditor-General for New South Wales

4 September 2025  
SYDNEY

**Central Coast Local Health District**  
**Statement by the Accountable Authority**  
for the year ended 30 June 2025



We state, pursuant to section 7.6(4) of the Government Sector Finance Act 2018 ('GSF Act'):

1. The financial statements of the Central Coast Local Health District for the year ended 30 June 2025 have been prepared in accordance with:
  - a. Australian Accounting Standards (AAS) (which include Australian Accounting Interpretations);
  - b. applicable requirements of the GSF Act, the *Government Sector Finance Regulation 2024*; and
  - c. Treasurer's Directions issued under the GSF Act.
2. The financial statements present fairly the Central Coast Local Health District's financial position as at 30 June 2025 and the financial performance and cash flows for the year then ended.

A handwritten signature in black ink, appearing to read 'Scott McLachlan'.

Scott McLachlan  
**Chief Executive**  
29 August 2025

A handwritten signature in black ink, appearing to read 'James Ross'.

James Ross  
**District Director Finance and Corporate Services**  
29 August 2025

# Central Coast Local Health District

## Statement of Comprehensive Income for the year ended 30 June 2025

		Consolidated Actual 2025 \$000	Consolidated Budget <sup>1</sup> 2025 \$000	Consolidated Actual 2024 \$000	Parent Actual 2025 \$000	Parent Actual 2024 \$000
	Notes					
<b>Continuing operations</b>						
<b>Expenses excluding losses</b>						
Employee related expenses	2	809,666	808,972	786,895	-	-
Personnel services	3	-	-	-	791,785	764,494
Visiting medical officers	4	41,469	38,049	36,186	41,469	36,186
Operating expenses	5	250,519	250,737	241,422	250,519	241,422
Depreciation and amortisation	6	64,054	64,054	64,214	64,054	64,214
Grants and subsidies	7	6,044	5,660	7,379	6,044	7,379
Finance costs		384	355	386	384	386
<b>Total expenses excluding losses</b>		<b>1,172,136</b>	<b>1,167,827</b>	<b>1,136,482</b>	<b>1,154,255</b>	<b>1,114,081</b>
<b>Revenue</b>						
Ministry of Health recurrent allocations	10	604,149	606,947	554,873	604,149	554,873
Ministry of Health capital allocations	10	23,655	23,359	17,869	23,655	17,869
Acceptance by the Crown <sup>2</sup> of employee benefits	13	17,881	18,137	22,401	-	-
Sale of goods and services from contracts with customers	11	109,804	111,229	101,679	109,804	101,679
Investment revenue		2,600	66	2,709	2,600	2,709
Grants and other contributions	12	403,640	398,952	376,887	403,640	376,887
Other income		2,233	4,340	2,219	2,233	2,219
<b>Total revenue</b>		<b>1,163,962</b>	<b>1,163,030</b>	<b>1,078,637</b>	<b>1,146,081</b>	<b>1,056,236</b>
<b>Operating result</b>		<b>(8,174)</b>	<b>(4,797)</b>	<b>(57,845)</b>	<b>(8,174)</b>	<b>(57,845)</b>
Gains / (losses) on disposal		(726)	(32)	(252)	(726)	(252)
Impairment losses on financial assets	15	(1,168)	(1,033)	(272)	(1,168)	(272)
Other gains / (losses)		(61)	(22)	(41)	(61)	(41)
<b>Net result from continuing operations</b>	27	<b>(10,129)</b>	<b>(5,884)</b>	<b>(58,410)</b>	<b>(10,129)</b>	<b>(58,410)</b>
<b>Net result</b>		<b>(10,129)</b>	<b>(5,884)</b>	<b>(58,410)</b>	<b>(10,129)</b>	<b>(58,410)</b>
<b>Other comprehensive income</b>						
Items that will not be reclassified to net result in subsequent periods						
Changes in revaluation surplus of property, plant and equipment	16	47,769	-	54,016	47,769	54,016
<b>Total other comprehensive income</b>		<b>47,769</b>	<b>-</b>	<b>54,016</b>	<b>47,769</b>	<b>54,016</b>
<b>TOTAL COMPREHENSIVE INCOME</b>		<b>37,640</b>	<b>(5,884)</b>	<b>(4,394)</b>	<b>37,640</b>	<b>(4,394)</b>

<sup>1</sup> Unaudited adjusted budget, see Note 26.

<sup>2</sup> Crown represents 'The Crown in right of the State of New South Wales'.

The accompanying notes form part of these financial statements.

# Central Coast Local Health District

## Statement of Financial Position as at 30 June 2025

	Notes	Consolidated Actual 2025 \$000	Consolidated Budget <sup>1</sup> 2025 \$000	Consolidated Actual 2024 \$000	Parent Actual 2025 \$000	Parent Actual 2024 \$000
<b>ASSETS</b>						
<b>Current assets</b>						
Cash and cash equivalents	14	49,681	51,001	48,052	49,681	48,052
Receivables	15	25,061	19,189	21,459	25,061	21,459
Inventories		5,090	4,931	4,982	5,090	4,982
<b>Total current assets</b>		<b>79,832</b>	<b>75,121</b>	<b>74,493</b>	<b>79,832</b>	<b>74,493</b>
<b>Non-current assets</b>						
Property, plant & equipment	16					
- Land and buildings		1,156,124	1,094,371	1,139,696	1,156,124	1,139,696
- Plant and equipment		57,067	72,212	58,997	57,067	58,997
- Infrastructure systems		30,444	30,196	30,196	30,444	30,196
Total property, plant & equipment		1,243,635	1,196,779	1,228,889	1,243,635	1,228,889
Right-of-use assets	17	9,234	9,241	9,975	9,234	9,975
Intangible assets		664	773	773	664	773
<b>Total non-current assets</b>		<b>1,253,533</b>	<b>1,206,793</b>	<b>1,239,637</b>	<b>1,253,533</b>	<b>1,239,637</b>
<b>Total assets</b>		<b>1,333,365</b>	<b>1,281,914</b>	<b>1,314,130</b>	<b>1,333,365</b>	<b>1,314,130</b>
<b>LIABILITIES</b>						
<b>Current liabilities</b>						
Payables	20	46,566	43,100	70,227	46,566	70,227
Contract liabilities		598	514	514	598	514
Borrowings	21	2,383	3,022	3,242	2,383	3,242
Provisions	22	131,846	127,688	126,459	131,846	126,459
Other current liabilities	23	28	696	696	28	696
<b>Total current liabilities</b>		<b>181,421</b>	<b>175,020</b>	<b>201,138</b>	<b>181,421</b>	<b>201,138</b>
<b>Non-current liabilities</b>						
Borrowings	21	6,996	6,798	6,922	6,996	6,922
Provisions	22	1,929	1,929	2,017	1,929	2,017
Other non-current liabilities	23	1,324	-	-	1,324	-
<b>Total non-current liabilities</b>		<b>10,249</b>	<b>8,727</b>	<b>8,939</b>	<b>10,249</b>	<b>8,939</b>
<b>Total liabilities</b>		<b>191,670</b>	<b>183,747</b>	<b>210,077</b>	<b>191,670</b>	<b>210,077</b>
<b>Net assets</b>		<b>1,141,695</b>	<b>1,098,167</b>	<b>1,104,053</b>	<b>1,141,695</b>	<b>1,104,053</b>
<b>EQUITY</b>						
Reserves		421,777	369,091	369,093	421,777	369,093
Accumulated funds		719,918	729,076	734,960	719,918	734,960
<b>Total Equity</b>		<b>1,141,695</b>	<b>1,098,167</b>	<b>1,104,053</b>	<b>1,141,695</b>	<b>1,104,053</b>

<sup>1</sup> Unaudited adjusted budget, see Note 26.

The accompanying notes form part of these financial statements.

**Central Coast Local Health District**  
Statement of Changes in Equity for the year ended 30 June 2025

**PARENT AND CONSOLIDATION**

	Notes	Accumulated Funds \$000	Asset Revaluation Surplus \$000	Total \$000
<b>Balance at 1 July 2024</b>		<b>734,961</b>	<b>369,094</b>	<b>1,104,055</b>
<b>Net result for the year</b>		<b>(10,129)</b>	<b>-</b>	<b>(10,129)</b>
<b>Other comprehensive income:</b>				
Net change in revaluation surplus of property, plant and equipment	16	-	47,769	47,769
<b>Total other comprehensive income</b>		<b>-</b>	<b>47,769</b>	<b>47,769</b>
<b>Total comprehensive income for the year</b>		<b>(10,129)</b>	<b>47,769</b>	<b>37,640</b>
Transfer of asset revaluation surplus to accumulated funds on disposal of assets		(4,914)	4,914	-
<b>Balance at 30 June 2025</b>		<b>719,918</b>	<b>421,777</b>	<b>1,141,695</b>

	Notes	Accumulated Funds \$000	Asset Revaluation Surplus \$000	Total \$000
<b>Balance at 1 July 2023</b>		<b>785,927</b>	<b>322,520</b>	<b>1,108,447</b>
<b>Net result for the year</b>		<b>(58,410)</b>	<b>-</b>	<b>(58,410)</b>
<b>Other comprehensive income:</b>				
Net change in revaluation surplus of property, plant and equipment	16	-	54,016	54,016
<b>Total other comprehensive income</b>		<b>-</b>	<b>54,016</b>	<b>54,016</b>
<b>Total comprehensive income for the year</b>		<b>(58,410)</b>	<b>54,016</b>	<b>(4,394)</b>
Transfer of asset revaluation surplus to accumulated funds on disposal of assets		7,443	(7,443)	-
<b>Balance at 30 June 2024</b>		<b>734,960</b>	<b>369,093</b>	<b>1,104,053</b>

The accompanying notes form part of these financial statements.

# Central Coast Local Health District

## Statement of Cash Flows for the year ended 30 June 2025

		Consolidated Actual 2025 \$000	Consolidated Budget <sup>1</sup> 2025 \$000	Consolidated Actual 2024 \$000	Parent Actual 2025 \$000	Parent Actual 2024 \$000
	Notes					
<b>CASH FLOWS FROM OPERATING ACTIVITIES</b>						
<b>Payments</b>						
Employee related		(795,334)	(802,228)	(763,833)	-	-
Suppliers for goods and services		(324,174)	(320,132)	(295,202)	(324,174)	(295,202)
Grants and subsidies		(5,564)	(6,045)	(6,808)	(5,564)	(6,808)
Finance costs		(384)	(355)	(386)	(384)	(386)
Personnel services		-	-	-	(781,299)	(751,402)
<b>Total payments</b>		<b>(1,125,456)</b>	<b>(1,128,760)</b>	<b>(1,066,229)</b>	<b>(1,111,421)</b>	<b>(1,053,798)</b>
<b>Receipts</b>						
Ministry of Health recurrent allocations		604,149	606,947	554,873	604,149	554,873
Ministry of Health capital allocations		23,655	23,359	17,869	23,655	17,869
Reimbursements from the Crown <sup>2</sup>		14,035	14,035	12,431	-	-
Sale of goods and services		108,056	114,354	97,916	108,056	97,916
Interest received		2,602	66	2,595	2,602	2,595
Grants and other contributions		391,444	387,598	386,771	391,444	386,771
Other		14,797	16,938	15,421	14,797	15,421
<b>Total receipts</b>		<b>1,158,738</b>	<b>1,163,297</b>	<b>1,087,876</b>	<b>1,144,703</b>	<b>1,075,445</b>
<b>NET CASH FLOWS FROM OPERATING ACTIVITIES</b>	27	<b>33,282</b>	<b>34,537</b>	<b>21,647</b>	<b>33,282</b>	<b>21,647</b>
<b>CASH FLOWS FROM INVESTING ACTIVITIES</b>						
Proceeds from sale of property, plant and equipment		66	-	124	66	124
Purchases of property, plant and equipment and intangibles		(27,730)	(28,028)	(23,220)	(27,730)	(23,220)
<b>NET CASH FLOWS FROM INVESTING ACTIVITIES</b>		<b>(27,664)</b>	<b>(28,028)</b>	<b>(23,096)</b>	<b>(27,664)</b>	<b>(23,096)</b>
<b>CASH FLOWS FROM FINANCING ACTIVITIES</b>						
Payment of principal portion of lease liabilities		(3,989)	(3,560)	(3,637)	(3,989)	(3,637)
<b>NET CASH FLOWS FROM FINANCING ACTIVITIES</b>		<b>(3,989)</b>	<b>(3,560)</b>	<b>(3,637)</b>	<b>(3,989)</b>	<b>(3,637)</b>
<b>NET INCREASE / (DECREASE) IN CASH AND CASH EQUIVALENTS</b>		<b>1,629</b>	<b>2,949</b>	<b>(5,086)</b>	<b>1,629</b>	<b>(5,086)</b>
Opening cash and cash equivalents	14	48,052	48,052	53,138	48,052	53,138
<b>CLOSING CASH AND CASH EQUIVALENTS</b>	14	<b>49,681</b>	<b>51,001</b>	<b>48,052</b>	<b>49,681</b>	<b>48,052</b>

<sup>1</sup> Unaudited adjusted budget, see Note 26.

<sup>2</sup> Crown represents 'The Crown in right of the State of New South Wales'.

The accompanying notes form part of these financial statements.

# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

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## 1. Statement of Material Accounting Policy Information

### (a) Reporting entity

Central Coast Local Health District (the District), as a reporting entity, was established under the provisions of the *Health Services Act 1997* with effect from 1 January 2011. The reporting entity is a not-for-profit entity (as profit is not its principal objective) and it has no cash generating units.

The District is a NSW Government entity and is controlled by the Ministry of Health, which is the immediate parent. The Ministry of Health is controlled by the State of New South Wales (and is consolidated as part of the NSW Total State Sector Accounts), which is the ultimate parent.

The District is also a parent entity in its own right, as it controls the operations of the:

- Hospital Facilities and the Community Health Centres within its designated geographical remit; and
- The Central Coast Local Health District Special Purpose Service Entity which provides personnel services to the District to exercise its functions and was established under the provisions of the *Health Services Act 1997* with effect from 1 January 2011.

The consolidated entity includes the District as a parent entity and the District Special Purpose Service Entity. The consolidated financial statements disclose balances for the parent entity and the consolidated entity.

In preparing the consolidated financial statements, all inter-entity transactions and balances have been eliminated, and like transactions and other events are accounted for using uniform accounting policies.

These consolidated financial statements for the year ended 30 June 2025 have been authorised for issue by the Chief Executive on 29 August 2025.

### (b) Basis of preparation

The District's financial statements are general purpose financial statements which have been prepared on an accrual basis and in accordance with:

- applicable Australian Accounting Standards (AAS) (which include Australian Accounting Interpretations);
- the requirements of the *Government Sector Finance Act 2018* ('GSF Act'), the *Government Sector Finance Regulation 2024*; and
- Treasurer's Directions issued under the GSF Act.

The financial statements of the District have been prepared on a going concern basis.

The Secretary of NSW Health, the Chair of the Central Coast Local Health District Board and the Chief Executive, through the Service Agreement have agreed to service and funding levels for the forward financial year. The Service Agreement sets out the level of financial resources for public health services under the District's control and the source of these funds. By agreement, the Service Agreement requires local management to control its financial liquidity and in particular meet benchmarks for the payment of creditors. Where the District fails to meet Service Agreement performance standards, the Ministry of Health as the state manager can take action in accordance with annual performance framework requirements, including withholding or providing additional financial support and increased management interaction.



# Central Coast Local Health District

## Notes to and forming part of the Financial Statements

for the year ended 30 June 2025

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### 1. Statement of Material Accounting Policy Information (continued)

#### (b) Basis of preparation (continued)

Other circumstances why the going concern assumption is appropriate include:

- Allocated funds, combined with other revenues earned, are adequate to pay debts as and when they become due and payable.
- The District has the capacity to review the timing of Ministry of Health allocation cash flows to ensure debts can be paid when they become due and payable.
- The District has developed an Efficiency and Improvement Plan (EIP) which identifies revenue improvement and cost saving strategies. Benefits from the EIP are retained by the District and assist in meeting its overall budget target. The EIP is monitored and evaluated by the Ministry of Health throughout the financial year.

Property, plant and equipment are measured using the fair value basis. Other financial statement items are prepared in accordance with the historical cost convention except where specified otherwise.

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

All amounts are rounded to the nearest one thousand dollars (unless otherwise stated) and are expressed in Australian currency, which is the District's presentation and functional currency.

#### (c) Statement of Compliance

The financial statements and notes comply with Australian Accounting Standards which include Australian Accounting Interpretations.

#### (d) Comparative Information

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.

Certain comparative information has been reclassified to ensure consistency with current year presentation and classification. These include:

- Statement of Cash Flows: 'Reimbursements from The Crown' has been reclassified to 'Personnel Services' in the Parent entity to align the cash flow presentation with the accounting of Crown reimbursements. The prior year comparatives have accordingly been updated.
- Note 18 Fair value measurement of non-financial assets: The fair value hierarchy disclosure has been updated in the current year to include leasehold improvements, work in progress and newly completed assets which are carried at cost for accurate presentation. Prior year comparatives have accordingly been updated.
- Note 19 Restricted assets: The restricted asset balances, which previously reported the opening and closing equity balance, have now been revised to present the opening and closing balances of restricted cash and cash equivalents, for each category of restricted financial assets.
- Note 28 Trust funds: The trust fund balances, which previously reported the opening and closing equity balances, have now been revised to present the opening and closing balances of trust fund cash and cash equivalents for each category of trust funds.

# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

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## 1. Statement of Material Accounting Policy Information (continued)

### (e) Changes in accounting policy, including new or revised Australian Accounting Standards

#### (i) Effective for the first time in 2024-25

The following new Australian Accounting Standard has been applied for the first time in 2024-25:

- *AASB 2022-10 Amendments to Australian Accounting Standards – Fair Value Measurement of Non-Financial Assets of Not-for-Profit Public Sector Entities (AASB 2022-10)*

The nature and effect of the changes as a result of adoption of this amendment is described below.

AASB 2022-10 amends AASB 13 *Fair Value Measurement* to add authoritative implementation guidance and related illustrative examples for fair value measurement of non-financial assets of not-for-profit public sector entities not held primarily for their ability to generate net cash inflows. The guidance specifies that the entity is required to consider whether the asset's highest and best use differs from its current use, clarifies the 'financially feasible' criteria, specifies that an entity uses its own assumptions as a starting point for unobservable inputs and provides guidance on how the cost approach is to be applied to measure the assets fair value.

The District has reviewed its accounting policies with reference to the guidance and concluded that the impact of applying this amendment did not materially affect the financial statements.

Several amendments and interpretations apply for the first time in 2024-25, the impact of which is not material to the financial statements of the District.

As a result, the accounting policies applied in 2024-25 are consistent with those of the previous financial year.

#### (ii) Issued but not yet effective

NSW public sector entities are not permitted to early adopt new Australian Accounting Standards (AAS), unless NSW Treasury determines otherwise.

The following new AAS has not been applied and is not yet effective:

- *AASB 18 Presentation and Disclosure in Financial Statements (AASB 18)*.

AASB 18 aims to improve how entities communicate in their financial statements, with a particular focus on information about financial performance in the statement of profit or loss. AASB 18 will replace *AASB 101 Presentation of Financial Statements*.

The key presentation and disclosure requirements established by AASB 18 are:

- the presentation of newly defined subtotals in the statement of profit or loss;
- the disclosure of management-defined performance measures; and
- enhanced requirements for grouping information (i.e. aggregation and disaggregation).

For not-for-profit public sector entities, AASB 18 applies to annual reporting periods beginning on or after 1 January 2028. The impact of AASB 18 is yet to be determined by the District.

There are other standards and amendments issued but not yet effective, the impacts of which are not anticipated to be material.

# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

## 2. Employee related expenses

	Consolidated 2025 \$000	Consolidated 2024 \$000	Parent 2025 \$000	Parent 2024 \$000
Salaries and wages*	691,293	671,707	-	-
Superannuation - defined benefit plans	1,113	1,039	-	-
Superannuation - defined contribution plans	75,458	70,421	-	-
Long service leave	15,896	23,400	-	-
Redundancies	227	-	-	-
Workers' compensation insurance	25,637	20,234	-	-
Fringe benefits tax	42	94	-	-
	<b>809,666</b>	<b>786,895</b>	<b>-</b>	<b>-</b>

\* Salaries and wages include annual leave, accrued days off (ADO) and parental leave.

Refer to Note 22 for further details on recognition and measurement of employee related expenses.

## 3. Personnel services

	Consolidated 2025 \$000	Consolidated 2024 \$000	Parent 2025 \$000	Parent 2024 \$000
Salaries and wages*	-	-	691,293	671,707
Superannuation - defined contribution plans	-	-	75,458	70,421
Long service leave	-	-	(872)	2,038
Redundancies	-	-	227	-
Workers' compensation insurance	-	-	25,637	20,234
Fringe benefits tax	-	-	42	94
	<b>-</b>	<b>-</b>	<b>791,785</b>	<b>764,494</b>

\* Salaries and wages include annual leave, accrued days off (ADO) and parental leave.

Personnel services of Central Coast Local Health District were provided by its controlled entity, Central Coast Local Health District Special Purpose Service Entity.

## 4. Visiting medical officers

Visiting medical officers (VMOs) enhance full-time medical specialist services by providing specialty input in a number of disciplines throughout the District's hospitals. VMO expenses of \$41.47 million (2024: \$36.18 million) represent part of the day-to-day running costs incurred in the normal operations of the District. These costs are expensed as incurred.

# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

## 5. Operating expenses

	Consolidated 2025 \$000	Consolidated 2024 \$000	Parent 2025 \$000	Parent 2024 \$000
Advertising	160	290	160	290
Agency expenses	867	1,442	867	1,442
Auditor's remuneration - audit of financial statements	222	215	222	215
Blood and blood products	8,895	8,134	8,895	8,134
Contractors	88	362	88	362
Corporate support services	6,774	6,182	6,774	6,182
Courier and freight	386	357	386	357
Disability equipment support expenses	267	259	267	259
Domestic supplies and services	10,225	10,317	10,225	10,317
Drug supplies	28,726	28,320	28,726	28,320
Expenses relating to short-term leases	338	393	338	393
Expenses relating to leases of low-value assets	972	949	972	949
Food supplies	20,122	20,046	20,122	20,046
Fuel, light, power and water	9,233	8,802	9,233	8,802
Hosted services purchased from entities controlled by the immediate parent	9,226	9,676	9,226	9,676
Information management expenses	23,660	23,478	23,660	23,478
Insurance	2,596	2,077	2,596	2,077
Legal services	102	88	102	88
Maintenance (see Note 5 (a))	23,035	17,025	23,035	17,025
Medical and surgical supplies (including prostheses)	38,874	39,191	38,874	39,191
Membership / professional fees	511	554	511	554
Motor vehicle expenses	1,516	1,311	1,516	1,311
Outsourced patient services	7,827	6,072	7,827	6,072
Patient transport costs	9,368	9,548	9,368	9,548
Postal and telephone costs	1,159	1,183	1,159	1,183
Printing and stationery	1,260	1,219	1,260	1,219
Professional services (excluding consultants)	258	997	258	997
Quality assurance / accreditation	13	52	13	52
Rates and charges	73	212	73	212
Security services	717	674	717	674
Specialised services (allied health, cancer, dental, dialysis, radiology, respite, pathology and psychology)	35,480	34,516	35,480	34,516
Staff related costs	2,487	1,994	2,487	1,994
Travel related costs	3,547	3,525	3,547	3,525
Other miscellaneous	1,535	1,962	1,535	1,962
	<b>250,519</b>	<b>241,422</b>	<b>250,519</b>	<b>241,422</b>

The majority of the costs in relation to drug supplies and medical and surgical supplies expenses relate to the consumption of inventory held by the District.

# Central Coast Local Health District

## Notes to and forming part of the Financial Statements

for the year ended 30 June 2025

### 5. Operating expenses (continued)

Other miscellaneous of \$1.53 million (2024: \$1.96 million) includes audiovisual expenses, capital project expenses, chaplaincy expenses, data records and storage, expenses relating to non-lease component of a lease, other intra health expenses, other management services, patient support services and translator services amongst others.

#### (a) Reconciliation of total maintenance expense

	Consolidated 2025 \$000	Consolidated 2024 \$000	Parent 2025 \$000	Parent 2024 \$000
Corrective maintenance	7,160	4,634	7,160	4,634
Planned maintenance	9,028	7,904	9,028	7,904
New / replacement equipment not capitalised	6,365	4,482	6,365	4,482
Other	482	5	482	5
<b>Maintenance expense - contracted labour and other (non-employee related) in Note 5</b>	<b>23,035</b>	<b>17,025</b>	<b>23,035</b>	<b>17,025</b>
Employee related / personnel services maintenance expense included in Note 2 and Note 3*	3,145	3,081	3,145	3,081
	<b>26,180</b>	<b>20,106</b>	<b>26,180</b>	<b>20,106</b>

\* This balance consists of employees who have been classified as providing maintenance services for the District and the expense is included in employee related expenses / personnel services in Notes 2 and 3.

### 6. Depreciation and amortisation

	Consolidated 2025 \$000	Consolidated 2024 \$000	Parent 2025 \$000	Parent 2024 \$000
Depreciation - buildings	46,398	43,659	46,398	43,659
Depreciation - plant and equipment	12,568	15,408	12,568	15,408
Depreciation - infrastructure systems	1,030	972	1,030	972
Depreciation - right-of-use buildings	2,240	2,580	2,240	2,580
Depreciation - right-of-use plant and equipment	1,709	1,486	1,709	1,486
Amortisation - intangible assets	109	109	109	109
	<b>64,054</b>	<b>64,214</b>	<b>64,054</b>	<b>64,214</b>

Refer to Note 16 Property, plant and equipment, Note 17 Leases for recognition and measurement policies on depreciation.

# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

## 7. Grants and subsidies

	Consolidated 2025 \$000	Consolidated 2024 \$000	Parent 2025 \$000	Parent 2024 \$000
Non-government organisations	3,376	4,295	3,376	4,295
Grants to entities controlled by the ultimate parent	2	-	2	-
Grants to entities controlled by the immediate parent	214	1,163	214	1,163
Other grants	2,452	1,921	2,452	1,921
	<b>6,044</b>	<b>7,379</b>	<b>6,044</b>	<b>7,379</b>

### Recognition and Measurement

Grants and subsidies expense generally comprise contributions in cash or in kind to various local government authorities and not-for-profit community organisations to support their health-related objectives and activities. The grants and subsidies are expensed on the transfer of the cash or assets. The transferred assets are measured at their fair value.

## 8. Revenue

Accounting policies for the recognition of income are discussed below.

Under the GSF Act 2018, the District's own source revenue (which includes but is not limited to receipts from operating activities and proceeds from the sale of property, plant and equipment) meets the definition of deemed appropriation money under the GSF Act.

Deemed appropriation money is money received directly by the District which forms part of the consolidated fund and is not appropriated to the District by an Act.

# Central Coast Local Health District

## Notes to and forming part of the Financial Statements

for the year ended 30 June 2025

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### 9. Summary of compliance

*The Appropriation Act 2024* (Appropriations Act) (and the subsequent variations, if applicable) appropriates the sum of \$20,367 million to the Minister for Health out of the Consolidated Fund for the services of the Ministry of Health for the year 2024–25. The spending authority of the Minister from the Appropriations Act has been delegated or subdelegated to officers of the Ministry of Health and entities that it is administratively responsible for, including the District.

The lead Minister for the District being the Minister for Health, is taken to have been given an appropriation out of the Consolidated Fund under the authority section 4.7 of the GSF Act, at the time the District receives or recovers any deemed appropriation money, for an amount equivalent to the money that is received or recovered by the District. These deemed appropriations are taken to have been given for the services of the Ministry of Health.

In addition, government money that the District receives or recovers, from another GSF agency, of a kind prescribed by the GSF regulations that forms part of the Consolidated Fund, is also deemed appropriation moneys where the receiving agency has a different lead Minister to the agency making the payment, or one or both of the agencies is a special office (as defined in section 4.7(8)).

A summary of compliance is disclosed in the financial statements of the Annual Report of the Ministry of Health. It has been prepared by aggregating the spending authorities of the Minister for Health for the services of the Ministry of Health. It reflects the status at the point in time this disclosure statement is being made. The District's spending authority and expenditure is included in the summary of compliance.

The delegation / sub-delegations for 2025 and 2024, authorising officers of the District to spend Consolidated Fund money, impose limits on the amounts of individual transactions, but not the overall expenditure of the District. However, as they relate to expenditure in reliance on a sum appropriated by legislation, the delegation / sub-delegations are subject to the overall authority of the Ministry of Health to spend monies under relevant legislation. The individual transaction limits have been properly observed. The information in relation to the aggregate expenditure limit from the Appropriations Act and other sources is disclosed in the summary of compliance table included in the financial statements of the Annual Report of the Ministry of Health.

### 10. Ministry of Health allocations

Payments are made by the immediate parent as per the Service Agreement to the District and adjusted for approved supplementations, mostly for salary agreements and approved enhancement projects. The Service Agreement between the immediate parent and the District does not contain sufficiently specific enforceable performance obligations as defined by AASB 15 and are therefore recognised upon the receipt of cash, in accordance with AASB 1058.

Interstate patient flows are funded through the NSW State Pool Account, based on activity and consistent with the price determined in cross border agreements. The funding is also recognised as part of the Ministry of Health recurrent allocation from the immediate parent.

# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

## 11. Sale of goods and services from contracts with customers

### (a) Sale of goods comprise the following:

	Consolidated 2025 \$000	Consolidated 2024 \$000	Parent 2025 \$000	Parent 2024 \$000
Sale and recovery of pharmaceutical supplies	14,942	14,589	14,942	14,589
Sale of Prosthesis	1,459	1,242	1,459	1,242
Other	99	126	99	126
	<b>16,500</b>	<b>15,957</b>	<b>16,500</b>	<b>15,957</b>

### (b) Rendering of services comprise the following:

	Consolidated 2025 \$000	Consolidated 2024 \$000	Parent 2025 \$000	Parent 2024 \$000
<b>Patients</b>				
Patient Fees:				
- Inpatient fees	50,627	45,262	50,627	45,262
- Nursing home fees	1,023	410	1,023	410
- Non-inpatient fees	3,084	2,727	3,084	2,727
Department of Veterans' Affairs	10,022	11,880	10,022	11,880
Motor Accident Authority third party	5,192	4,158	5,192	4,158
<b>Staff</b>				
Private use of motor vehicles	37	49	37	49
Salary packaging fee	209	173	209	173
Meals and accommodation	-	2	-	2
<b>General community</b>				
Car parking	3,723	2,300	3,723	2,300
Clinical services (excluding clinical drug trials)	-	18	-	18
Commercial activities	14	18	14	18
Fees for conferences and training	344	290	344	290
Fees for medical records	89	91	89	91
<b>Non-NSW Health entities</b>				
Services to other organisations	1,491	1,826	1,491	1,826
<b>Entities controlled by the immediate parent</b>				
Hosted service revenues	1,267	1,179	1,267	1,179
Linen service revenues	-	6	-	6
<b>Other</b>				
Infrastructure fees - annual charge	4,926	4,409	4,926	4,409
Infrastructure fees - monthly facility charge	10,792	10,284	10,792	10,284
Other	464	640	464	640
	<b>93,304</b>	<b>85,722</b>	<b>93,304</b>	<b>85,722</b>
	<b>109,804</b>	<b>101,679</b>	<b>109,804</b>	<b>101,679</b>



# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

## 11. Sale of goods and services from contracts with customers (continued)

### Recognition and Measurement

#### Sale of goods

Revenue from the sale of goods is recognised when the District satisfies a performance obligation by transferring the promised goods.

Type of good	Nature of timing of satisfaction of performance obligations, including significant payment terms	Revenue recognition policies
Sale and recovery of pharmaceutical supplies	The performance obligation of transferring pharmaceutical products is typically satisfied at the point in time when the products are dispensed to customers, which denotes acceptance by the customer, and therefore deemed as the point in time when the control is transferred to the customer. The payments are typically due within 30 days after the invoice date.	Revenue from these sales is recognised based on the price specified on the invoice, and revenue is only recognised to the extent that it is highly probable that a significant reversal will not occur. No element of financing is deemed present as the sales are made with a short credit term. No volume discount or warranty is provided on the sale.
Sale of prostheses	Relates to revenue generated for surgically implanted prostheses and medical devices. The performance obligation of transferring these products is typically satisfied at the point in time when the products are implanted in the body of the patient, which denotes acceptance by the customer, and therefore deemed as the point in time when the control is transferred to the customer. The payments are typically due within 30 days after the invoice date.	Revenue from these sales is recognised based on the price specified on the invoice, and revenue is only recognised to the extent that it is highly probable that a significant reversal will not occur. No element of financing is deemed present as the sales are made with a short credit term. No volume discount or warranty is provided on the sale.
Other	Relates to sale of various products including the sale of low value medical equipment, schedule 3 medical equipment, sale of publications, old wares and refuse and other general goods. The performance obligation of transferring these products is typically satisfied at the point in time when the products are purchased by the customer and takes delivery, which denotes acceptance by the customer, and therefore deemed as the point in time when the control is transferred to the customer. The payments are typically due within 30 days after the invoice date.	Revenue from these sales is recognised based on the price specified on the invoice, and revenue is only recognised to the extent that it is highly probable that a significant reversal will not occur. No element of financing is deemed present as the sales are made with a short credit term. No volume discount or warranty is provided on the sale.

# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

## 11. Sale of goods and services from contracts with customers (continued)

### Recognition and Measurement (continued)

#### Rendering of services

Revenue from rendering of services is recognised when the District satisfies the performance obligation by transferring the promised services.

Type of service	Nature of timing of satisfaction of performance obligations, including significant payment terms	Revenue recognition policies
Patient services - Inpatient fees, Nursing home fees, Non inpatient fees, Department of Veterans' Affairs, Motor Accident Authority third party	The performance obligations in relation to patient services are typically satisfied as the health services are delivered to the chargeable inpatients and non-inpatients. Public patients are not charged for health services provided at public hospitals. Chargeable patients, including Medicare ineligible patients, privately insured patients, eligible veterans, compensable patients are billed for health services provided under various contractual arrangements. Billings are typically done upon patient discharge and is based on the rates specified by the Ministry of Health. The payments are typically due within 30 days after the invoice date.	Revenue is recognised on an accrual basis when the service has been provided to the patient. In limited circumstances the price is not fully recovered, e.g. due to inadequate insurance policies, overseas patients returning to their home country before paying, etc. The likelihood of their occurrences is considered on a case by case basis. In most instances revenue is initially recognised at full amounts and subsequently adjusted when more information is provided. No element of financing is deemed present as majority of the services are made with a short credit term.
Non-Patient services provided to staff, General community, Non-NSW Health entities and Entities controlled by the immediate parent	Various non-patient related services are provided to the members of staff, general community, non-NSW health entities and entities controlled by the immediate parent. The performance obligations for these services are typically satisfied by transferring the promised services to its respective customers. The payments are typically due within 30 days after the invoice date.	Revenue is recognised when promised services are delivered. No element of financing is deemed present as the services are made with a short credit term.

# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

## 11. Sale of goods and services from contracts with customers (continued)

### Recognition and Measurement (continued)

#### Rendering of services (continued)

Type of service	Nature of timing of satisfaction of performance obligations, including significant payment terms	Revenue recognition policies
Infrastructure fees	Specialist doctors with rights of private practice are subject to an infrastructure charge, including service charges where applicable for the use of hospital facilities at rates determined by the Ministry of Health. The performance obligations for these services are typically satisfied when the hospital facilities are made available and used by the doctors and staff specialists. The payments are typically due when monies are collected from patient billings for services provided under the arrangement.	Revenue is recognised when promised services are delivered. No element of financing is deemed present as the services are made with a short credit term.

# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

## 12. Grants and other contributions

	Consolidated 2025 \$000	Consolidated 2024 \$000	Parent 2025 \$000	Parent 2024 \$000
<b>Grants to acquire / construct a recognisable non-financial asset to be controlled by the entity</b>				
Grants to acquire / construct non-financial asset	18	-	18	-
<b>Other grants with sufficiently specific performance obligations</b>				
Ministry of Health National Health Reform Funding*	362,652	330,354	362,652	330,354
Cancer Institute grants received from an entity controlled by the immediate parent	1,109	1,182	1,109	1,182
Clinical trials and research grants	2,199	1,506	2,199	1,506
Commonwealth government grants received for community based services	4,733	4,179	4,733	4,179
Commonwealth government grants other	633	2,570	633	2,570
Grants from entities controlled by the ultimate parent	560	1,046	560	1,046
Other grants	6,538	6,225	6,538	6,225
<b>Grants without specific performance obligations</b>				
Ministry of Health National Health Reform Funding*	23,360	24,541	23,360	24,541
Commonwealth government grants other	228	4,151	228	4,151
Other grants from entities controlled by the immediate parent	213	124	213	124
Other grants	514	125	514	125
<b>Donations</b>				
Donations	883	884	883	884
	<b>403,640</b>	<b>376,887</b>	<b>403,640</b>	<b>376,887</b>

\* Represents funding received by the District from the Ministry of Health, the immediate parent, in respect of activity-based funding and block funding in scope of the Commonwealth National Health Reform Agreement (NHRA). The Ministry of Health receives funding from the Commonwealth and distributes based on activity levels for activity-based funding and at set amounts for the block funding component. The activity-based funding is recognised under AASB 15 *Revenue from Contracts with Customers* (AASB 15), while block funding is recognised under AASB 1058 *Income of Not-for-Profit Entities* (AASB 1058) due to lack of specific performance obligations. The activity-based revenue is calculated by multiplying activity levels with the agreed National Weighted Activity Unit price. Any prior year adjustments are settled by adjusting Ministry of Health recurrent allocations.

# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

## 12. Grants and other contributions (continued)

### Recognition and Measurement

#### Grants and other contributions

Income from grants to acquire / construct a recognisable non-financial asset to be controlled by the District are recognised when the District satisfies its obligations under the transfer. The District satisfies the performance obligation under the transfer over time as the non-financial assets are being constructed. The percentage of cost incurred is used to recognise income because this most closely reflects the progress to completion.

Revenue from grants with sufficiently specific performance obligations are recognised when the District satisfies a performance obligation by transferring the promised goods or services. The District typically receives grants in respect of research, clinical drug trials and other community, health and wellbeing related projects. The District uses various methods to recognise revenue over time, depending on the nature and terms and conditions of the grant contract. The payments are typically based on an agreed timetable or on achievement of different milestones in the contract.

Revenue from these grants is recognised based on the grant amount specified in the funding agreement / funding approval, and revenue is only recognised to the extent that it is highly probable that a significant reversal will not occur. No element of financing is deemed present as funding payments are usually received in advance or shortly after the relevant obligation is satisfied.

Income from grants without sufficiently specific performance obligations is recognised when the District obtains control over the granted assets (e.g. cash).

#### Condition and restrictions on income of not-for-profit entities

The District receives various types of grants and donations from different grantors / donors, some of which may not have enforceable performance obligations. The District determines the grantor / donor expectations in determining the externally imposed restrictions and discloses them in accordance with different types of restrictions. The types of restrictions and income earned with restrictions are detailed in Note 19 Restricted assets.

## 13. Acceptance by The Crown in right of the State of New South Wales (Crown) of employee benefits

The following liabilities and / or expenses have been assumed by the Crown:

	Consolidated 2025 \$000	Consolidated 2024 \$000	Parent 2025 \$000	Parent 2024 \$000
Superannuation - defined benefit plans	1,113	1,039	-	-
Long service leave provision	16,768	21,362	-	-
	<b>17,881</b>	<b>22,401</b>	<b>-</b>	<b>-</b>

# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

## 14. Cash and cash equivalents

	Consolidated 2025 \$000	Consolidated 2024 \$000	Parent 2025 \$000	Parent 2024 \$000
Cash at bank and on hand	384	483	384	483
Cash at bank - held by HealthShare NSW*	49,297	47,569	49,297	47,569
	<b>49,681</b>	<b>48,052</b>	<b>49,681</b>	<b>48,052</b>

\* Represents cash held by HealthShare NSW, a controlled entity of the immediate parent, in a central bank account, on behalf of the District for its operating and investing activities. It is an operational bank account that earns interest on daily bank balances.

Refer to Note 30 for details regarding credit risk and market risk arising from financial instruments.

Most cash and cash equivalents held by the District are restricted assets. Refer to Note 19 for the details of restricted assets.

HealthShare NSW, a controlled entity of the immediate parent manages accounts payable and employee related payments on behalf of the District for payments to suppliers and employees. HealthShare NSW makes payments after the District has reviewed and approved the invoices and employee rosters. The District's approval of invoices and employee rosters provides authority to HealthShare NSW to make payments. These payments are reported as expenditures and cash outflows in the financial statements of the District.

HealthShare NSW receives funds directly from the Ministry of Health to make these payments to suppliers and employees on behalf of the District. Upon payment, these are reported as revenue (Ministry of Health recurrent and capital allocations) and cash inflows in the financial statements of the District.

# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

## 15. Receivables

	Consolidated 2025 \$000	Consolidated 2024 \$000	Parent 2025 \$000	Parent 2024 \$000
<b>Current</b>				
Trade receivables from contracts with customers	19,191	13,456	19,191	13,456
Intra health receivables	853	1,955	853	1,955
Goods and Services Tax	1,773	2,391	1,773	2,391
Other receivables	1,414	2,139	1,414	2,139
<b>Sub total</b>	<b>23,231</b>	<b>19,941</b>	<b>23,231</b>	<b>19,941</b>
Less: Allowance for expected credit losses*				
- Trade receivables from contracts with customers	(761)	(129)	(761)	(129)
- Other receivables	(3)	-	(3)	-
<b>Sub total</b>	<b>22,467</b>	<b>19,812</b>	<b>22,467</b>	<b>19,812</b>
Prepayments	2,594	1,647	2,594	1,647
	<b>25,061</b>	<b>21,459</b>	<b>25,061</b>	<b>21,459</b>

### (a) \* Movement in the allowance for expected credit losses

<b>Trade receivables from contracts with customers</b>				
Balance at the beginning of the year	(129)	(257)	(129)	(257)
Amounts written off during the year	531	401	531	401
(Increase) / decrease in allowance recognised in the net result	(1,163)	(273)	(1,163)	(273)
<b>Balance at the end of the year</b>	<b>(761)</b>	<b>(129)</b>	<b>(761)</b>	<b>(129)</b>
<b>Other receivables</b>				
Balance at the beginning of the year	-	(3)	-	(3)
Amounts written off during the year	2	2	2	2
(Increase) / decrease in allowance recognised in the net result	(5)	1	(5)	1
<b>Balance at the end of the year</b>	<b>(3)</b>	<b>-</b>	<b>(3)</b>	<b>-</b>
	<b>(764)</b>	<b>(129)</b>	<b>(764)</b>	<b>(129)</b>

# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

## 15. Receivables (continued)

- (b) The current trade receivables from contracts with customers balances above include the following patient fee receivables:

Current include:

	Consolidated 2025 \$000	Consolidated 2024 \$000	Parent 2025 \$000	Parent 2024 \$000
Patient fees - compensable	649	370	649	370
Patient fees - Medicare ineligible	1,318	1,100	1,318	1,100
Patient fees - inpatient & other	9,565	5,726	9,565	5,726
	<b>11,532</b>	<b>7,196</b>	<b>11,532</b>	<b>7,196</b>

Details regarding credit risk of receivables that are neither past due nor impaired, are disclosed in Note 30.

	Consolidated 2025 \$000	Consolidated 2024 \$000	Parent 2025 \$000	Parent 2024 \$000
<b>Current</b>				
Contract receivables (included in Note 15)	20,044	15,411	20,044	15,411
<b>Total contract receivables</b>	<b>20,044</b>	<b>15,411</b>	<b>20,044</b>	<b>15,411</b>

## Recognition and Measurement

Receivables are initially recognised at fair value plus any directly attributable transaction costs. Trade receivables that do not contain a significant financing component are measured at the transaction price.

## Subsequent measurement

The District holds receivables with the objective to collect the contractual cash flows and therefore measures them at amortised cost using the effective interest method, less any impairment. Changes are recognised in the net result for the year when impaired, derecognised or through the amortisation process.

## Impairment

For trade receivables, the District applies a simplified approach in calculating expected credit losses (ECLs). The District recognises a loss allowance based on lifetime ECLs at each reporting date. The District has established a provision matrix based on its historical credit loss experience for trade receivables, adjusted for forward looking factors specific to the receivable.



# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

## 16. Property, plant and equipment

### (a) Total property, plant and equipment

#### PARENT AND CONSOLIDATION

	Land and Buildings \$000	Plant and Equipment <sup>1</sup> \$000	Infrastructure Systems \$000	Total \$000
<b>At 1 July 2023 - fair value</b>				
Gross carrying amount	1,746,254	112,722	39,392	1,898,368
Less: accumulated depreciation and impairment	619,627	56,224	9,530	685,381
<b>Net carrying amount</b>	<b>1,126,627</b>	<b>56,498</b>	<b>29,862</b>	<b>1,212,987</b>

	Land and Buildings \$000	Plant and Equipment <sup>1</sup> \$000	Infrastructure Systems \$000	Total \$000
<b>Year ended 30 June 2024</b>				
Net carrying amount at beginning of year	1,126,627	56,498	29,862	1,212,987
Additions	9,615	13,605	-	23,220
Disposals	-	(392)	-	(392)
Transfers within NSW Health entities through Statement of Comprehensive Income	(903)	-	-	(903)
Net revaluation increments less revaluation decrements	52,710	-	1,306	54,016
Depreciation expense	(43,659)	(15,408)	(972)	(60,039)
Reclassifications	(4,694)	4,694	-	-
<b>Net carrying amount at end of year</b>	<b>1,139,696</b>	<b>58,997</b>	<b>30,196</b>	<b>1,228,889</b>

#### PARENT AND CONSOLIDATION

	Land and Buildings \$000	Plant and Equipment <sup>1</sup> \$000	Infrastructure Systems \$000	Total \$000
<b>At 1 July 2024 - fair value</b>				
Gross carrying amount	1,833,673	121,737	41,191	1,996,601
Less: accumulated depreciation and impairment	693,977	62,740	10,995	767,712
<b>Net carrying amount</b>	<b>1,139,696</b>	<b>58,997</b>	<b>30,196</b>	<b>1,228,889</b>

# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

## 16. Property, plant and equipment (continued)

### (a) Total property, plant and equipment (continued)

	Land and Buildings \$000	Plant and Equipment <sup>1</sup> \$000	Infrastructure Systems \$000	Total \$000
<b>Year ended 30 June 2025</b>				
Net carrying amount at beginning of year	1,139,696	58,997	30,196	1,228,889
Additions	17,802	9,967	-	27,769
Disposals	(68)	(728)	-	(796)
Net revaluation increments less revaluation decrements	46,491	-	1,278	47,769
Depreciation expense	(46,398)	(12,568)	(1,030)	(59,996)
Reclassifications	(1,399)	1,399	-	-
<b>Net carrying amount at end of year</b>	<b>1,156,124</b>	<b>57,067</b>	<b>30,444</b>	<b>1,243,635</b>
<b>At 30 June 2025 - fair value</b>				
Gross carrying amount	1,913,833	124,662	42,995	2,081,490
Less: accumulated depreciation and impairment	757,709	67,595	12,551	837,855
<b>Net carrying amount</b>	<b>1,156,124</b>	<b>57,067</b>	<b>30,444</b>	<b>1,243,635</b>

<sup>1</sup> For non-specialised assets with short useful lives, recognition at depreciated historical cost is regarded as an acceptable approximation of fair value, in accordance with Treasury Policy Paper 21-09.

Further details regarding the fair value measurement of property, plant and equipment are disclosed in Note 18.

The District does not hold significant property, plant and equipment where it is the lessor under operating leases.

### **Recognition and Measurement**

#### **Acquisition of property, plant and equipment**

Property, plant and equipment acquired are initially recognised at cost and subsequently revalued at fair value less accumulated depreciation and impairment.

Health Infrastructure, a controlled entity of the immediate parent, manages the approved major capital works program for the Ministry of Health and its controlled entities. Health Infrastructure receives Ministry of Health Capital Allocations and grants on behalf of the District and records all costs incurred as work in progress or expenses and subsequently transfers those costs to the District. The costs are then accordingly reflected in the District's financial statements. The District acquires most assets in this manner.

Land and buildings are owned by the Health Administration Corporation. Land and buildings which are operated / occupied by the District are deemed to be controlled by the District and are reflected as such in the financial statements.

16. Property, plant and equipment (continued)

Capitalisation thresholds

Property, plant and equipment assets costing more than \$10,000 individually (or forming part of a group costing more than \$100,000) are capitalised.

Depreciation of property, plant and equipment

Except for certain non-depreciable assets, depreciation is provided for on a straight-line basis so as to write off the depreciable amount of each asset as it is consumed over its useful life to the District.

All material identifiable components of assets are depreciated separately over their useful life.

Land is not a depreciable asset.

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

	Useful lives
Buildings	30-70 years
Buildings - leasehold improvements	3-10 years
Plant and equipment	4-20 years
Infrastructure Systems	40 years

'Plant and equipment' comprises, among others, medical, computer and office equipment, motor vehicles and furniture and fittings.

'Infrastructure Systems' comprises public facilities 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.

The estimated useful lives, residual values and depreciation methods are reviewed at the end of each reporting period and adjusted if appropriate.

Right-of-use assets acquired by lessees

AASB 16 Leases (AASB 16) requires a lessee to recognise a right-of-use asset for most leases. The District has elected to present right-of-use assets separately in the Statement of Financial Position.

Further information on leases is contained in Note 17.

# Central Coast Local Health District

## Notes to and forming part of the Financial Statements

for the year ended 30 June 2025

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### 16. Property, plant and equipment (continued)

#### ***Revaluation of property, plant and equipment***

Physical non-current assets are valued in accordance with the 'Valuation of Physical Non-Current Assets at Fair Value' Policy and Guidelines Paper (TPP 21-09) and Treasurer's Direction, 'Valuation of Physical Non-Current Assets at Fair Value' (TD 21-05). TPP 21-09 and TD 21-05 adopt fair value in accordance with AASB 13 *Fair Value Measurement*, AASB 116 *Property, Plant and Equipment* and AASB 140 *Investment Property*.

Property, plant and equipment is measured at the highest and best use by market participants that is physically possible, legally permissible and financially feasible. The highest and best use must be available at a period that is not remote and takes into account the characteristics of the asset being measured, including any socio-political restrictions imposed by government. In most cases, after taking into account these considerations, the highest and best use is the existing use. In limited circumstances, the highest and best use may be a feasible alternative use, where there are no restrictions on use or where there is a feasible higher restricted alternative use.

Revaluations are made with sufficient regularity to ensure the carrying amount of each asset in the class does not differ materially from its fair value at reporting date. The District conducts a comprehensive revaluation at least every three years for its land and buildings and infrastructure. Interim revaluations are conducted between comprehensive revaluations where cumulative changes to indicators suggest fair value may differ materially from carrying value. The District uses an independent professionally qualified valuer for such interim revaluations.

The last comprehensive revaluation was completed on 31 December 2022 and was based on an independent assessment.

Indices were subsequently obtained from external professionally qualified valuers since the last comprehensive revaluation. Indices obtained indicated a cumulative increase of 5.00% in market prices for land and material increases in construction and labour costs of 1275% for buildings and 12.75% for infrastructure. Management has applied these indices to perform an interim revaluation and has recognised the resulting revaluation increment for land, buildings and infrastructure in 2024 and 2025.

Non-specialised assets with short useful lives are measured at depreciated historical cost, as an approximation of fair value. The District has assessed that any difference between fair value and depreciated historical cost is unlikely to be material.

For other assets valued using other valuation techniques, 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 recognised in other comprehensive income and credited to revaluation surplus in equity. However, to the extent that an increment reverses a revaluation decrement in respect of the same class of asset previously recognised as a loss in the net result, the increment is recognised immediately as a gain in the net result.

Revaluation decrements are recognised immediately as a loss in the net result, except to the extent that it offsets an existing revaluation surplus on the same class of assets, in which case, the decrement is debited directly to the revaluation surplus.

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.

# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

## 17. Leases

### (a) Entity as a lessee

The District leases various property, equipment and motor vehicles. Lease contracts are typically made for fixed periods of 1 to 10 years but may have extension options. Lease terms are negotiated on an individual basis and contain a wide range of different terms and conditions. The lease agreements do not impose any covenants but leased assets may not be used as security for borrowing purposes. The District does not provide residual value guarantees in relation to leases.

Extension and termination options are included in a number of property and equipment leases. These terms are used to maximise operational flexibility in terms of managing contracts. The majority of extension and termination options held are exercisable only by the District and not by the respective lessor. In determining the lease term, management considers all facts and circumstances that create an economic incentive to exercise an extension option, or not exercise a termination option. Extension options (or periods after termination options) are only included in the lease term if the lease is reasonably certain to be extended (or not terminated).

Potential future cash outflows of \$0.27 million have not been included in the lease liability because it is not reasonably certain that the leases will be extended (or not terminated). The assessment is reviewed if a significant event or a significant change in circumstances occurs which affects this assessment and that is within the control of the lessee.

AASB 16 Leases (AASB 16) requires a lessee to recognise a right-of-use asset and a corresponding lease liability for most leases.

The District has elected to recognise payments for short-term leases and low value leases as expenses on a straight-line basis, instead of recognising a right-of-use asset and lease liability. Short-term leases are leases with a lease term of 12 months or less. Low value assets are assets with a fair value of \$10,000 or less when new and comprise mainly of small office and medical equipment items.

### Right-of-use assets under leases

The following table presents right-of-use assets. There are no right-of-use assets that meet the definition of investment property.

### PARENT AND CONSOLIDATION

	Land and Buildings \$000	Plant and Equipment \$000	Total \$000
Balance at 1 July 2024	5,677	4,298	9,975
Additions	-	1,948	1,948
Reassessments - increase / (decrease)	1,163	105	1,268
Disposals	4	(12)	(8)
Depreciation expense	(2,240)	(1,709)	(3,949)
Balance at 30 June 2025	4,604	4,630	9,234

# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

## 17. Leases (continued)

### (a) Entity as a lessee (continued)

#### PARENT AND CONSOLIDATION

	Land and Buildings \$000	Plant and Equipment \$000	Total \$000
<b>Balance at 1 July 2023</b>	3,928	4,123	8,051
Additions	2,522	1,596	4,118
Reassessments - increase / (decrease)	1,792	87	1,879
Disposals	14	(21)	(7)
Depreciation expense	(2,580)	(1,486)	(4,066)
<b>Balance at 30 June 2024</b>	<b>5,676</b>	<b>4,299</b>	<b>9,975</b>

#### Lease liabilities

The following table presents liabilities under leases.

#### PARENT AND CONSOLIDATION

	2025 \$000	2024 \$000
<b>Balance at 1 July</b>	10,164	7,826
Additions	1,948	4,118
Interest expenses	384	386
Payments	(4,373)	(4,023)
Terminations / derecognition	(11)	(23)
Other adjustments	1,267	1,880
<b>Balance at 30 June</b>	<b>9,379</b>	<b>10,164</b>

The following amounts were recognised in the Statement of Comprehensive Income during the period in respect of leases where the District is the lessee:

#### PARENT AND CONSOLIDATION

	2025 \$000	2024 \$000
Depreciation expense of right-of-use assets	3,949	4,066
Interest expense on lease liabilities	384	386
Expenses relating to short-term leases	338	393
Expenses relating to leases of low-value assets	972	949
(Gains) / losses on disposal	(3)	(16)
<b>Total amount recognised in the statement of comprehensive income</b>	<b>5,640</b>	<b>5,778</b>

The District had total cash outflows for leases of \$5.68 million for the year ended 30 June 2025 (2024: \$5.36 million).

**17. Leases (continued)**

**(a) Entity as a lessee (continued)**

**Recognition and Measurement**

The District assesses at contract inception whether a contract is, or contains, a lease. That is, if the contract conveys the right to control the use of an identified asset for a period of time in exchange for consideration.

The District recognises lease liabilities to make lease payments and right-of-use assets representing the right to use the underlying assets, except for short-term leases and leases of low-value assets.

*i. Right-of-use assets*

The right-of-use assets are subsequently measured at cost. They are depreciated on a straight-line basis over the shorter of the lease term and the estimated useful lives of the assets, as follows:

	<b>Useful lives</b>
Buildings	1 to 15 years
Plant and equipment	5 to 10 years
Motor vehicles and other equipment	1 to 7 years

*ii. Lease liabilities*

The lease payments are discounted using the interest rate implicit in the lease. If that rate cannot be readily determined, which is generally the case for real estate leases, the incremental borrowing rate is used. The District does not borrow funds in the market. Instead they receive an allocation of the appropriations from the Crown and where the Crown needs additional funding, Treasury Corporation (TCorp) goes to the market to obtain these funds. As a result, the District is using TCorp rates as their incremental borrowing rates. These rates are published by NSW Treasury on a regular basis.

*iii. Short-term leases and leases of low-value assets*

The District applies the short-term lease recognition exemption to its short-term leases of buildings, machinery, motor vehicles and equipment (i.e., those leases that have a lease term of 12 months or less from the commencement date and do not contain a purchase option). It also applies the lease of low-value assets recognition exemption to leases of office equipment that are considered to be low value. Lease payments on short-term leases and leases of low value assets are recognised as an expense on a straight-line basis over the lease term.

*iv. Leases that have significantly below-market terms and conditions principally to enable the entity to further its objectives*

The initial and subsequent measurement of right-of-use assets under leases at significantly below-market terms and conditions that are entered into principally to enable the District to further its objectives is the same as normal right-of-use assets. They are measured at cost, subject to impairment.

# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

## 17. Leases (continued)

### (b) Entity as a lessor

The District leases a few retail spaces located within the hospital precincts under operating leases with rental payable monthly. Lease payments generally contain uplift clauses to align to the market conditions.

The District also leases land and buildings to Non-Governmental Organisations (NGO's) under operating leases arrangements. Generally there are no rental payments as the District provides market rental assistance grants to offset the rental payments.

Although the District is exposed to changes in the residual value at the end of the current lease, the District typically enters into new operating leases and therefore will not immediately realise any reduction in residual value at the end of these leases. Expectations about the future residual values are reflected in the fair value of the properties.

### Lessor for finance leases

Since July 2021 the University of Newcastle controls space within the Central Coast Clinical School and Research Institute building under a 40 year lease with the District. The substance of the transaction is that of a finance peppercorn lease, as no cash is exchanged.

### Lessor for operating leases

Future minimum rentals receivable (undiscounted) under non-cancellable operating lease as are, as follows:

	2025 \$000	2024 \$000
Within one year	1,340	1,364
One to two years	767	1,184
Two to three years	662	744
Three to four years	638	641
Four to five years	627	614
Later than five years	12,913	13,495
<b>Total (excluding GST)</b>	<b>16,947</b>	<b>18,042</b>



# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

## 18. Fair value measurement of non-financial assets

### PARENT AND CONSOLIDATION

#### Fair value measurement and hierarchy

When measuring fair value, the valuation technique used maximises the use of relevant observable inputs and minimises the use of unobservable inputs. Under *AASB 13 Fair Value Measurement*, the District categorises, for disclosure purposes, the valuation techniques based on the inputs used in the valuation techniques as follows:

- Level 1 – quoted (unadjusted) prices in active markets for identical assets / liabilities that the entity can access at the measurement date.
- Level 2 – inputs other than quoted prices included within Level 1 that are observable, either directly or indirectly.
- Level 3 – inputs that are not based on observable market data (unobservable inputs).

The District recognises transfers between levels of the fair value hierarchy at the end of the reporting period during which the change has occurred.

#### (a) Fair value hierarchy

	Level 1	Level 2	Level 3	Total Fair Value
2025	\$000	\$000	\$000	\$000
Property, plant and equipment (Note 16)				
- Land and buildings	-	44,071	1,112,053	1,156,124
- Infrastructure systems	-	-	30,444	30,444
	-	44,071	1,142,497	1,186,568

There were no transfers between level 1 and 2 during the year ended 30 June 2025.

The above figures include leasehold improvements, work in progress and newly completed assets which are carried at cost. Cost for such assets are regarded as an approximation of fair value.

	Level 1	Level 2	Level 3	Total Fair Value
2024	\$000	\$000	\$000	\$000
Property, plant and equipment (Note 16)				
- Land and buildings	-	45,897	1,093,799	1,139,696
- Infrastructure systems	-	-	30,196	30,196
	-	45,897	1,123,995	1,169,892

There were no transfers between level 1 and 2 during the year ended 30 June 2024.

The above figures include leasehold improvements, work in progress and newly completed assets which are carried at cost. Cost for such assets are regarded as an approximation of fair value.

# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

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## 18. Fair value measurement of non-financial assets (continued)

### (b) Valuation techniques, inputs and processes

For land, buildings and infrastructure systems the District obtains external valuations by independent valuers at least every three years. The last revaluation was performed by Opteon solutions for the 2022-23 financial year. Opteon solutions is an independent entity and is not an associated entity of the District.

At the end of each reporting period a fair value assessment is made on any movements since the last revaluation, and a determination as to whether any adjustments need to be made. These adjustments are made by way of application of indices (refer Note 16).

The non-current assets categorised in (a) above have been measured as either level 2 or level 3 based on the following valuation techniques and inputs:

- For land, the valuation by the valuer is made on a market approach, comparing similar assets (not identical) and observable inputs. The most significant input is price per square metre.

All commercial and non-restricted land is included in level 2 as these land valuations have a high level of observable inputs although these lands are not identical.

All the restricted land has been classified as level 3 as, although observable inputs have been used, a significant level of professional judgement is required to adjust inputs in determining the land valuations. Certain parcels of land have zoning restrictions, for example hospital grounds, and values are adjusted accordingly.

- For buildings and infrastructure, many assets are of a specialised nature or use, including some modified residential properties and thus the most appropriate valuation method is depreciated replacement cost. These assets are included as level 3 as these assets have a high level of unobservable inputs. However, some residential properties are valued on a market approach and included in level 2.
- Non-current assets held for sale is a non-recurring item that is measured at the lower of its fair value less cost to sell or its carrying amount. These assets are categorised as level 2.

# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

## 18. Fair value measurement of non-financial assets (continued)

### (c) Reconciliation of recurring Level 3 fair value measurements

#### PARENT AND CONSOLIDATION

	Land and Buildings	Infrastructure Systems	Total Level 3 Recurring
2025	\$000	\$000	\$000
<b>Fair value as at 1 July 2024</b>	1,093,799	30,196	1,123,995
Additions	17,802	-	17,802
Revaluation increments / (decrements) recognised in other comprehensive income – included in line item 'Changes in revaluation surplus of property, plant and equipment' (Note 16)	46,491	1,278	47,769
Disposals	(68)	-	(68)
Depreciation expense	(46,398)	(1,030)	(47,428)
Reclassification	427	-	427
<b>Fair value as at 30 June 2025</b>	<b>1,112,053</b>	<b>30,444</b>	<b>1,142,497</b>

There were no transfers between level 2 or 3 during the year ended 30 June 2025.

	Land and Buildings	Infrastructure Systems	Total Level 3 Recurring
2024	\$000	\$000	\$000
<b>Fair value as at 1 July 2023</b>	1,083,517	29,862	1,113,379
Additions	9,572	-	9,572
Revaluation increments / (decrements) recognised in other comprehensive income – included in line item 'Changes in revaluation surplus of other assets'	44,678	1,306	45,984
Disposals	(903)	-	(903)
Depreciation expense	(43,065)	(972)	(44,037)
<b>Fair value as at 30 June 2024</b>	<b>1,093,799</b>	<b>30,196</b>	<b>1,123,995</b>

There were no transfers between level 2 or 3 during the year ended 30 June 2024.

# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

## 19. Restricted assets

### PARENT AND CONSOLIDATION

The District's financial statements include cash and cash equivalents, the use of which is restricted for stipulated purposes and / or by externally imposed conditions, e.g. donor requirements. The assets are only available for application in accordance with the terms of the donor restrictions.

Category	2025 \$000	2024 \$000
Community welfare	1,477	926
Facility improvements	3,607	4,652
Holds funds in perpetuity	1,801	1,801
Patient welfare	3,306	2,983
Private practice disbursements (No.2 Accounts)	34,025	30,703
Public contributions	549	524
Clinical trials	2,053	1,923
Research	705	696
Staff welfare	9	9
Training and education including conferences	6,059	6,322
Other	(4,294)	(2,970)
	<b>49,297</b>	<b>47,569</b>

Restricted assets are held for the following purpose and cannot be used for any other purpose.

Category	Purpose
Community welfare	Improvements to service access, health literacy, public and preventative health care.
Facility improvements	Repairs, maintenance, renovations and/or new equipment or building related expenditure.
Holds funds in perpetuity	Donor has explicitly requested funds be invested permanently and not otherwise expended.
Patient welfare	Improvements such as medical needs, financial needs and standards for patients' privacy and dignity.
Private practice disbursements (No.2 Accounts)	Staff specialists' private practice arrangements to improve the level of clinical services provided.
Public contributions	Donations or legacies received without any donor-specified conditions as to its use.
Clinical trials	A study designed to test the safety and effectiveness of a treatment.
Research	Research to gain knowledge, understanding and insight.
Staff welfare	Staff benefits such as staff recognition awards, functions and staff amenity improvements.
Training and education including conferences	Professional training, education and conferences.
Other	Includes unallocated monies and outstanding settlements (awaiting physical cash transfer/settlements to take place between the trust and restricted funds bank accounts).

# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

## 19. Restricted assets (continued)

### Unclaimed monies

All money and personal effects of patients which are left in the custody of the District 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 the District.

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.

## 20. Payables

	Consolidated 2025 \$000	Consolidated 2024 \$000	Parent 2025 \$000	Parent 2024 \$000
<b>Current</b>				
Accrued salaries, wages and on-costs	25,536	18,123	-	-
Salaries and wages deductions	182	165	-	-
Payroll and fringe benefits tax	1	7	-	-
Accrued liability - purchase of personnel services	-	-	25,719	18,295
Creditors	16,212	16,982	16,212	16,982
Other creditors				
- Capital works	426	-	426	-
- Payables to entities controlled by the immediate parent	4,209	34,950	4,209	34,950
	<b>46,566</b>	<b>70,227</b>	<b>46,566</b>	<b>70,227</b>

Details regarding liquidity risk, including a maturity analysis of the above payables are disclosed in Note 30.

### Recognition and Measurement

Payables represent liabilities for goods and services provided to the District and other amounts. Short-term payables with no stated interest rate are measured at the original invoice amount where the effect of discounting is immaterial.

# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

## 21. Borrowings

	Consolidated 2025 \$000	Consolidated 2024 \$000	Parent 2025 \$000	Parent 2024 \$000
<b>Current</b>				
Lease liabilities (see Note 17)	2,383	3,242	2,383	3,242
	<b>2,383</b>	<b>3,242</b>	<b>2,383</b>	<b>3,242</b>
<b>Non-current</b>				
Lease liabilities (see Note 17)	6,996	6,922	6,996	6,922
	<b>6,996</b>	<b>6,922</b>	<b>6,996</b>	<b>6,922</b>

Borrowings represents interest bearing liabilities through, lease liabilities.

Details regarding liquidity risk, including a maturity analysis of the above borrowings are disclosed in Note 30.

### Recognition and Measurement

No assets have been pledged as security / collateral for liabilities and there are no restrictions on any title to property.

#### *Financial liabilities at amortised cost*

Borrowings classified as financial liabilities at amortised cost are initially measured at fair value, net of directly attributable transaction costs. These are subsequently measured at amortised cost using the effective interest method. Gains and losses are recognised in the net result when the liabilities are derecognised as well as through the amortisation process.

Borrowings are classified as current liabilities unless the District has an unconditional right to defer settlement of the liability for at least 12 months after the reporting date. Refer to Note 30 (b) for derecognition policy.

### Changes in liabilities arising from financing activities

#### PARENT AND CONSOLIDATION

	Leases \$000	Total liabilities from financing activities \$000
<b>1 July 2023</b>	<b>7,827</b>	<b>7,827</b>
Cash flows	(3,637)	(3,637)
New leases	4,118	4,118
Lease terminations	(23)	(23)
Lease reassessments	1,879	1,879
<b>30 June 2024</b>	<b>10,164</b>	<b>10,164</b>
<b>1 July 2024</b>	<b>10,164</b>	<b>10,164</b>
Cash flows	(3,989)	(3,989)
New leases	1,947	1,947
Lease terminations	(11)	(11)
Lease reassessments	1,268	1,268
<b>30 June 2025</b>	<b>9,379</b>	<b>9,379</b>

# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

## 22. Provisions

	Consolidated 2025 \$000	Consolidated 2024 \$000	Parent 2025 \$000	Parent 2024 \$000
<b>Current</b>				
<b>Employee benefits and related on-costs</b>				
Annual leave				
-Obligations expected to be settled within 12 months	79,009	76,512	-	-
-Obligations expected to be settled after 12 months	26,942	23,926	-	-
Long service leave consequential on-costs				
-Obligations expected to be settled within 12 months	1,998	1,981	-	-
-Obligations expected to be settled after 12 months	15,448	16,248	-	-
Parental leave				
-Obligations expected to be settled within 12 months	4,987	4,557	-	-
Provision for other employee benefits	3,462	3,235	-	-
Provision for personnel services liability	-	-	131,846	126,459
<b>Total current provisions</b>	<b>131,846</b>	<b>126,459</b>	<b>131,846</b>	<b>126,459</b>
<b>Non-current</b>				
<b>Employee benefits and related on-costs</b>				
Long service leave consequential on-costs	1,929	2,017	-	-
Provision for personnel services liability	-	-	1,929	2,017
<b>Total non-current provisions</b>	<b>1,929</b>	<b>2,017</b>	<b>1,929</b>	<b>2,017</b>
<b>Aggregate employee benefits and related on-costs</b>				
Provisions - current	131,846	126,459	-	-
Provisions - non-current	1,929	2,017	-	-
Accrued salaries, wages and on-costs and salaries and wages deductions (Note 20)	25,718	18,288	-	-
Liability - purchase of personnel services	-	-	159,493	146,764
	<b>159,493</b>	<b>146,764</b>	<b>159,493</b>	<b>146,764</b>

### Recognition and Measurement

#### Employee benefits and other provisions

#### Salaries and wages, annual leave, allocated days off (ADO), parental leave, sick leave and on-costs

Salaries and wages (including non-monetary benefits) and paid sick leave that are expected to be settled wholly within 12 months after the end of the period in which the employees render the service are recognised and measured at the undiscounted amounts of the benefits.

Annual leave, ADO and parental leave are not expected to be settled wholly before 12 months after the end of the annual reporting period in which the employees render the related service. As such, they are required to be measured at present value in accordance with AASB 119 *Employee Benefits* (although short-cut methods are permitted).

# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

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## 22. Provisions (continued)

### Recognition and Measurement (continued)

Actuarial advice obtained by NSW Treasury, a controlled entity of the ultimate parent, has confirmed that using the nominal annual leave balance plus the annual leave entitlements accrued while taking annual leave can be used to approximate the present value of the annual leave liability. On-costs of 22.90% are applied to the value of leave payable at 30 June 2025 (comparable on-costs for 30 June 2024 were 23.38%). The District has assessed the actuarial advice based on the District's circumstances to the annual leave, ADO and parental leave and has determined that the effect of discounting is immaterial. All annual leave, ADO and parental leave are classified as a current liability even where the District does not expect to settle the liability within 12 months as the District does not have an unconditional right to defer settlement.

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.

### Long service leave and superannuation

The District's liability for long service leave and defined benefit superannuation (State Authorities Superannuation Scheme and State Superannuation Scheme) are assumed by The Crown in right of the State of New South Wales. The District 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 of employee benefits'.

Specific on-costs relating to long service leave assumed by The Crown in right of the State of New South Wales are borne by the District.

Long service leave is measured at the present value of expected future payments to be made in respect of services provided up to the reporting date. Consideration is given to certain factors based on actuarial review, including expected future wage and salary levels, experience of employee departures, and periods of service. Expected future payments are discounted using the long-term Commonwealth Government bond rate at the reporting date.

The superannuation expense for the financial year is determined by using the formulae specified in the Treasurer's Directions. The expense for certain superannuation schemes (i.e. Basic Benefit and Aware Super) is calculated as a percentage of the employee's salary. For other superannuation schemes (i.e. State Superannuation Scheme and State Authorities Superannuation Scheme), the expense is calculated as a multiple of the employee's superannuation contributions.

### Consequential on-costs

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



# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

## 23. Other liabilities

	Consolidated 2025 \$000	Consolidated 2024 \$000	Parent 2025 \$000	Parent 2024 \$000
<b>Current</b>				
Unearned revenue	28	24	28	24
Liabilities under transfer to acquire or construct non-financial assets to be controlled by the entity	-	672	-	672
	<b>28</b>	<b>696</b>	<b>28</b>	<b>696</b>
<b>Non-current</b>				
Liabilities under transfer to acquire or construct non-financial assets to be controlled by the entity	1,324	-	1,324	-
	<b>1,324</b>	<b>-</b>	<b>1,324</b>	<b>-</b>

Unearned revenue was derived from the following:

The June 2025 balance of \$1.32 million relates to funds received in advance from the Australian Government, (Department of Health). Under the terms of the grant agreement the funds are provided for the future purchases of radiation oncology equipment. There are no plans to purchase any equipment within the next 12 months.

## PARENT AND CONSOLIDATION

**Reconciliation of financial assets and corresponding liabilities arising from transfers to acquire or construct non-financial assets to be controlled by the District.**

	2025 \$000	2024 \$000
Opening balance of liabilities arising from transfers to acquire / construct non-financial assets to be controlled by the entity	672	6,134
Add: receipt of cash during the financial year	670	538
Deduct: income recognised during the financial year	18	6,000
<b>Closing balance of liabilities arising from transfers to acquire / construct non-financial assets to be controlled by the entity</b>	<b>1,324</b>	<b>672</b>

Refer to Note 12 for a description of the District's obligations under transfers received to acquire or construct non-financial assets to be controlled by the District.

24. Commitments

(a) Capital commitments

Aggregate capital expenditure for the acquisition of land and buildings, plant and equipment, infrastructure systems, contracted for at balance date and not provided for:

	Consolidated 2025 \$000	Consolidated 2024 \$000	Parent 2025 \$000	Parent 2024 \$000
Not later than one year	18,166	16,812	18,166	16,812
<b>Total (including GST)</b>	<b>18,166</b>	<b>16,812</b>	<b>18,166</b>	<b>16,812</b>

Input tax receivable related to commitments for expenditure

The total 'Capital expenditure commitments' of \$18.17 million as at 30 June 2025 includes input tax credits of \$1.65 million that are expected to be recoverable from the Australian Taxation Office (2024: \$1.53).

Output tax payable related to commitments for revenue

The 'Operating Lease Commitments (Entity as Lessor)' of \$18.64 million as at 30 June 2025 includes taxable sales of \$1.70 million that are expected to be payable to the Australian Taxation Office (2024: \$1.80 million).

25. Contingent liabilities and contingent assets

PARENT AND CONSOLIDATION

The District is not aware of any contingent liabilities or assets which would have a material effect on the disclosures in these financial statements. The majority of capital commitments contracted are related to capital works overseen by the Health Administration Corporation which are fully funded.

# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

## 26. Adjusted budget review

NSW Health's budget is shown at a consolidated level when presented in parliament each year (i.e. in the NSW Government Budget Papers). The District's budget is not presented in parliament, therefore *AASB 1055 Budgetary Reporting* is not applicable. Unlike the requirement in *AASB 1055 Budgetary Reporting* to present original budget information, the District's financial statements present adjusted budget information. The adjusted budgeted amounts are drawn from the initial Service Agreements between the District and the Ministry of Health at the beginning of the financial year, as well as any adjustments for the effects of additional supplementation provided in accordance with delegations to derive a final budget at year end (i.e. adjusted budget). The budget amounts are not subject to audit and, accordingly, the relevant budget entries in the financial statements are unaudited.

### PARENT AND CONSOLIDATION

#### Net result

The actual Net Result was lower than the adjusted budget by \$4.2million, primarily due to:

- Increased staffing costs (including VMO expenditure)
- Partially offset by budget favourability in OPEX
- The Ministry of Health allocations being greater than budget.

#### Asset and Liabilities

Total Assets were \$51.5 million more than budget as a result of the revaluation of land and buildings. Total Liabilities were \$7.9 million more than budget as a result of annual leave obligations.

#### Cashflow

Net movement in the cashflow were stable and as expected during the year, with cash and cash equivalents only being \$1.3 million less than budgeted.

Movements in the level of the Ministry of Health Recurrent Allocation that have occurred since the time of the initial allocation on 1 July 2024 are as follows:

	\$000
Initial allocation, 1 July 2024	543,469
National Health Reform Agreement	11,274
Support, service and surgery demand	15,537
Adjustment for movement in Intra Health balance sheet budgets	16,739
Salary Packaging changes for employees in HSU covered awards	3,633
Health Fund for Energy Efficiency Projects	1,389
Paid Parental Leave adjustment	2,076
COVID-19 Antiviral Stockpile	1,369
Workers' Compensation adjustments	913
Community based programs funding	3,443
Drug and Alcohol funding	1,571
Women, Children and Family funding	1,680
Special Projects fundings	1,620
Other	2,234
<b>Balance as per Statement of Comprehensive Income</b>	<b>606,947</b>

# Central Coast Local Health District

## Notes to and forming part of the Financial Statements

for the year ended 30 June 2025

### 27. Reconciliation of cash flows from operating activities to net result

Reconciliation of cash flows from operating activities to the net result as reported in the Statement of Comprehensive Income as follows:

	Consolidated 2025 \$000	Consolidated 2024 \$000	Parent 2025 \$000	Parent 2024 \$000
Net cash used on operating activities	33,282	21,647	33,282	21,647
Depreciation and amortisation expense	(64,054)	(64,214)	(64,054)	(64,214)
Allowance for impairment	(1,228)	(314)	(1,228)	(314)
(Increase) / decrease in other liabilities	(656)	5,764	(656)	5,764
(Increase) / decrease in provisions	(5,298)	(10,404)	(5,298)	(10,404)
Increase / (decrease) in inventory	168	112	168	112
Increase / (decrease) in prepayments and other assets	4,485	2,759	4,485	2,759
(Increase) / decrease in payables	23,983	(12,118)	23,983	(12,118)
(Increase) / decrease in contract liabilities	(84)	(486)	(84)	(486)
Increase / (decrease) in financial instruments at fair value	-	(1)	-	(1)
Net gain / (loss) on sale of property, plant and equipment	(730)	(268)	(730)	(268)
Net gain / (loss) on disposal of right-of-use assets	3	16	3	16
Assets donated or brought to account	-	(903)	-	(903)
<b>Net result</b>	<b>(10,129)</b>	<b>(58,410)</b>	<b>(10,129)</b>	<b>(58,410)</b>

# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

## 28. Trust funds

### PARENT AND CONSOLIDATION

The District holds trust funds of \$5.24 million (2024: \$4.89 million), which are held for the safe keeping for third parties and private patient trusts.

These funds are excluded from the financial statements as the District cannot use them for the achievement of its objectives. The following is a summary of the transactions in the trust account.

2025	Cash balance at the beginning of the financial year	Add: receipts	Less: expenditure	Cash balance at the end of the financial year
Category	\$000	\$000	\$000	\$000
Private Patient Trust Funds	-	22,128	(22,128)	-
Third Party Funds	850	9,558	(9,619)	789
Other	4,038	416	-	4,454
<b>Total trust funds</b>	<b>4,888</b>	<b>32,102</b>	<b>(31,747)</b>	<b>5,243</b>

2024	Cash balance at the beginning of the financial year	Add: receipts	Less: expenditure	Cash balance at the end of the financial year
Category	\$000	\$000	\$000	\$000
Private Patient Trust Funds	-	21,587	(21,587)	-
Third Party Funds	564	7,388	(7,102)	850
Other	(429)	4,773	(306)	4,038
<b>Total trust funds</b>	<b>135</b>	<b>33,748</b>	<b>(28,995)</b>	<b>4,888</b>

The following list provides a brief description of the purpose of the trust fund categories.

Category	Purpose
Private Patient Trust Funds	The revenue derived from private patient and other billable services provided by Staff Specialists.
Third Party Funds	A sum of money held in trust on behalf of external parties, e.g. external foundations, volunteer groups and auxiliaries.
Other	Includes unallocated monies and outstanding settlements (awaiting physical cash transfer/settlements to take place between the trust and restricted funds bank accounts).

## 29. Joint arrangements

The District has entered into an agreement called Affiliation Agreement for the Central Coast Research Institute (CCRI) with The University of Newcastle, to undertake research.

The agreement requires equal appointment of directors to the CCRI's Governance Board, which will be managing the relevant activities of the CCRI. Both parties have direct rights to the assets of the CCRI and are jointly and severally liable for the liabilities incurred. CCRI is therefore classified as a joint operation and the District recognises its direct right to the jointly held assets, liabilities, revenues and expenses and its share of any jointly held or incurred assets, liabilities, revenues and expenses. These have been incorporated in the financial statements under the appropriate headings.

# Central Coast Local Health District

## Notes to and forming part of the Financial Statements

for the year ended 30 June 2025

### 30. Financial instruments

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

The District's main risks arising from financial instruments are outlined below, together with the District'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 risks faced by the District, to set risk limits and controls and to monitor risks. Compliance with policies is reviewed on a continuous basis.

#### (a) Financial instrument categories

##### PARENT AND CONSOLIDATION

		Carrying Amount 2025 \$000	Carrying Amount 2024 \$000
Class	Category		
Financial assets			
Cash and cash equivalents (Note 14)	Amortised cost	49,681	48,052
Receivables (Note 15) <sup>1</sup>	Amortised cost	20,694	17,421
Total financial assets		70,375	65,473
Financial liabilities			
Borrowings (Note 21)	Financial liabilities measured at amortised cost	9,379	10,164
Payables (Note 20) <sup>2</sup>	Financial liabilities measured at amortised cost	46,565	70,220
Total financial liabilities		55,944	80,384

#### Notes

<sup>1</sup> Excludes statutory receivables and prepayments (i.e. not within scope of AASB 7 *Financial Instruments: Disclosures*).

<sup>2</sup> Excludes statutory payables and unearned revenue (i.e. not within scope of AASB 7 *Financial Instruments: Disclosures*).

The District determines the classification of its financial assets and liabilities after initial recognition and, when allowed and appropriate, re-evaluates this at each financial year end.

#### (b) Derecognition of financial assets and financial liabilities

A financial asset (or, where applicable, a part of a financial asset or part of a group of similar financial assets) is derecognised when the contractual rights to the cash flows from the financial assets expire; or if the entity transfers its rights to receive cash flows from the asset or has assumed an obligation to pay the received cash flows in full without material delay to a third party under a pass through arrangement and either:

- The District has transferred substantially all the risks and rewards of the asset; or
- The District has neither transferred nor retained substantially all the risks and rewards for the asset, but has transferred control.

# Central Coast Local Health District

## Notes to and forming part of the Financial Statements

for the year ended 30 June 2025

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### 30. Financial instruments (continued)

#### (b) Derecognition of financial assets and financial liabilities (continued)

When the District has transferred its rights to receive cash flows from an asset or has entered into a pass through arrangement, it evaluates if, and to what extent, it has retained the risks and rewards of ownership. Where the District has neither transferred nor retained substantially all the risks and rewards or transferred control, the asset continues to be recognised to the extent of the District's continuing involvement in the asset. In that case, the District also recognises an associated liability. The transferred asset and the associated liability are measured on a basis that reflects the rights and obligations that the District has retained.

Continuing involvement that takes the form of a guarantee over the transferred asset is measured at the lower of the original carrying amount of the asset and the maximum amount of consideration that the District could be required to repay.

#### (c) Financial risk

##### i. Credit risk

Credit risk arises when there is the possibility that the counterparty will default on their contractual obligations, resulting in a financial loss to the District. The maximum exposure to credit risk is generally represented by the carrying amount of the financial assets (net of any allowance for credit losses).

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

Credit risk associated with the District's financial assets, other than receivables, is managed through the selection of counterparties and establishment of minimum credit rating standards. Authority deposits held with NSW TCorp are guaranteed by the State.

The District considers a financial asset in default when contractual payments are 90 days past due. However, in certain cases, the District may also consider a financial asset to be in default when internal or external information indicates that the District is unlikely to receive the outstanding contractual amounts in full before taking into account any credit enhancements held by the District.

The District applies the AASB 9 simplified approach to measuring expected credit losses, which uses a lifetime expected loss allowance for all trade receivable and other receivables.

To measure the expected credit losses, trade receivables, other receivables and contract assets have been grouped based on shared credit risk characteristics and the days past due.

The expected loss rates are based on historical observed loss rates. The historical loss rates are adjusted to reflect current and forward-looking information on macroeconomic factors affecting the ability of the customers to settle the receivables. The District has identified relevant factors, and accordingly has adjusted the historical loss rates based on expected changes in these factors.

Trade receivables, other receivables and contract assets are written off when there is no reasonable expectation of recovery. Indicators that there is no reasonable expectation of recovery include, amongst others a failure to make contractual payments for a period of greater than 90 days past due.

# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

## 30. Financial instruments (continued)

### (c) Financial risk (continued)

#### i. Credit risk (continued)

##### Accounting policy for impairment of trade receivables

##### Receivables - trade receivables and other receivables

The loss allowance for trade receivables, and other receivables as at 30 June 2025 and 30 June 2024 was determined as follows:

#### PARENT AND CONSOLIDATION

30 June 2025	Current	<30 days	30-60 days	61-90 days	>91 days	Total
Expected credit loss rate	0.20%	0.94%	3.21%	4.88%	60.74%	3.71%
Estimated total gross carrying amount <sup>1</sup>	17,490	1,505	190	277	1,144	20,606
Expected credit loss	35	14	6	14	695	764

30 June 2024	Current	<30 days	30-60 days	61-90 days	>91 days	Total
Expected credit loss rate	0.37%	1.12%	6.40%	6.74%	1.31%	0.83%
Estimated total gross carrying amount <sup>1</sup>	13,432	623	812	193	535	15,595
Expected credit loss	50	7	52	13	7	129

#### Notes

<sup>1</sup> The analysis excludes statutory receivables and prepayments as these are not within the scope of AASB 7 *Financial Instruments: Disclosures*. Therefore the 'total' will not reconcile to the receivables total in Note 15.

The District is not materially exposed to concentrations of credit risk to a single trade debtor or group of debtors as at 30 June 2025 and 30 June 2024.

#### ii. Liquidity risk

Liquidity risk is the risk that the District will be unable to meet its payment obligations when they fall due. The District 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 the use of loans and other advances.

The District has negotiated no loan outside of arrangements with Ministry of Health or NSW Treasury.

During the current and prior year, there were no defaults of loans payable. No assets have been pledged as collateral. The District's exposure to liquidity risk is deemed insignificant based on prior periods' data and current assessment of risk.



# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

## 30. Financial instruments (continued)

### (c) Financial risk (continued)

#### ii. Liquidity risk (continued)

The District has exposure to liquidity risk. However, the risk is minimised by the service agreement with the Ministry of Health, as the annual service agreement requires local management to control its financial liquidity and in particular meet benchmarks for the payment of creditors. Where the District fails to meet service agreement performance standards, the Ministry of Health as the state manager can take action in accordance with annual performance framework requirements, including providing financial support and increased management interaction (refer Note 1).

Liabilities are recognised for amounts due to be paid in the future for goods or services received, whether or not invoiced. For all suppliers, that has a correctly rendered invoice, a matched purchase order and where goods have been received, a 30 day payment term is applied.

## PARENT AND CONSOLIDATION

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

### Maturity Analysis and interest rate exposure of financial liabilities

Interest Rate Exposure						Maturity Dates		
	EIR <sup>3</sup>	Nominal Amount <sup>1</sup>	Fixed Interest Rate	Variable Interest Rate	Non - Interest Bearing	< 1 Yr	1-5 Yr	> 5Yr
	%	\$000	\$000	\$000	\$000	\$000	\$000	\$000
2025								
Payables:								
- Creditors <sup>2</sup>		46,565	-	-	46,565	46,565	-	-
Borrowings:								
- Lease liabilities	4.45	10,479	10,479	-	-	3,064	6,256	1,159
		57,044	10,479	-	46,565	49,629	6,256	1,159
2024								
Payables:								
- Creditors <sup>2</sup>		70,220	-	-	70,220	70,220	-	-
Borrowings:								
- Lease liabilities	3.89	11,248	11,248	-	-	3,505	6,175	1,568
		81,468	11,248	-	70,220	73,725	6,175	1,568

### Notes:

<sup>1</sup> The amounts disclosed are the contractual undiscounted cash flows of each class of financial liabilities based on the earliest date on which the District 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.

<sup>2</sup> Excludes statutory payables and unearned revenue (i.e. not within scope of AASB 7 Financial Instruments: Disclosures).

<sup>3</sup> Weighted Average Effective Interest Rate (EIR).

30. Financial instruments (continued)

(c) Financial risk (continued)

iii. Market risk

Market risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market prices. The District's exposures to market risk are primarily through interest rate risk on the District's borrowings and other price risks associated with the movement in the Hour Glass Investment Facilities. The District has no exposure to foreign currency risk and does not enter into commodity contracts.

The effect on net result 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 District 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 as for 2024. The analysis assumes that all other variables remain constant.

Interest Rate Risk

Interest rate risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market interest rates.

The District does not account for any fixed rate financial instruments at fair value through profit or loss or at fair value through other comprehensive income. Therefore, for these financial instruments, a change in interest rates would not affect the carrying value or interest paid/earned. A reasonably possible change of +/- 1% is used, consistent with current trends in interest rates (based on official Reserve Bank of Australia interest rate volatility over the last five years). The basis will be reviewed annually and amended where there is a structural change in the level of interest rate volatility.

However, the District is not permitted to borrow external to the Ministry of Health (except energy loans which are negotiated through NSW Treasury). Both NSW Treasury and the Ministry of Health loans are set at fixed rates and therefore are generally not affected by fluctuations in market rates.

The following table demonstrates the sensitivity to a reasonably possible change in interest rates:

PARENT AND CONSOLIDATION

	2025		2024	
	\$000		\$000	
	-1%	1%	-1%	1%
Net result	(497)	497	(481)	481
Equity	(497)	497	(481)	481

30. Financial instruments (continued)

(d) Fair value measurement

i. Fair value compared to carrying amount

Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The fair value measurement is based on the presumption that the transaction to sell the asset or transfer the liability takes place either in the principal market for the asset or liability or in the absence of a principal market, in the most advantageous market for the asset or liability.

The amortised cost of financial instruments recognised in the Statement of Financial Position approximates the fair value, because of the short term nature of many of the financial instruments.

Therefore the fair value of the financial instruments does not differ from the carrying amount.

31. Related party disclosures

PARENT AND CONSOLIDATION

(a) Key management personnel compensation

Key management personnel compensation is as follows:

	2025	2024
	\$000	\$000
Short-term employee benefits	489	394
Post-employment benefits	47	35
	536	429

During the financial year, Central Coast Local Health District obtained key management personnel services from the immediate parent and incurred \$0.42 million (2024: \$0.43 million) for these services. This amount does not form part of the key management personnel compensation disclosed above.

The District's key management personnel comprise its board members and chief executive (or acting chief executive) from time to time during the year.

Compensation for the Minister for Health is paid by the Legislature and is not reimbursed by the Ministry of Health and its controlled entities. Accordingly no such amounts are included in the key management personnel compensation disclosures above.

Remuneration for the Secretary and Deputy Secretaries are paid by the Ministry of Health and is not reimbursed by the health entities. Accordingly no such amounts are included in the key management personnel compensation disclosures above.

(b) Transactions with key management personnel and their close family members

There were no transactions with key management personnel during the year (2024: Nil). Transactions occurred during the current and prior years with key management personnel's close family members for services performed as employees of the District. The work performed and the remuneration paid is immaterial both qualitatively and quantitatively to the District for both 2025 and 2024 year's.

# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

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## 31. Related party disclosures (continued)

### (c) Transactions with the ultimate parent

There were no transactions with the ultimate parent during the financial period (2024: \$Nil).

### (d) Transactions the District had with government related entities during the financial year

During the financial year and comparative year, the District entered into the various transactions with other entities consolidated as part of the Ministry of Health the immediate parent and the NSW Total State Sector (the ultimate parent) within the normal course of business.

The following operating expenses were incurred with entities controlled by the immediate parent:

- Health Administration Corporation (includes Ambulance Service of NSW, eHealth NSW, Health Infrastructure, Health System Support Group, HealthShare NSW and NSW Health Pathology) provides shared services for the majority of patient transport services, information management services, food supplies and pathology related costs.
- Health Administration Corporation provides some specialised services which includes domestic supplies and services and corporate support services.
- Various grants and subsidies towards research and other projects

The following operating expenses were incurred with entities controlled by the ultimate parent:

- Fringe benefits taxes
- Audit of the statutory financial statements
- Legal and consultancy services
- Insurance costs
- Various grants and subsidies towards research and other projects

The following revenues were earned from entities controlled by the immediate parent:

- Revenue from recurrent and capital allocations
- Various grants and contributions towards research and other projects
- Rental income from Health Administration Corporation.

The following revenues were earned from entities controlled by the ultimate parent:

- Motor Accident Authority third party revenue received from the State Insurance Regulatory Authority (SIRA)
- Various grants and other contributions towards research and other projects
- Motor vehicle rebates
- Insurance refunds
- Revenue from acceptance of long service leave liabilities and defined benefit superannuation

# Central Coast Local Health District

Notes to and forming part of the Financial Statements  
for the year ended 30 June 2025

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## 31. Related party disclosures (continued)

### (d) Transactions the District had with government related entities during the financial year (continued)

Assets and liabilities as follows:

- Receivables and payables in respect of the above noted related party revenue and expense transactions
- The majority of the construction of property, plant and equipment is managed and overseen by Health Administration Corporation
- The majority of capital commitments contracted but not provided for related to capital works overseen by the Health Administration Corporation.

## 32. Events after the reporting period

No other matters have arisen subsequent to balance date that would require these financial statements to be amended.

**END OF AUDITED FINANCIAL STATEMENTS**