

Women's Healthcare Australasia

ANNUAL REPORT

2017 - 18



WOMEN'S
HEALTHCARE
AUSTRALASIA



Contents

.....

Letter from the President	3
Our Board of Directors	4
Our Members	4
Networking	6
WHA Special Interest Groups (SIGs)	6
Benchmarking	8
Advocacy	9
WHA’s New Website Launched in 2018	10
WHA National Collaborative	12
Financial Report	13



Letter from the President

.....

I am pleased to present the Annual Report for Women's Healthcare Australasia for 2018. This year WHA has continued to support member health services to create positive change for women and their newborns. Participation in the WHA community continues to grow with more than 100 hospitals now actively engaging in networking and benchmarking with one another. Every week there is rich expertise shared that benefits all of our members.

I am particularly excited to have been involved this year with the WHA National Collaborative on the reduction of third and fourth degree perineal tears to help improve health outcomes for women. I thank all of the 28 hospitals involved in this project who have worked so diligently to evaluate and improve their care through small scale changes in their maternity unit. It's been very encouraging to see tangible evidence that the number of women harmed is dropping.

I would like to make special mention of the fantastic engagement within the Rural and Regional women's healthcare community (via our Rural and Regional Maternity Services SIG). WHA's face to face meeting in June heard inspiring examples of efforts by rural and regional managers and clinicians to actively sustain and re-open maternity services in local communities.

Lastly, I would like to thank all our WHA members, my fellow Board members and the staff of Women's Healthcare Australasia, for another productive and fruitful year of working together to enhance care for women and their families.

With warmest regards,

A/Prof Anne Sneddon
President
Women's Healthcare Australasia



Since 1998 A/Prof. Anne Sneddon has a long history of being involved in WHA in various roles, including serving on the board since 2012, serving as Vice President since 2014, many presentations at Safety & Quality Meetings, and active benchmarking at Canberra and Gold Coast University Hospitals. She has also been heavily involved throughout 2018 with the National Collaborative on Reducing Severe Perineal Tears. We would like to thank Anne for her contribution over the past year as President of Women's Healthcare Australasia.



**WOMEN'S
HEALTHCARE**
AUSTRALASIA

Our Board of Directors



A/Prof Anne Sneddon	President WHA, Consultant Obstetrician & Gynaecologist, Department of Obstetrics, Gold Coast University Hospital, QLD
Ms Kate Reynolds	Vice President WHA, Coordinator of Midwifery, WA Country Health Service
Prof Michael Nicholl	(Immediate past President, March 2018), Clinical Director, Division of Women's, Children's & Family Health, Northern Sydney Local Health District
A/Prof Graeme Boardley	A/Executive Director, King Edward Memorial Hospital
Prof Danny Challis	Stream Director Women's & Children's Services, South Eastern Sydney Local Health District
Ms Susan Gannon	A/Executive Director, Royal Hobart Hospital
Prof Boon Lim	Clinical Director Department of Obstetrics and Gynaecology Centenary Hospital for Women & Children
Ms Tessa Kowaliw	Special Purpose Director - Consumer
Ms Naomi McKeown	Special Purpose Director - Independent, Operations Manager, Paralella Project Management
Ms Maree Reynolds	Director Women's Health & Newborn Services, Mater Mother's Hospital
Sue McBeath	Director of Nursing & Midwifery, Women's Adolescent & Children's Services, Royal Hobart Hospital

Our Members



117 *maternity services*
Australia wide actively
participate in the WHA
community

See overleaf on page 5
for full hospital listing

VIC

Ballarat Health Service

Bendigo Health

Djerriwarrh Health Services

Eastern Health:

Angliss Hospital
Box Hill Hospital

Peninsula Health:

Frankston Hospital

Mercy Health:

Mercy Hospital for Women
Werribee Mercy Hospital

Monash Health

Casey Hospital
Dandenong Hospital
Monash Medical Centre

Western Health:

Sunshine Hospital

The Royal Women's Hospital

The Royal Women's Hospital, Parkville
The Royal Women's Hospital,
Sandringham Hospital

Northern Health

WA

South Metropolitan Health Service:

Fiona Stanley Hospital
Armadale Health Service

North Metropolitan Health Service:

King Edward Memorial Hospital
St John of God - Midland Public Hospital

WA Country Health Service:

Albany Hospital
Bridgetown Hospital
Broome Regional Hospital
Bunbury Hospital
Busselton Hospital
Carnarvon Hospital
Collie District Hospital
Derby Hospital
Denmark Hospital
Esperance Hospital
Fitzroy Crossing Hospital
Geraldton Hospital
Hedland Health Campus
Halls Creek Hospital
Kalgoorlie Health Campus
Katanning Hospital
Kununurra Hospital
Margaret River Hospital
Narrogin Hospital
Nickol Bay Hospital
Northam Hospital
Warren Hospital
Wyndham Hospital

NSW

Far West Local Health District:

Broken Hill Base Hospital

Nepean Blue Mountains Local Health District:

Blue Mountains Hospital
Hawkesbury Hospital
Lithgow Hospital
Nepean Hospital

Mid North Coast Local Health District:

Coffs Harbour Base Hospital
Port Macquarie Base Hospital
Kempsey District Hospital
Macksville District Hospital

Northern Sydney Local Health District:

Royal North Shore Hospital
Ryde Hospital

South Eastern Sydney Local Health District:

Royal Hospital for Women
St George Hospital
Sutherland Hospital

Western Sydney Local Health District:

Westmead Hospital

SA

Southern Adelaide Local Health Network:

Flinders Medical Centre

North Adelaide Local Health Network:

Lyell McEwin Hospital

Women and Children's Health Network

Country Health South Australia:

Ceduna Hospital
Clare Hospital
Crystal Brook & District Hospital
Gawler Health Service
Jamestown Hospital & Health Service
Kangaroo Island Health Service
Kapunda Hospital
Loxton Hospital
Mount Barker District Soldiers' Memorial Hospital
Mount Gambier & District Health Service
Murray Bridge Hospital
Naracoorte Health Service
Port Augusta Hospital and Regional Health Service
Port Lincoln Health and Hospital Service
Port Pirie Hospital
Riverland Regional Health
South Coast District Hospital
Tanunda War Memorial Hospital
Waikerie Health Service
Walleroo Hospital & Health Services
Whyalla Hospital

NT

Alice Springs Hospital

Royal Darwin Hospital

QLD

Cairns and Hinterland Hospital and Health Service:

Atherton Hospital
Cairns Hospital
Innisfail Hospital
Mareeba Hospital
Tully Hospital

Central Queensland Hospital and Health Service:

Emerald Hospital
Gladstone Hospital
Rockhampton Hospital
Biloela Hospital

Gold Coast Hospital and Health Service:

Gold Coast University Hospital

Mackay Hospital and Health Service:

Clermont Multi-purpose Health Service
Dysart Hospital
Mackay Base Hospital
Proserpine Hospital
Sarina Hospital & Community Health Service

Mater Mother's Hospital

Metro North Hospital and Health Service:

Royal Brisbane and Women's Hospital
Caboolture Hospital
Redcliffe Hospital

South West Hospital and Health Service:

Charleville Hospital
Roma Hospital
St George Hospital

Sunshine Coast Hospital and Health Service:

Sunshine Coast University Hospital
Gympie Hospital

The Townsville Hospital

Wide Bay Hospital and Health Service:

Hervey Bay Hospital
Bundaberg Hospital
Maryborough Hospital

West Moreton Hospital & Health Service:

Ipswich Hospital

TAS

Tasmanian Department of Health and Human Services:

Launceston General Hospital
Royal Hobart Hospital
North West Private Hospital

ACT

ACT Health:

Centenary Hospital for Women & Children

Calvary Healthcare ACT:

Calvary Public Hospital, Bruce

Networking

WHA continues to expand its networking services for its members with the goal of facilitating information sharing to help improve maternity and newborn healthcare services. Our Special Interest Groups (SIGs) share information, collaborate and gain new insights via our face to face meetings, teleconferences, webinars and secure online forums.














Meetings held during 2017-18 included:

- Midwifery Group Practices
June 2017
- Safety & Quality in Maternity Care
November 2017
- Chief Executives of Women's Hospitals
November 2017 & May 2018
- Rural & Regional Maternity Services
June 2018
- Executive Directors of Nursing & Midwifery
August 2018

WHA Special Interest Groups (SIGs)

The SIGs enable individuals to readily connect and share their passion for excellence in one or more areas of Women's healthcare. Below is an example of information sharing and innovation from one of our member hospitals to each of our 11 SIGs:

SIG Name	Service Name	Examples of Shared Story or Improvement Project in 2017-18
Aboriginal & Torres Strait Islander 	Mater Mothers QLD	Mater Mothers QLD shared evaluations and implementations of Birthing in Our Community (BiOC) - a model designed and delivered for Indigenous women to improve health outcomes. Link:
Allied Health 	The Sydney Children's Hospital Network NSW	SCHN NSW provided insight on how to best support patients and families through the NDIS process. Link:
Clinical Educators 	Sunshine Hospital VIC	Sunshine Hospital VIC outlined the history and positive outcomes from Nurses and Midwives completing the discharge examination of newborns. Link:

SIG Name		Service Name	Examples of Shared Story or Innovation
Directors of Nursing & Midwifery		King Edward Memorial Hospital WA	Early-Onset Sepsis (EOS) and the implementation of the Neonatal Sepsis Calculator in KEMH WA was reviewed. Findings suggest that its implementation is both safe and helps avoid unnecessary nursery admissions Link:
Maternity Services		Westmead Hospital NSW	Westmead NSW outlined the new pasteurized Human Donor Milk Bank that the Australian Red Cross commenced in September 2018. The bank will be supporting 7 NICU units in NSW. Link:
Midwifery Group Practices		Redcliffe Hospital QLD	A patient story was shared showing the significance of support and trust in the relationship between women and Continuity of Care Midwives. Link:
NICU & Special Care Nurseries		Christchurch Hospital NZ	Christchurch hospital presented on the Family Integrated Care (FI Care) model which aims to support parents in feeling comfortable and confident in caring for their baby in the NICU. Link:
Perinatal Mental Health		Ballarat Health Services	Participants discussed the use of the Edinburgh Postnatal Depression Scale (EPDS) during the antenatal period and when services typically administer it. Link:
Rural Services		Wide Bay Health Service	A patient story was shared of a woman who declined recommended care. The ethical dilemma, potential outcomes, risks, and consequences of declining care were discussed. Link:
Safety & Quality in Maternity Care		Mater Research, The University of Queensland	Stillbirth Centre of Research Excellence in collaboration with the Perinatal Society of Australia and New Zealand - Stillbirth and Neonatal Death Alliance, shares an educational program for maternity health care professionals. Link:
Women's Hospitals Performance & Efficiency		Australian Centre for Health Services Innovation (QUT)	Services discuss where they are up to in the development of a consistent approach to Neonatal Costing Methodology. Link:

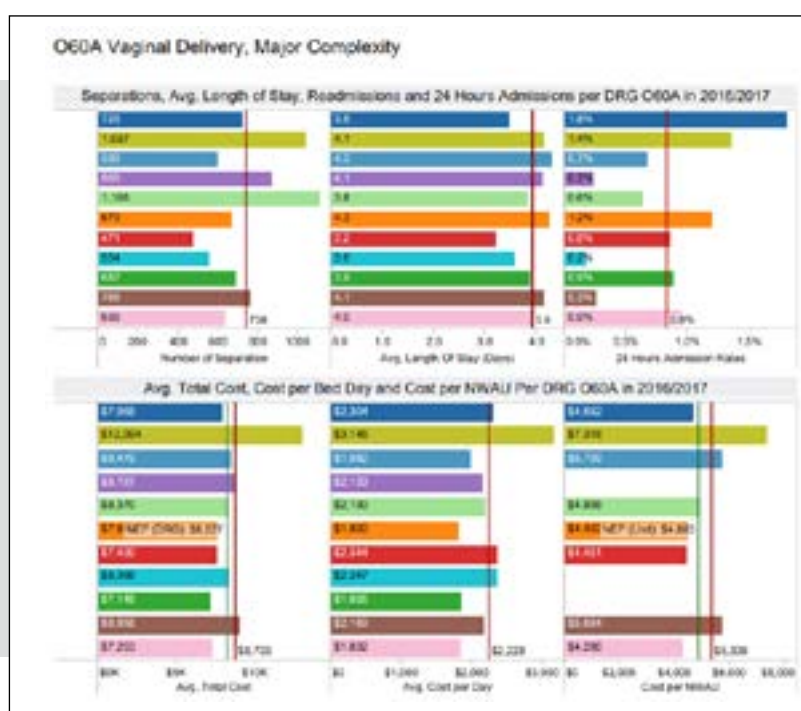
Benchmarking



WHA's Benchmarking Program supports participating member services to optimise their care of women by comparing their performance with peer services across Australia and New Zealand of similar size and capability. It provides information that might not otherwise be apparent at the service level in helping members to identify their strengths and opportunities for improvement.

Our benchmarking report presents both operational and clinical performance data. With 90 services participating in the 2017-18 benchmarking, the results were robust and revealing.

The reports are designed to assist members to quickly identify how their service is performing in comparison with peer services. For example: rates of induction and caesarean section, adverse outcomes such as perineal trauma and blood transfusion, length of stay and number of separations. An example of the data presented can be seen to the right. The analytics allow service managers to pinpoint areas of their service's performance that may warrant further investigation or action.



WHA assists members to connect with peers who have achieved positive results in those areas and creates a platform to share learning across organisations. WHA invites services that are performing well on a given indicator or patient group to share their achievement with other services. We find all members are generous in sharing insights, expertise, tools and resources related to new models of care or other improvements with their peers.

Advocacy

.....

WHA is committed to actively advocating on key issues related to enhancing the health and wellbeing of women and their families. Our advocacy focuses on Australian government bodies, as there is a broad representation of Australian maternity services in the WHA community. Government agencies indicate they value the credible, considered and reliable advice provided by WHA members.

During 2017-18 WHA consulted members and prepared submissions outlined below:

Independent Hospital Pricing Authority

- Emergency Care Services Costing & Classification
- Pricing Framework for Australian Hospitals 2019-20
- Non-Admitted Care Classification Development
- Revisions to the AR-DRG Classification



Australian Health Ministers Advisory Council - Developing a National Strategic Approach to Maternity Services:

- WHA promoted to its members to attend the NSAM's consultation workshops across Australia, complete online surveys and submit written responses.
- WHA also prepared two written responses to the Department of Health as a collaborative WHA submission on a National Strategic Approach to Maternity Services.

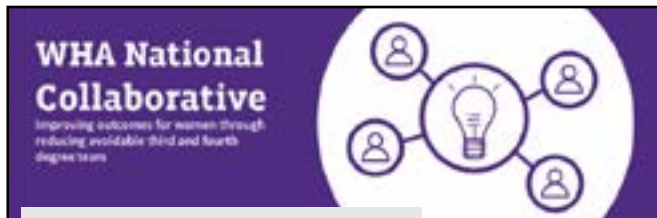
Additional Advocacy and Submissions on:

- Australian National Breastfeeding Strategy joint submission to Department of Health.
- Pregnancy Care Guidelines Public Consultation submission to Department of Health with proposed consolidated feedback on risk of pre-term birth, routine and targeted maternal health tests and prolonged pregnancy.



WHA's New Website Launched in 2018

<https://women.wcha.asn.au/>



The WHA National Collaborative Web Pages aim to educate the public and healthcare professionals about improving outcomes for women through reducing avoidable third and fourth degree perineal tears.

WHA Public Website

WHA launched a new website in February 2018 in response to the changing needs of our members. The website includes a secure online place for networking among members. More than 60 projects on service redesign and improvement have already been shared.

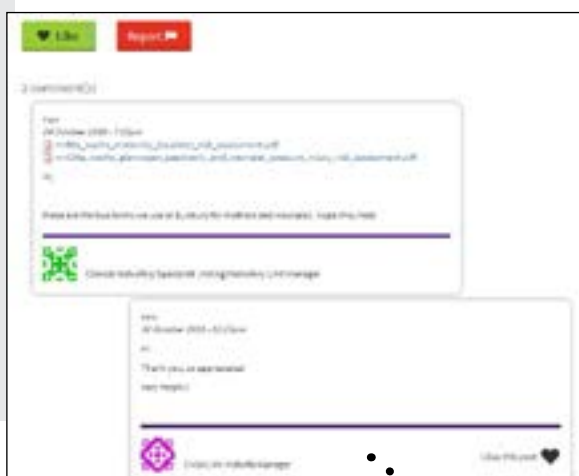
Our WHA Events page showcases upcoming WHA Face to Face Events where you can view programs, event details and easily register.



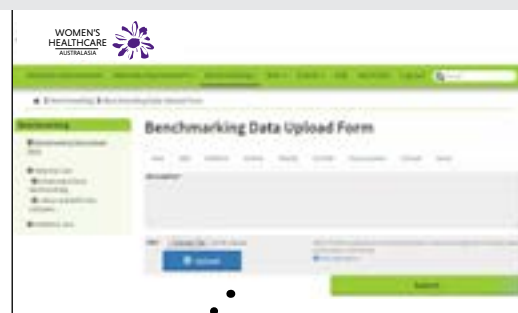
The WHA Advocacy and News Page invites the community to contribute to submissions, promote hospital service news, job positions and more.



Members can actively post, comment and share their experiences and resources to help each other achieve better outcomes.



Our secure Benchmarking page, allows for easy upload of data and includes Paediatric Care and Maternity Care Clinical Indicators, and Activity and Costing information.



<https://members.wcha.asn.au/>

Secure Members Website

Our WHA secure members website is continuing to grow as more members join and share their expertise via our forums. Members can also join upcoming events, review discussions in SIGs, join Special Interest Groups, and showcase improvement projects at their hospital.



Each SIG has a growing library of resources, forum posts and ideas - for example Perinatal Mental Health SIG Posts with SA Mental Health Strategic Plan 2017-2020, EPDS Universal Screening and a User Guide for Aboriginal and Torres Strait Islander Health.



WHA National Collaborative



Women's Healthcare Australasia is currently conducting a National Quality Improvement Collaborative with the aim of reducing harm to women from perineal tears. With 28 hospitals participating in this initiative and some initial evidence showing improvements in reduction of 3rd/4th degree tears, we look forward to analysing the data at the conclusion of the collaborative in late 2018/early 2019.



Throughout the WHA Collaborative each team was supported to undertake small scale changes in their hospital with the aim of quickly identifying successful strategies for improvement. A specifically designed data collection tool and excel database have been used which support the analysis of data. Access to an online CEC data portal allows the sharing of the identified team data, access to quality improvement tools, resource sharing and interactive chat room facilities.



“I have seen a decrease in the number of women experiencing a third or fourth degree tear as a result of the collaborative”

A/Prof Anne Sneddon
Gold Coast University Hospital



**WOMEN'S
HEALTHCARE**
AUSTRALASIA

WOMEN'S HOSPITALS AUSTRALASIA INCORPORATED

A.B.N. 50 065 080 239

**FINANCIAL REPORT
FOR THE YEAR ENDED 30 JUNE 2018**

CONTENTS

	PAGE NO
Board Report.....	2
Financial Statements:	
• Income Statement	3
• Statement of Financial Position	4
• Statement of Cash Flows	5
Notes to & Forming Part of the Financial Statements	6 - 8
Statement by the Board	9
Auditor's Independence Declaration	10
Independent Audit Report to the Members	11 - 12

WOMEN'S HOSPITALS AUSTRALASIA INCORPORATED

ABN: 59 065 880 239

INCOME STATEMENT FOR THE YEAR ENDED 30 JUNE 2018

	2018	2017
	\$	\$
INCOME		
Subscriptions	456,513	381,276
Recoveries from Associated Organisations	426,204	392,952
Workshops, conference and clinical meeting income	70,065	121,700
Projects - Collaborative	388,966	13,750
	1,341,808	909,678
OTHER INCOME		
Interest Received	6,280	9,379
	1,348,088	919,057
EXPENDITURE		
Accountancy Fees	3,000	4,200
Advertising	245	-
Auditing	5,526	5,569
A & C Benchmarking	2,745	2,578
Bad Debts Expense	659	3,936
Bank Charges	3,329	2,234
Body Corporate	511	-
Cleaning	94	-
Computer Expenses	23,983	20,336
Conference & Forum Expenses	44,292	65,464
Depreciation and amortisation	19,305	9,427
Electricity	2,143	1,431
Insurance	13,629	12,332
Interest Paid	1,090	-
Legal Fees	568	113
Meeting Costs	3,948	1,671
Office Expenses	4,368	3,451
Office Move/Fixout	5,846	-
Other Expenses	1,207	63
Postage	487	145
Printing & Stationery	3,857	5,138
Projects - Collaborative	250,144	4,452
Rates	473	-
Rent	18,089	15,488
Salaries & Wages	775,239	598,041
Staff Training, Recruitment & Welfare	2,265	401
Subscriptions	150	-
Superannuation Contributions	71,702	55,799
Telephone and Web Conferencing	4,727	4,615
Travelling Expenses	9,199	6,069
Water	65	-
	1,270,865	822,973
	77,223	98,084
Surplus / (Deficit) before income tax		
Retained surplus at the beginning of the financial year	380,825	293,741
Retained earnings at the end of the financial year	458,048	391,825

The above statement should be read in conjunction with the accompanying notes

WOMEN'S HOSPITALS AUSTRALASIA INCORPORATED

ABN: 59 065 880 239

BOARD REPORT

Your Board members submit the financial report of the Women's Hospitals Australasia Incorporated for the financial year ended 30 June 2018.

Board Members

The names of Board members throughout the year and at the date of this report are:

Role	Name
President (since March 2018)	AProf Anne Sneeddon
President (until March 2018)	Prof Michael Nicholl

Board Members:

AProf Graeme Boardley (previous President)
Dr Danny Challis
Ms Susan Gannon
Ms Sue McBeath
Ms Maree Reynolds
Ms Kate Reynolds
Naomi McKeeown
Tessie Kowalew
AProf Boon Lim

Principal Activities

The principal activities of the Association during the financial year are concerned with supporting women's hospitals and health services to achieve excellence in clinical care through advocacy, networking and the sharing of knowledge and evidence underpinning best practice.

Significant Changes

No significant change in the nature of these activities occurred during the year.

Operating Result

The surplus of the Association for the financial year ended 30 June 2018 after providing for income tax amounted to \$77,223 (2017: \$96,084 surplus).

After Balance Date Events

No matters or circumstances have arisen since the end of the financial year which significantly affected or may significantly affect the operations of the Association, the results of those operations, or state of affairs of the association in future financial years.

This report is provided in accordance with a resolution of the Board and is signed for and on behalf of the members of the Board by:



AProf Anne Sneeddon
Board Member - President since March 2018



Prof Michael Nicholl
President until March 2018 & Ongoing Board Member

Dated this day of 3/10/18

15/10/18

WOMEN'S HOSPITALS AUSTRALASIA INCORPORATED

ABN: 59 065 880 239

**STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED 30 JUNE 2018**

	Note	2018 \$	2017 \$
Cash flows from operating activities			
Receipts from members, trade and other debtors		1,652,808	1,080,309
- including GST			
Payments to suppliers and employees		(1,394,809)	(861,280)
- including GST			
Interest received		6,280	9,379
Net cash flows from operating activities		274,279	237,408
Cash flows from investing activities			
Payment for property, plant & equipment & intangible assets		(332,986)	(28,050)
Net cash flows from investing activities		(332,986)	(28,050)
Cash flows from financing activities			
Net increase(decrease) in cash and cash equivalents		(58,707)	209,358
Cash and cash equivalents at beginning of period		603,891	394,533
Cash and cash equivalents at end of period	2	545,184	603,891

The above statement should be read in conjunction with the accompanying notes

WOMEN'S HOSPITALS AUSTRALASIA INCORPORATED

ABN: 59 065 880 239

**STATEMENT OF FINANCIAL POSITION
AS AT 30 JUNE 2018**

	Note	2018 \$	2017 \$
ASSETS			
CURRENT ASSETS			
Cash and cash equivalents	2	545,184	603,891
Trade and other receivables	3	40,666	112,730
Prepayments		12,908	8,417
TOTAL CURRENT ASSETS		604,778	725,038
NON-CURRENT ASSETS			
Intangible assets	4	18,613	13,404
Property, plant and equipment	5	326,669	18,194
TOTAL NON-CURRENT ASSETS		345,279	31,598
TOTAL ASSETS		950,057	756,636
LIABILITIES			
CURRENT LIABILITIES			
Trade and Other Creditors		50,689	30,413
GST Payable		15,728	40,489
Accrued Expenses		5,376	5,604
Income in Advance		316,745	208,695
Provision for Employee Entitlements		94,489	75,610
TOTAL CURRENT LIABILITIES		483,009	366,811
TOTAL LIABILITIES		483,009	366,811
NET ASSETS		467,048	389,825
EQUITY			
Retained surplus		467,048	389,825
TOTAL EQUITY		467,048	389,825

The above statement should be read in conjunction with the accompanying notes

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2018 (continued)

1 Statement of Significant Accounting Policies (continued)

Revenue and Other Income

Revenue is measured at the fair value of the consideration received or receivable after taking into account any trade discounts and volume rebates allowed. For this purpose, deferred consideration is not discounted to present values when recognising revenue. Interest revenue is recognised using the effective interest rate method, which for floating rate financial assets is the rate inherent in the instrument. Revenue recognition relating to the provision of services is determined with reference to the stage of completion of the transaction at the end of the reporting period and where outcome of the contract can be estimated reliably. Stage of completion is determined with reference to the services performed to date as a percentage of total anticipated services to be performed. Where the outcome cannot be estimated reliably, revenue is recognised only to the extent that related expenditure is recoverable. All revenue is stated net of the amount of goods and services tax (GST).

Employee Benefits

Provision is made for the association's liability for employee benefits arising from services rendered by employees to the end of the reporting period. Employee benefits have been measured at the amounts expected to be paid when the liability is settled.

Goods and Services Tax (GST)

Revenues, expenses and assets are recognised net of the amount of GST, except where the amount of GST incurred is not recoverable from the Australian Tax Office (ATO). Receivables and payables are stated inclusive of the amount of GST receivable or payable. The net amount of GST recoverable from, or payable to, the ATO is included with other receivables or payables in the balance sheet.

	2018	2017
	\$	\$
2 Cash and Cash Equivalents		
Cash on Hand	232	4
Cash at Bank	544,952	603,897
	545,184	603,891
3 Trade and Other Receivables		
Sundry Debtors	-	7,212
Trade Debtors	14,369	77,606
Loan - CHA Ltd	5,018	20,922
Input Tax Credits	27,299	6,990
	46,686	112,730
4 Intangible Assets		
Website	41,005	26,005
Accumulated Amortisation	(22,392)	(12,601)
	18,613	13,404
5 Property, Plant and Equipment		
Buildings at cost - Unit 9, 25-35 Buckland St Mitchell	235,054	-
Office Fitout	80,176	-
Less: Accumulated Depreciation	(1,877)	-
	78,299	-
Plant & Equipment	118,050	115,204
Less: Accumulated Depreciation	(104,737)	(97,100)
	13,313	18,104
Total Property, Plant and Equipment	326,666	18,194

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

1 Statement of Significant Accounting Policies

The association was incorporated on 13 April 1994 (A 02403) under the Associations Incorporation Act 1991 (AIC). It is registered with the Australian Business Register - Australian Business Number 50 665 880 239. The association is registered for Goods and Services Tax purposes. The association is income tax exempt under authority from the Australian Taxation Office and is registered as a charity with the Australian Charities and Not-for-profits Commission. It is an Australian Registered Body (ARBN 065 080 239).

The financial report is a special purpose report, which has been prepared, for distribution to members to satisfy the accountability requirements of Division 60 of the Australian Charities and Not-for-profits Commission Act 2012. The Association's Board has determined that the Association is not a reporting entity. The financial statements have been prepared in accordance with the requirements of the following Australian Accounting Standards:

- AASB 101, Presentation of Financial Statements
- AASB 107, Statement of Cash Flows
- AASB 108, Accounting Policies, Changes in Accounting Estimates and Errors
- AASB 1031, Materiality
- AASB 1048, Interpretation of Standards
- AASB 1054, Australian Additional Disclosures.

No other accounting standards including Australian Accounting Interpretations or other pronouncements of the Australian Accounting Standards Board have been applied. The financial statements have been prepared on an accruals basis and are based on historical costs unless otherwise stated in the notes. The accounting policies that have been adopted in the preparation of these statements are as follows:

Income Tax

The Association has reviewed its income tax status and have assessed the Association to be exempt from income tax under section 50-10 of the Income Tax Assessment Act, 1997. Consequently, no provision for taxation has been made in the financial statements.

Plant and Equipment

All plant and equipment is initially measured at cost and is depreciated over their useful lives to the association. Buildings have not been depreciated as its value is expected to increase over time. Regular valuations of the property will be obtained to ensure the value of the property is not over stated in the financial statements. The carrying amount of plant and equipment is reviewed annually by the Board to ensure it is not in excess of the recoverable amount. The recoverable amount is assessed on the basis of the expected net cash flows that will be received from the asset's employment and subsequent disposal. The expected net cash flows have not been discounted in determining recoverable amounts.

Depreciation

The depreciation method and useful life used for items of plant and equipment reflects the pattern in which their future economic benefits are expected to be consumed by the association. Depreciation commences from the time the asset is held ready for use. The depreciation method and useful life of assets is reviewed annually to ensure they are still appropriate.

Buildings

The association has a 50% share in buildings at Unit 9, 25-35 Buckland St Mitchell with Chikren's Healthcare Australasia Limited.

Impairment of Assets

At the end of each reporting period, plant and equipment and intangible assets are reviewed to determine whether there is any indication that those assets have suffered an impairment (deficit). If there is an indication of possible impairment, the recoverable amount of any affected asset (or group of related assets) is estimated and compared with its carrying amount. The recoverable amount is the higher of the asset's fair value less costs to sell and the present value of the asset's future cash flows discounted at the expected rate of return. If the estimated recoverable amount is lower, the carrying amount is reduced to its estimated recoverable amount and an impairment (deficit) is recognised immediately in profit or (deficit).

Cash and Cash Equivalents

Cash and cash equivalents include cash on hand and deposits held at call with banks.

WOMEN'S HOSPITALS AUSTRALASIA INCORPORATED

ABN: 59 065 080 233

STATEMENT BY THE BOARD

The Board has determined that the association is not a reporting entity and that this special purpose financial report should be prepared in accordance with the accounting policies outlined in Note 1 to the financial statements. In the opinion of the Board the financial statements set out on pages 3 to 8:

1. Presents a true and fair view of the financial position of Women's Hospitals Australasia Incorporated as at 30 June 2018 and its performance for the year ended on that date.
2. At the date of this statement, there are reasonable grounds to believe that Women's Hospitals Australasia Incorporated will be able to pay its debts as and when they fall due.
3. Satisfies the financial reporting requirements of Division 60 of the Australian Charities and Not-for-profits Commission Regulations 2013.

This statement is made in accordance with a resolution of the Board and is signed for and on behalf of the Board by:



A/Prof Anne Sneddon
Board Member - President since March 2018

Dated this day of 3/10/18



Prof Michael Nicholl
President until March 2018 & Ongoing Board Member

15/10/18

WOMEN'S HOSPITALS AUSTRALASIA INCORPORATED

ABN: 59 065 080 233

NOTES TO AND FORMING PART OF THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2018 (continued)

	2018	2017
	\$	\$
6 Salaries & Wages		
Wages - Ongoing	636,387	586,041
Wages - Collaborative project	138,852	-
	<u>775,239</u>	<u>586,041</u>

Included in 2018 Salaries and wages expense is a portion relating to the Collaborative project, which is being undertaken for the period 1 July 2017 to 31 December 2018.

INDEPENDENT AUDIT REPORT TO THE MEMBERS OF WOMEN'S HOSPITALS AUSTRALASIA INCORPORATED (NON-REPORTING)

Report on the Audit of the Financial Report

Opinion

We have audited the financial report being a special purpose financial report of Women's Hospitals Australasia Incorporated (Non-reporting) (the association), which comprises the statement of financial position as at 30 June 2018, the income statement and the statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies, and the statement by the board.

In our opinion, the accompanying financial report of the association is in accordance with Division 60 of the Australian Charities and Not-for-profits Commission Act 2012, including:

- (i) giving a true and fair view of the association's financial position as at 30 June 2018 and of its financial performance for the year ended, and
- (ii) complying with Australian Accounting Standards and Division 60 of the Australian Charities and Not-for-profits Commission Regulations 2013.

Basis for Opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Report section of our report. We are independent of the association in accordance with the auditor independence requirements of the Australian Charities and Not-for-profits Commission Act 2012 and the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 Code of Ethics for Professional Accountants (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

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

Basis of Accounting and Restriction on Distribution

Without modifying our opinion, we draw attention to Note 1 to the financial report, which describes the basis of accounting. This special purpose financial report has been prepared to assist the association to meet the requirements of Division 60 of the Australian Charities and Not-for-profits Commission Act 2012. As a result, the financial report may not be suitable for another purpose.

Responsibilities of Directors for the Financial Report

The directors of the association are responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards and the Australian Charities and Not-for-profits Commission Act 2012 and for such internal control as the directors determine is necessary to enable the preparation of the financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error.

In preparing the financial report, the directors are responsible for assessing the association's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the directors either intend to liquidate the association or to cease operations, or have no realistic alternative but to do so.

AUDITOR'S INDEPENDENCE DECLARATION TO WOMEN'S HOSPITALS AUSTRALASIA INCORPORATED

As auditor of Women's Hospitals Australasia Incorporated for the year ended 30 June 2018, I declare that, to the best of my knowledge and belief, there have been:

- (a) No contraventions of the auditor independence requirements as set out in the Australian Charities and Not-for-profits Commission Act 2012 in relation to the audit; and
- (b) No contraventions of any applicable code of professional conduct in relation to the audit.

KOTHES
Chartered Accountants



S.N. BYRNE
Partner
Registered Company Auditor #153824
CANNBERRA, 10 September 2018

INDEPENDENT AUDIT REPORT TO THE MEMBERS OF WOMEN'S HOSPITALS AUSTRALASIA INCORPORATED (NON-REPORTING) (Continued)

Auditor's Responsibilities for the Audit of the Financial Report

Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of the financial report.

As part of an audit in accordance with the Australian Auditing Standards, we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial report, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the association's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the directors.
- Conclude on the appropriateness of the directors' use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the association's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial report or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the association to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial report, including the disclosures, and whether the financial report represents the underlying transactions and events in a manner that achieves fair presentation.

We communicate with the directors regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

KOTHES
Chartered Accountants



SIMON BYRNE
Partner
Registered Company Auditor #153024
CANBERRA, 10 September 2018

Published by Women's Healthcare Australasia (WHA):

PO Box 194 Mitchell,
ACT 2911

© Copyright Women's Healthcare Australasia 2018

ABN: 50065080239

Version: November 21, 2018 1:43 PM

All rights reserved. Except for the purposes of education, fair dealing and use within contributing member hospitals, no portion of this document should be reproduced or copied for any purpose, including general exhibition, lending, resale and hire, without the written consent of Women's Healthcare Australasia.

November 2018