

# HEAL

Health  
Education  
Australia  
Limited

Formerly **vmpf**

# 100 YEARS

ANNIVERSARY  
1920-2020

## 100 YEARS OF MEDICAL EDUCATION



## ANNUAL REPORT 2020–2021



# Contents

- About HEAL ..... 5
- Chairman's Report..... 6
- Chief Executive Officer's Report..... 7
- Directors' Report..... 8
- 2020/21 Highlights ..... 13
- International Medical Graduate Program ..... 14
- Simulated Participant Program..... 18
- Australasian Institute of Clinical Governance (AICG) ..... 20
- HEAL Foundation ..... 23
- Other Programs ..... 24
- Directors, Staff and Memberships ..... 25
- Auditor's Independence Declaration..... 28
- HEAL Financial Report..... 29
- HEAL Educational Purposes Fund Financial Report ..... 43

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# About HEAL

Health Education Australia Limited (HEAL), and its predecessors (including the Victorian Medical Postgraduate Foundation (VMPPF)), has offered a richness of healthcare education programs since the establishment in 1920 of the Melbourne Committee for Postgraduate Work by the British Medical Association (BMA). This Committee was initially formed to coordinate education to assist doctors returning from the First World War to assimilate back into general medical practice, and contained representatives from the BMA (which preceded the formation of the Australian Medical Association), the University of Melbourne, and each of the major teaching hospitals in Melbourne. As other organisations, particularly the medical Colleges, were established over the ensuing years, the activities of the Committee and its successors continually evolved and adapted its vision and mission over 100 years of operation to suit the ongoing education needs of the medical profession.

The name HEAL also reflects an expansion of our services beyond Victoria to support a national platform and a broader focus on the healthcare professions as a whole that better reflects our vision. HEAL remains a not-for-profit organisation.

Today, HEAL combines its history and experience to deliver educational opportunities with a multidisciplinary focus to a range of professionals in the healthcare industry. This focus on multidisciplinary services allows us the ability to offer an online continuing professional development (CPD) program for health professionals, quality bridging courses, online and face-to-face courses for international medical graduates, a simulated participant program and a range of custom-designed courses developed through collaborations across disciplines and sectors.

The Australasian Institute of Clinical Governance (AICG), a division of HEAL, is now firmly established in the organisation and is committed to improving patient safety and quality care through excellence in clinical governance education. The AICG was formed in direct response to an identified need for healthcare professionals to strengthen their skills in clinical governance. It is the foundation for its flagship course, the Certificate in Clinical Governance for Patient Safety and Quality Care.

# Chairman's Report



One of the advantages of small companies is their ability to pivot rapidly to embrace new opportunities. Following initial steps in 2019/20, HEAL has not only flipped from face-to-face into online learning but has also added several new offerings. Aspiring clinicians and healthcare leaders can now find at HEAL and the AICG much of what they need to complement their clinical knowledge and skills so that they can lead their workplace's approach to safety and quality with newly acquired clinical governance skills. This training is now available to them in an improved, user friendly, format that suits the busy life of a clinician.

I congratulate our CEO, Beverley Sutton, and our Director of AICG, Melanie Hay, and every other member of the remarkable HEAL team on a fine year in which the energy, vitality and patronage of the company has grown substantially despite staff working almost 100% from home and in lockdown for a good portion of the year, and all whilst keeping to budget! As renowned American pilot Amelia Earhart said, "The most difficult thing is the decision to act. The rest is merely tenacity." Bev and the team are living this creed. I would also like to congratulate those clinicians who have made the decision to add to their safety, quality and leadership capability by engaging with HEAL and AICG courses in the last year, despite all the challenges this pandemic has thrown at them.

Finally, I would like to thank the HEAL Board for another highly successful year. I feel privileged to work with such a talented and capable group of directors who continue to find the time to donate their expertise to make a difference to healthcare, despite holding busy and substantial daytime roles elsewhere. Particular thanks to David Knowles, Deputy Chair, and Chair of the Finance and Risk Committee and to Rob Sadler, Chair of the Business Development/AICG Committees for their expert discerning and constructive approaches to building HEAL's future. Congratulations go to our director, Dr Hung The Nguyen, for being nominated Victoria's General Practitioner of the Year.

As Victoria and the rest of Australia begins to emerge from lockdown, HEAL and the AICG are well placed to deliver the much-needed clinical governance training Australia and New Zealand requires. HEAL/AICG is also ready to fill the gaps in clinical governance identified by the recent royal commissions into residential aged care and mental health whilst continuing to provide our robust international medical graduate and simulated participant training programs.

Professor Harvey Newnham  
Chair, Board of Directors

# Chief Executive Officer's Report

Last year I ended my report with the need to call on our resolve in light of the evolving pandemic. At the time we all hoped that this financial year would bring hope, but if I had a dollar for every time I heard someone say thank goodness we are saying goodbye to 2020, I would be very comfortable!

The beginning of 2021 didn't bring the hope we were all seeking and to be honest, it has been a challenging 2020/21 financial year. A year that was largely spent working remotely interspersed with a few months here and there where we were able to literally return to our new premises. This reality is not unique to most Victorians.

COVID-19 made it essential to grow our online capabilities, and with some early government support, and a flurry of development activities in this and the previous financial year, we were able to successfully continue to conduct all of our existing courses in the online environment and to provide that broader reach to participants both nationally and internationally. Despite this, it was still tough with some courses doing better than others. The year recorded a deficit of \$336,982 but it could have been much worse. All in all, an exceptional result in an extraordinary year.

In addition to our existing courses we also developed a new course that had been repeatedly requested through course evaluations, Management for Health Professionals. This course provides health professionals with basic management principles as they transition into management roles.

The Australasian Institute of Clinical Governance (AICG), under the very capable leadership of Melanie Hay, also had a busy year. After postponing our inaugural AICG Patient Safety and Quality Care symposium last year, that was planned as a face-to-face event, we decided to wait no longer and on 23 June 2021 we held a one day virtual event that showcased 25 speakers across clinical governance, culture and collaboration and leadership topics. Melanie also implemented the AICG Expert Advisory Committee, an extremely accomplished group of patient safety and quality experts to assist in guiding the activities of the AICG.

So, my focus this year is to give credit where credit is due, to my team, who have not once complained about the situation, but rather worked incredibly hard to make every post a winner by rising to every challenge and remaining focused and true to our goals and objectives throughout the year. In some ways, even though working remotely, COVID-19 has brought us even closer together as we share the same challenges, and I can't deny I have really enjoyed our weekly HEALer Wellbeing meetings where we explore everything (other than work) and more! I am so privileged to work with such a great team and I thank each and every one for their contribution.

I remain indebted to our Chair, Professor Harvey Newnham, and the Chairs of the Board subcommittees; Mr David Knowles and Dr Robert Sadler and all of our Directors who have provided enduring support through a year of transition and uncertainty. I am also enormously grateful to our partners, collaborators, tutors and facilitators who support and engage with our programs and participants with such professionalism, passion and expertise. Finally, thank you to all of our graduates who have supported our courses despite the difficulties of the current climate.

COVID-19 continues to change our lives and as we settle in to a new normal we remain optimistic...

*"No pessimist ever discovered the secrets of the stars, or sailed to an uncharted land, or opened a new heaven to the human spirit." - Helen Keller*

Beverley Sutton  
Chief Executive Officer



# Directors' Report

The Australasian Institute of Clinical Governance (AICG), a division of HEAL, remains the focus of HEAL's strategic and business plan. A significant investment in the AICG has enabled us to support all healthcare professionals, particularly middle managers and clinicians with education programs designed to empower individuals and organisations to maximise patient safety and quality care. The Certificate in Clinical Governance for Patient Safety and Quality Care, our flagship program, is gaining important traction among all health professional disciplines from all healthcare sectors.

Unfortunately a further year of the COVID-19 pandemic, particularly causing extensive lockdowns in Victoria, meant we were still unable to provide face-to-face training opportunities and meant that all of our workshops were provided online. As with the previous year, this translated to an inability to maximise all of our program offerings. Nevertheless we managed to minimise our loss through better than expected online sales and recorded an end of financial year net deficit of \$336,982 against a budgeted deficit of \$1,019,241 (ahead of budget by \$682,259).

AICG programs are closely monitored through a newly created AICG Committee, chaired by Dr Robert Sadler. The committee meets at the same time as the Business Development Committee (BDC) and has the same membership of both Board Director and staff representation. Along with the AICG programs, new programs are closely monitored through key performance indicators (KPIs), both financial and operational, and all timelines are reviewed. The AICG Committee and the BDC informs the Finance and Risk Committee (FRC) and the Board of Directors.

The HEAL Board has also continued to be advised by the Finance and Risk Committee (FRC) with Mr David Knowles as the Chair and Mr Stephen Fitzpatrick as the Deputy Chair. The FRC continues to manage HEAL's finances and investment portfolio. Mr David Knowles also chairs the Thought Leaders Committee and the EPF Committee. The Nominations Committee, continues to be chaired by Professor Harvey Newnham.

## HEAL – Our Vision

### **Vision:**

Improving healthcare through innovative education.

### **Purpose (Mission):**

To deliver education to health professionals and others engaged in the healthcare industry that is collaborative and responds to identified needs.

We do this by identifying opportunities to develop healthcare education through staff development, industry experience and knowledge of the market.

HEAL fosters the following attributes:

- Our not-for-profit status
- Our autonomy, structural flexibility and adaptability
- Our capacity for national and international reach
- Our multidisciplinary approach



## Values:

- **Dedication:**  
Passionate and professional commitment to the accountable delivery of high quality improvements in health education
- **Depth:**  
Enhancing our knowledge and capabilities to identify opportunities in health education
- **Engagement:**  
Embracing collaboration and fostering relationships that benefit the health education sector

## AICG – Our Vision

This year the AICG reviewed its Vision and Purpose statements to bring them in to line with the evolved belief that it is the individuals working in healthcare organisations that hold the power to reduce the occurrence of complications. By empowering these individuals through education, we can work towards improving patient safety and quality care and deliver better health outcomes for the community.

### Vision:

Old version – Committed to improving patient safety and quality care through excellence in clinical governance

Current version – Safe and quality care through excellence in clinical governance

### Purpose (Mission):

Old version – Clinical Governance is a system by which all staff (clinical and non-clinical) in the healthcare industry share responsibility for patient safety and quality care. The Australasian Institute of Clinical Governance (AICG) is committed to improving patient safety and quality care through health professional development and education programs in clinical governance competencies

Current version – By empowering healthcare providers through clinical governance education, we improve safety and quality of patient and consumer care

## Principal Activities – Our Programs

HEAL continues to offer a variety of programs to health professionals that include online and face-to-face courses across Australia and internationally. Some courses are specifically targeted to particular disciplines such as our international medical graduate program and others have multiple accreditation status to assist a broad range of health professionals with their continuing professional development (CPD). Others, like our simulated participant program, are intended to assist in the delivery of quality health education through client healthcare organisations.

### Core Programs:

- **International Medical Graduate Program**  
International Medical Graduates (IMGs) who seek to work as medical practitioners in Australia may need to sit the Australian Medical Council's (AMC) examinations. HEAL offers a range of courses, both face to face and online, which assist IMGs to prepare for their exams.
- **Simulated Participant (SP) Program**  
Simulated participants (SPs) play an important role in healthcare education, helping students to hone their diagnostic and communication skills. The HEAL SP program provides a database of consistently trained SPs that are available to hire by client organisations for health education programs that include high stakes exams and other training and educational encounters.

## Programs Newly Released and Under Development:

- **Clinical Data Analytics Course**

As a corollary of the AICG courses in clinical governance systems, it was appropriate to provide a course to assist healthcare professionals to collect, analyse, interpret and manage data to improve patient outcomes. The course has been written by a Subject Matter Expert (SME) and is currently being built ready for release in October 2021.

- **Management for Health Professionals Course**

Through various feedback and evaluation sources we received repeated requests for an online course that provided for those clinicians keen to take on more management tasks. A course was developed to provide education in management utilities such as managing resources, rostering, budgeting and managing people. Early feedback shows, that as a result of the course, participants gain the confidence to be proficient in these newfound responsibilities.

- **AMC Clinical Exam Preparation Webinars**

A newly formatted AMC Clinical Exam Preparation Webinar series was implemented free of charge to all IMGs as a part of the IMG social enterprise program. Interactive online sessions with an experienced clinician assist IMGs in preparing for their AMC Clinical Exam.

## Reconciliation Action Plan (RAP)

Reconciliation Australia provides a framework for organisations to support the national reconciliation movement. The RAP Program contributes to advancing organisations to develop respectful relationships and create meaningful opportunities with Aboriginal and Torres Strait Islander peoples.

The framework provides four types of RAP that an organisation can develop: Reflect, Innovate, Stretch, and Elevate. Each type of RAP is designed to suit an organisation at different stages of their reconciliation journey. Each of the four RAP types set out the minimum elements required by an organisation to build strong relationships, respect and opportunities within the organisation and community.

HEAL commenced its RAP journey by registering and submitting an initial version of the Reflect RAP in March 2021. This document sets the foundation and clearly describes steps to prepare the organisation for reconciliation initiatives in successive RAPs. A commitment to a Reflect RAP will allow HEAL to spend time scoping and developing relationships with Aboriginal and Torres Strait Islander stakeholders, deciding on our vision for reconciliation and exploring the sphere of influence, before committing to specific actions or initiatives. This process will help to produce future RAPs that are meaningful, mutually beneficial and sustainable.

HEAL remains aligned to its short and long term objectives of the organisation.

## Short Term Objectives

The organisation's short term objectives are to provide national educational opportunities for healthcare professionals by:

- identifying relevant education and training programs for healthcare professionals
- developing relevant education and training programs for healthcare professionals
- implementing relevant education and training programs for healthcare professionals
- maintaining an income stream to support HEAL programs

## Long Term Objectives

The organisation's long term objective is to be an established educational organisation that provides continuing education to healthcare professionals nationally and throughout Australasia.

## Strategy for Achieving Objectives

In order to achieve these objectives, the organisation will:

- promote the organisation to healthcare professionals through organisational marketing, participation in relevant conferences and forums and through the active development of strategic alliances and collaborations
- provide quality courses to healthcare professionals

## Performance Measures

The following performance measures are used within the organisation to monitor performance:

- Course registrations
- Course feedback and evaluations
- Financial performance indicators

## Directors' Benefits

No director has received or become entitled to receive, during or since the financial year, a benefit because of a contract made by the organisation, controlled entity or a related body corporate with a director, a firm of which a director is a member, or an entity in which a director has a substantial financial interest. This statement excludes a benefit included in the aggregate amount of emoluments received or due and receivable by directors shown in the organisation's accounts, or the fixed salary of an employee of the organisation, controlled entity or related body corporate.

## Meetings of Directors

The number of official meetings of the organisation's directors held during the financial year and the attendance of directors at those meetings were:

<b>Directors</b>	<b>Number eligible to attend (inc. AGM)</b>	<b>Number attended</b>
Harvey NEWNHAM (Chair)	7	7
David KNOWLES (Deputy Chair)	7	7
Leanne BOYD	7	6
Stephen FITZPATRICK	7	6
Nellie GEORGIU-KARISTIANIS	7	5
Amy KIRKWOOD	7	4
Hung The NGUYEN	7	7
Robert SADLER	7	7

## Auditor's Independence Declaration

A copy of the auditor's independence declaration as required under section 60-40 of the Australian Charities and Not-for-profits Commission Act 2012 is included in this report.

## Member's Guarantee

The organisation is a company limited by guarantee under the Corporations Act 2001. If the organisation is wound up, the constitution states that each member is required to contribute a maximum of \$10 towards meeting any outstanding obligations of the organisation. At 30 June 2021, the number of members was eight.

Signed this 29<sup>th</sup> day of September 2021 in accordance with a resolution of the Board of Directors.



Professor Harvey Newnham – Chair, Board of Directors



Mr David Knowles – Deputy Chair, Board of Directors

# 2020/21 Highlights

## Governance

- Implementation of the AICG Committee, a committee of the HEAL Board
- Development of a HEAL Reconciliation Action Plan (RAP)
- Consolidation and acknowledgement of HEAL's 100 year anniversary

## Organisation – General

- Focussed on the growth of the Australasian Institute of Clinical Governance (AICG) – a division of HEAL
- Revisited the organisational chart and refined position descriptions to align with organisational growth
- Appointed a Manager of Education and Business Development

## International Medical Graduate Program

- Expanded free AMC Clinical exam preparation webinar series
- Launched After Hours Online Clinical Bridging Course
- Launched Online Clinical Trial Exams

## Simulated Participant (SP) Program

- Increased client bookings resulting in the most successful year for our SP program
- Transitioned SPs to online portrayals in response to COVID-19 lockdown restrictions

## Australasian Institute of Clinical Governance (AICG)

- Established the AICG Expert Advisory Committee
- Signed a Partnership Agreement (MoU) with the Health Quality and Safety Commission of New Zealand
- Formally registered and launched the release of the AICGG 'Graduate' post nominal
- Delivered the inaugural AICG Patient Safety and Quality Care Symposium
- Grew the AICG facilitator faculty
- Engaged an AICG content writer

# International Medical Graduate Program

Mid-way through 2020, it was hoped that the pandemic was not going to be a long-lasting interruption to business as usual. At June 2021, we still find ourselves fully submerged in its effect. It isn't all bad news since our online clinical courses, launched at the beginning of this financial year, continue to attract International Medical Graduates (IMGs) from around Australia and around the world.

Online learning has become the norm and a more accepted way for education. It also allows working doctors who are yet to sit their Australian Medical Council (AMC) clinical exam, to participate in a bridging course without causing too much of a disruption to their work. With this audience in mind, we developed an After-Hours Clinical Course which offers classes in the evenings and on weekends which generally allows navigation around work hours.

## MCQ Courses

IMGs needing support to pass their Multiple Choice Question (MCQ) exam, have continued to support our online MCQ Self-Directed learning courses. Dozens of IMGs looking for guidance as they prepare for their MCQ exam have opted in to our learning management system. We are also updating the content within these courses to be a reliable resource for IMGs who are just commencing their AMC journey.

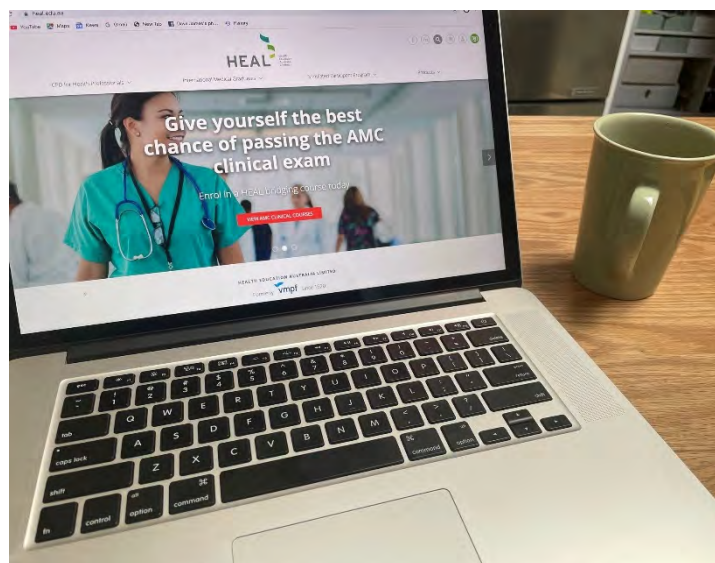
## Clinical Courses

The newly developed online clinical courses assist IMGs to sit the clinical components of the AMC examination. The HEAL clinical courses were adapted for the online environment and have run consistently since the beginning of the financial year, often resulting in sufficient numbers to facilitate two courses simultaneously.

Similarly, as a result of the pandemic, the AMC introduced an online version of the exam to counteract the limitations of travel and social distancing which prevented IMGs and testing staff from attending the National Testing Centre in Melbourne.

As a consequence, HEAL also introduced an online version of the Clinical Trial Exam, replicating as closely as possible the AMC online exam. We were fortunate to meet with key stakeholders from the AMC in the lead up to designing our trial exam to support our process. To date, we have run two Online Trial Exams and the feedback from candidates who sat our Online Trial Exam, and subsequently were successful in the AMC online exam, expressed how important it was that the HEAL exam was closely aligned with the format of the AMC exam.

To reassure our IMGs that we hadn't forgotten that we were best known for our face-to-face clinical courses, we advertised classroom based courses in Melbourne and Sydney in between lockdowns. However, there was a hesitation to return to the classroom with the uncertainty of the pandemic and students overwhelmingly choosing to apply for our online courses instead.



## HEAL Online

Our Learning Management System (LMS) was critical to the introduction of our online clinical courses. It offered the platform to host the pre-reading recommended before every class and also allowed us to host the tutor presentations that are delivered in class. The presentations were recently reviewed and updated and are offered to students to revise the content after the associated classes. Additionally, the LMS hosts almost 200 topic modules, many of which have been reviewed and updated by HEAL's Medical Advisor, Professor Robert Moulds with the assistance in part, of Dr Asiri Arachchi, a surgeon from Monash Health. The review is ongoing.

Another feature of the LMS is the ability of our IMG students to receive full access to the Therapeutic Guidelines' eTG Complete. HEAL IMG students are then provided with a further 12 month access post their course end date. This is a valuable addition to the resources made available to IMGs preparing for their exam.

## Partnerships

We would like to acknowledge the support that our partners have offered the IMG program over the last year.

Since 2002, we have partnered with Victoria University (VU) to offer IMGs the opportunity to access the FEE-HELP loan scheme for our clinical courses. Over the last year, VU has been supportive in our remodelling of the face-to-face clinical bridging course to an online format, again with the option to offer FEE-HELP. We sincerely thank VU for their ongoing support of the IMG program.

The pandemic's effect on classroom-based courses meant that our long history with Granville TAFE (NSW) unfortunately came to an end. HEAL started offering MCQ and Clinical bridging courses onsite at Granville TAFE in 2014 but with the move to online classes a physical classroom space was no longer needed. We are grateful to the many staff who provided support to HEAL's administration staff, tutors and our IMG students throughout this time.

The pandemic also saw a temporary suspension to hospital visits but we remain optimistic that at some time in the near future we can re-engage our valuable relationships with Austin Health (Melbourne) and Blacktown, Mount Druitt and Westmead Hospitals (Sydney).

We'd also like to acknowledge the partnership we have with Therapeutic Guidelines. Under this partnership, our IMG students have access to the full eTG Complete database which offers health professionals reliable and independent therapeutic information. Our partnership agreement allows IMGs a 12 month subscription and access to eTG Complete.

## A HEAL Success Story

### Dr Mehreen Fatima – Past Student and Current Tutor/Examiner

*My journey with HEAL started as a student back in 2009, when it used to be known as VMPF. As a newly arrived immigrant Doctor to Australia and with modest clinical experience, I was expecting a long and hard journey towards clearing the AMC licensing exams. However, with the help of excellent tutors at HEAL, some of whom turned out to be my mentors later on, I was able to complete both exams within one year, on my first attempt, scoring amongst the top 15 in Australia.*



*The academic environment at HEAL was so inspiring that I felt motivated to teach there and to particularly be able to help IMGs to succeed in their careers in Australia just as I was helped by the institute itself. As a result, since 2010 I have been a part of the wonderful 'family' at HEAL, teaching MCQ and Clinical courses across Melbourne, Perth and Sydney along with being a Trial Examiner.*

*During all these years working at HEAL, I have developed a wonderful network of friendship with my fellow tutors, students of different nationalities and backgrounds and especially the wonderful HEAL staff. I have witnessed HEAL burgeon into a major player in health education and training industry and I am especially proud of being there when we celebrated 100 years of clinical excellence at HEAL!*

*Since last year, keeping in line with the changing teaching methods all over the world when the COVID epidemic hit, we also transitioned all our courses to be delivered via online format. This required us to review all our teaching content, and mould it to suit a virtual classroom environment, meanwhile making sure the most updated Clinical Practice Guidelines were assimilated within. I was entrusted with the task and thankfully was able to complete it with guidance and help of our IMG support team.*

*In order to facilitate learning, our LMS now has the most up to date course content for candidates doing the MCQ or Clinical courses online. This also helps our tutors to go about their teaching in an organised manner. The transition from classroom to onscreen educational methods was a difficult one, but I believe when you have good support from a dedicated team, it gets much easier to overcome hurdles. I have felt encouraged and motivated to work harder and better by the team at HEAL, especially by Mark Dare, Violetta Micevski and Shannon Maddern-Daniels.*

*HEAL has come a long way since its inception, and I wish every success in all the endeavours it may take up in future.*

**Dr Mehreen Fatima**



## A HEAL Success Story

### Dr Alena Sannikova – Past Student and Tutor/Examiner

*My journey with HEAL started quite accidentally, I must have been in VMPPF data base from years ago when I was looking to join the course in Melbourne but there was no space. When I got an email from Mark Dare in 2013 offering a spot for Sydney's AMC clinical preparation course, I was doing yoga teacher training in Bali, ready to give up my career as a doctor in Australia and become a travelling yoga teacher. This was 3 years after I passed the AMC MCQ and embarking on the second exam seemed an impossible task.*

*With the enormous support of the HEAL tutors and repeated HEAL clinical trial exams, which are almost identical to the real AMC exam, I finally passed the AMC clinical exam after two attempts in 2015.*

*These 3 years were the most difficult time in my life so far. The time of identity loss, uncertainty, and insecurity, both personal and financial.*

*I was fortunate to have HEAL as an organisation and Mark personally and professionally supporting me through these times. I will be forever grateful to HEAL for providing me with an employment opportunity, which helped me to grow personally and professionally (and supported me financially).*

*Teaching for HEAL's clinical and MCQ preparation courses encouraged the culture of learning by reviewing contemporary research and academic literature. This is in a bid to address never ending questions from a group of professionals in the HEAL class, some of those were significantly more experienced than me.*

*Tutoring was rewarding and gratifying, as it has provided me with the opportunity to pass on the experience of AMC examination and share the insights of personal learning. It has also contributed to significant personal growth over the years. This is when considering cultural sensitivity and cultural relativism, which was particularly important and relevant when entering the Australian workforce.*

*Engagement with HEAL over the years also helped networking, and eventually led to obtaining the observership at one of Sydney's hospitals. Again, HEAL was supportive of this, promoting a culture of hope and optimism.*

*In August 2016 I finally got my first job offer, and my life took another direction since then.*

*I am now an Advanced Trainee in Psychiatry working in Sydney's major metropolitan hospitals. While this is another "the most difficult time in my life", it is a different story now. Hopefully in the next 2 years I will finish the training and will open my own psychiatric practice and will be working 2-3 days per week and never (ever) study again and can teach at HEAL again the other 2 days per week. 😊*

*I frequently remember HEAL, and had a pleasure to participate in the trial exam recently as an examiner. I wish I could dedicate more time to teach at HEAL again and looking forward to the opportunity to do so in the future as a consultant psychiatrist. This is to help IMGs to achieve what I have achieved with the support of HEAL and to help carrying the hope and optimism for the IMGs.*

**Dr Alena Sannikova**

# Simulated Participant Program

In a period that is still highly affected by the pandemic, educational or examination encounters with Simulated Participants (SPs) could well have drawn to a halt due to travel and social distancing restrictions that came with lockdowns. The opposite proved to be true. 2020/2021 became one of the SP Program's busiest years with the adoption of online encounters on platforms like Zoom.

In addition, clients running high stakes examinations needed to consider alternative models that allowed them to proceed with their usual program schedules, with some adopting an online approach and others running exams in multiple locations that avoided the need for exam candidates to board a plane and travel. HEAL was involved in sourcing SPs for locations that we don't usually service and we are grateful to a range of SP contacts for their assistance in this.

The HEAL SP Program has assisted clients with their SP requirements since 2013. Across these eight years we have retained our inaugural clients but continue to build our client base. Increasing our SP engagement numbers across this year demonstrates the standard of and valued contributions of our SP portrayals.

For the financial year we placed SPs in over 470 engagements with 19 clients, that often have a number of divisions within their organisation, that are each engaging SPs. The majority of these engagements have been in the latter half of the financial year as clients adjusted to the new environment and COVID-19 requirements.

It is also pleasing that we can provide ongoing employment to our SPs who have demonstrated the quality of their portrayals, their professionalism and flexibility to adjust to delivering a portrayal in an online environment. We thank each and every one of our SPs and clients.

We gratefully acknowledge the following key clients who partnered with us on multiple occasions throughout the year:

- Australian Catholic University (ACU)
- Australasian College of Emergency Medicine (ACEM)
- Australian Health Practitioners Regulation Agency (AHPRA)
- Australian Physiotherapy Council (APC)
- Latrobe University
- Monash University
- Swinburne University
- Victoria University

## SP Client Feedback

*“Our undergraduate and postgraduate mental health simulations aim to provide nursing students with the opportunity to develop and practice key communication and assessment techniques in preparation for clinical practice. HEAL and their amazing team of simulated participants have been instrumental in enabling us to continue running the simulation sessions through this very challenging year.*

*The simulated participants are highly trained and dedicated, helping to provide high quality simulation experiences for our students. They have been flexible in this uncertain time, moving quickly to portraying their role online when needed or attending face to face and taking on all the COVID safe practices expected while on campus. Their ability to portray a range of roles that help lead to nurses better equipped to communicate in clinical practice is outstanding and we could not have done it without them and their expertise.”*

**Samantha Dix**  
**(Monash University, Nursing & Midwifery)**



*“Although the running of our clinical assessments was severely impacted by COVID-19 over the last year, we did manage to complete a high number of assessment days. Having support from HEAL really helped to make this possible. The quick responses to requests, and very flexible, professional SPs, really speaks to the high quality of service that HEAL provides.*

*Our assessors often comment on how realistic the patient portrayals are, and the highest compliments they can give are when they comment that the portrayal was so accurate that it reminded them of one of their own patients. This accuracy is also important as it means the assessors can fully focus on the performance of the candidate they are assessing, rather than worry that the patient portrayal will negatively impact the assessment.*

*We are grateful for the SP program HEAL provides, and would recommend them to any other organisation looking to utilise SPs for their own simulation requirements. “*

**Natalie Wilkie**  
**(Australian Physiotherapy Council)**



## HEAL SP Testimonials

*“I have worked with HEAL since 2020, during a pandemic in fact, portraying various roles in person or via Zoom.*

*Working as a Simulated Actor/Simulated Patient for HEAL has been one of the best experiences of my career. I have a deeper appreciation for mental health and health systems within Australia. I have worked in mental health, nurse education, psychiatry, emergency medicine and much more, every experience is unique. I appreciate being able to share and hone my skills as an actor, while working with many organisations perpetuating the future of healthcare and medicine in Australia.*

*HEAL staff members are very professional and timely, always ready to help should you need it. I have made connections with other Simulated Patients and we seem to circuit similar jobs now becoming friends. It is always nice to work with people you know and catch up during lunch.*

*I am so glad that I am involved in Simulated Patient work and will forever be grateful for all the opportunities I have had this far. My advice to other actors, get involved this is a growing industry, expanding each year. There are many ways to use our skills as actors other than on film, television or stage and this is one of them. I hope to work with HEAL for years to come.”*

**Natasha Milazzo**  
**HEAL SP**



*“It's been a pleasure to be involved with HEAL as a Simulated Patient for some years. I'm a professional actor of some 45 years and have worked (and still do) in all fields of the performing arts. In the incredibly stressful times we are living through it's essential that HEAL's exemplary work continues to the highest standard possible. I see exactly that, time and time again, each time I'm called upon. The other personal aspect of this work is representing women in our population and being able to play my own age. I have great respect for the HEAL team and all you contribute to our State's health and wellbeing.“*

**Robyn Arthur**  
**HEAL SP**



## Australasian Institute of Clinical Governance (AICG)

AICG conducted all educational offerings in a virtual environment for the entire year, as the COVID-19 pandemic continued to give new meaning to 'business as usual'. As a result, we were able to significantly exceed key performance indicators for the financial year through the ability to reach a much broader audience, both from a geographical and sector standpoint.

Geographically, participants from outside of Victoria now make up 68% of all enrolments, with New Zealand participants making up 10% of all enrolments. From a sector standpoint, we have seen an increase in the number of participants from aged care, disability and community care organisations, as more and more sectors are realising the importance of clinical governance and discovering AICG through our various marketing channels.

Our online course offering also expanded with the launch of the Management for Health Professionals course, which was designed for health professionals who are transitioning to a management role to help prepare them and build confidence in their management skills.

## Inaugural AICG Patient Safety and Quality Care Symposium

Along with delivering all courses in a virtual environment, AICG's inaugural Patient Safety & Quality Care Symposium was also held virtually on 23 June 2021. This 1-day event was emceed by Director of AICG, Melanie Hay, and attended by approximately 100 delegates who listened to keynote presentations, panel sessions and research projects from 25 international, Australasian and award winning speakers across clinical governance, culture and leadership topics.



## AICG Expert Advisory Committee

In late 2021 the AICG established, and convened the first meeting of, its Expert Advisory Committee. Committee members include:

- **Dr Anthony (Tony) Bartone** – Former Federal and Victorian President of the AMA
- **Ms Gillian Bohm** – Chief Advisor Quality & Safety, Health Quality and Safety Commission of New Zealand
- **Prof George Braitberg** – Executive Director Strategy, Quality & Improvement, Royal Melbourne Hospital
- **Dr Geoffrey Hirst** – Former non-Executive Director of the Mater Group Board
- **Dr Frances Hughes** – Group General Manager, Clinical and Care Services, Clinical Director, Oceania Healthcare
- **Ms Cheryle Royle** – Former hospital CEO and Australian Commission on Safety and Quality in Health Care (ACSQHC) Board member
- **A/Prof Lynn Weekes** – Former CEO NPS MedicineWise

## Health Quality & Safety Commission of New Zealand

The AICG further strengthened its working relationship with the Health Quality & Safety Commission of New Zealand and entered into a partnership arrangement to build workforce capability in quality and safety competencies in the New Zealand healthcare system. Signing of the MoU saw the rollout of a series of sponsored Certificate in Clinical Governance program places and workshops along with the release of an Expression of Interest to build the AICG NZ facilitator faculty.

## AICG Graduates

To date, AICG has educated almost 1,800 health and care professionals, with over 1,300 workshop enrolments and over 1,400 online course enrolments.

222 health and care professionals have now graduated from the Certificate in Clinical Governance for Patient Safety & Quality Care and can now proudly display the AICGG post nominal, which was formally registered this financial year. The AICGG post nominal is reserved solely for Graduates of the certificate course to recognise their knowledge and expertise in clinical governance.

## Additional Activities

The following are a selection of the additional activities undertaken by the AICG this year:

### Conference Sponsorship

As part of our marketing strategy, AICG was the Major Sponsor of the Safer Care Victoria *Giant Steps* Conference, where over 1,000 primarily Victorian delegates attended a 1-day virtual event focussed on safety and quality in healthcare.

### Website upgrades

As course purchases increased, our website infrastructure needed to evolve in order to streamline administrative processes. In January 2021, AICG rolled out new website upgrades that enabled the seamless transfer of data from the website to the Customer Relationship Management (CRM) program, and also allowed AICG staff members to create invoices upon request through the website, thus limiting the need to involve the accounts department in these transactions. From a design perspective, these updates provided a better user experience for people enrolling in the Certificate course.

### Corporate branding video

AICG invested in a professional company branding video to be shown at sponsored conferences, the AICG Patient Safety & Quality Care Symposium and advertised through our social media channels. This video lives on the AICG website and serves to capture the vision and mission of AICG, whilst simultaneously educating the viewer about clinical governance.



## AICG Course Feedback

*"It was nice to be in a Zoom meeting that was well run with expectations!"*

*The time to discuss in breakout spaces, the fact that groups were organised and sent through promptly was very professional."*

**Jessica Condliffe – 3 June 2021**  
**Applied Clinical Governance Workshop**



*"The workshop offered a good structure and approach to clinical governance which may be applied broadly. Jennifer was really engaging and her explanation of principles and their application very clear and practical."*

**Melanie Tan – 13 April 2021**  
**Applied Clinical Governance Workshop**



*"Absolutely fantastic workshop. Lloyd kept our attention and was extremely knowledgeable. I loved how he used his tablet as a whiteboard to keep the note taking part interactive and it really was like we were in the room with him. Very high level online workshop – the best one I've been to because of Lloyd's expertise!"*

**Jessica Condliffe – 3 June 2021**  
**Advanced Leadership Workshop**



*"Lloyd was highly engaging, respectful and very professional in managing the group. Excellent facilitator who ensured engagement and ample opportunity to ask questions."*

**Mary-Louise Egan – 2 June 2021**  
**Advanced Leadership Workshop**



*"Tanya was terrific. Probably the most engaging virtual facilitator that I have encountered throughout my "COVID" time."*

**Deborah Brown – 26 June 2021**  
**Building Culture & Collaboration Workshop**



*"Tanya was an absolute outstanding facilitator. She allowed questions and discussion but kept to time. It was interactive and provocative. Tanya's nature was engaging and built trust and strong connections early on. Perfect for this kind of workshop!"*

**Jessica Condliffe – 4 June 2021**  
**Building Culture & Collaboration Workshop**



*"Excellent course, will recommend to colleagues at my workplace."*

**Rajdeep Ubeja – 25 May 2021**  
**Building Culture & Collaboration Workshop**



*"All three days have been great but demanding. However, they built upon each other and provided excellent training."*

**Sally Roberts – 4 June 2021**  
**Building Culture & Collaboration Workshop**



# HEAL Foundation

This year the HEAL Foundation charitable activities were restricted by the COVID-19 pandemic. The Foundation operates as a separate division within HEAL to formally endorse a culture of fostering programs that support healthcare education with grants and free programs that are managed under the auspices of the Foundation.

The following are a selection of programs provided by the Foundation in this financial year:

## AICG COVID-19 Clinical Governance Webinar Series

COVID-19 challenged healthcare systems across the world and with it the importance of sharing information and continuous improvement initiatives with our colleagues.

Along with written articles, the AICG continued to provide a video series hosted by Director of AICG, Melanie Hay, where she interviewed clinicians across the country who have faced a challenge in light of the COVID-19 pandemic within their organisation. She reviewed the solutions that have been put in place and explored the outcomes that occurred. One example was an interview with Dr Stephen Warrillow, Director of ICU at Austin Health where he discussed the level of collaboration it took to get a real-time view of all ICUs to help those responsible for deploying and co-ordinating resources during COVID-19.



The webinar series is publicly available on the AICG website.

## Free Education to Frontline Workers

COVID-19 has placed an unprecedented demand on our healthcare professionals both from a physical and mental perspective. That toll continues today with healthcare professionals providing care for patients and the community despite exhaustion, personal risk of infection, fear of transmission to family members and the loss of patients. As COVID-19 impacted the healthcare system so did the need for healthcare professionals to spend time in isolation.

In recognition of the amazing job of our frontline clinicians who were required at times to isolate, we were not able to speed up the weeks, but we endeavoured to show our appreciation by providing free access to an online course, accredited for 6-9 hours of CPD. Health professionals were able to choose from three online courses from our Certificate in Clinical Governance.

## Sponsorship and Support

As a not-for-profit charitable organisation, we recognise the need to support our tutors, simulated participants, students and the broader community. Accordingly, HEAL offers a number of opportunities to engage in this way.

This year included the following:

- Free careers guidance and CV writing (for IMGs)
- Free training to become a HEAL tutor or facilitator
- Free simulated participant training
- Student discounts and promotions

# Other Programs

## ASBDD Secretariat

HEAL continued to provide secretariat services for the Australasian Society for Bipolar and Depressive Disorders (ASBDD). This service has been provided to ASBDD since its inauguration in 2005.

ASBDD is one of the founding chapters of the International Society for Bipolar Disorders (ISBD). The ASBDD early/mid-career Research (EMCR) sub-committee participated in the ISBD international conference that was held in Sydney in 2019 where the ISBD was encouraged to form an EMCR sub-committee at an international level. Although the ASBDD EMCR had been requested to assist in setting up the sub-committee, ISBD has since determined that they will prepare this from their international office in Philadelphia, USA.

ASBDD planned to conduct its biennial conference in October 2020, but this event was postponed due to the COVID-19 pandemic. It is hoped this event can proceed in early 2022.

Despite the pandemic, ASBDD and the EMCR sub-committee have driven the following initiatives in 2020/21:

- Held a series of virtual ASBDD symposiums featuring presentations from EMCRs and senior researchers in the field
- Awarded two prizes for best student and best EMCR presentation at the virtual symposiums
- Presented in a joint symposium with the EMCR sub-committees of the Society of Mental Health Research (SMHR) and Biological Psychiatry Australia (BPA) at the BPA2020 virtual conference.



# Directors, Staff and Memberships

## Directors

The names of the directors in office at any time during the reporting year are as follows:

Chair:	Professor Harvey <b>NEWNHAM</b> MBBS, FRACP, PhD, GAICD
Deputy Chair:	Mr David <b>KNOWLES</b> (Deputy Chair) CA, CPA, CTA, MAICD, AIMM, B.Comm (Melb), M. App Inn & Ent
Members:	Professor Leanne <b>BOYD</b> Dip App Sci, BN, Grad Cert Crit Care, MN, Grad Cert Higher Ed, PhD, Master Ter Ed Management, GAICD, MACN
	Mr Stephen <b>FITZPATRICK</b> BBus, ACHSM, HFMA, GAICD
	Professor Nellie <b>GEORGIU-KARISTIANIS</b> BSc.(Hons), PhD
	Ms Amy <b>KIRKWOOD</b> BA (Media & Communications), GDip of Psychology, MAICD
	Dr Hung The <b>NGUYEN</b> BMedSci, MBBS, FRACGP, MHP, GCHPE, GAICD
	Dr Robert <b>SADLER</b> PhD, LL.M, MBA, BEc, LL.B (Hons)
Secretary & CEO:	Ms Beverley <b>SUTTON</b> MBA, GCHPE, GCCS, DipCompProg, RN, RM, FACHSM, GAICD

## Finance & Risk Committee

Chair:	Mr David <b>KNOWLES</b>
Deputy Chair	Mr Stephen <b>FITZPATRICK</b>
Members:	Ms Les-Lea <b>GUY</b> Prof Harvey <b>NEWNHAM</b> (from September 2020) Ms Beverley <b>SUTTON</b>

## Thought Leaders Committee

Chair:	Mr David <b>KNOWLES</b>
Members:	Ms Amy <b>KIRKWOOD</b> Professor Harvey <b>NEWNHAM</b> Ms Beverley <b>SUTTON</b>

## Business Development Committee & AICG Committee

Chair:	Dr Robert <b>SADLER</b>
Members:	Professor Lee <b>BOYD</b>
	Mr Mark <b>DARE</b>
	Professor Nellie <b>GEORGIU-KARISTIANIS</b>
	Ms Melane <b>HAY</b>
	Dr Louise <b>McCALL</b> (until March 2021)
	Dr Hung The <b>NGUYEN</b>
	Ms Beverley <b>SUTTON</b>

## HEAL Staff

### Executive Staff

#### Chief Executive Officer

Ms Beverley Sutton

#### Director of AICG

Ms Melanie Hay

#### Director of Education

Dr Louise McCall (until March 2021)

#### Business Manager

Ms Les-Lea Guy

#### Senior Medical Advisor

Professor Robert Moulds

#### Manager of Special Projects

Ms Ann Dancer

### Administrative Staff

#### Manager of Programs

Mr Mark Dare

#### Marketing Manager

Ms Liana Moule

#### Manager, Education & Business Development

Mr Tyler Hyndman (from June 2021)

#### e-Learning Developer

Mr Dinesh Hewagamege

#### Program Coordinators

Ms Brittany Kiegaldie

Ms Shannon Maddern-Daniels

Mrs Violetta Micevski

## Teaching and Tutor Staff

Mr Paul Conroy – Principal – Language and Communications – Melbourne FEE-HELP  
Ms Catherine O’Grady – Principal – Language and Communications – Sydney FEE-HELP  
Dr Pip Wills – Principal – AMC Webinar Series  
Dr Mehreen Fatima – IMG Tutor and content reviewer

A further 34 IMG tutor staff provided tutorials and trial examination sessions for IMG Bridging Courses

## Simulated Participant Staff

66 Simulated Participant staff were hired to clients to provide healthcare education and assessment services

## AICG Facilitators/Contractors

Ms Jennifer Gale – Principal – Clinical Governance  
Ms Tanya Edlington – Principal – Culture and Collaboration  
Dr Lloyd Nash – Principal – Advanced Leadership

## Partners

Austin Health, Heidelberg, Victoria  
Blacktown Hospital, Blacktown, New South Wales  
Health Quality & Safety Commission, New Zealand  
Holmesglen Institute of TAFE and Healthscope Hospitals  
Monash Health, Clayton, Victoria  
Mt Druitt Hospital, Mt Druitt, New South Wales  
Victoria University, Victoria and New South Wales  
Westmead Hospital, New South Wales

## HEAL Memberships

### **Australian Medical Association (Victoria)**

Dr Hung The Nguyen

### **NPS Medicinewise**

### **Postgraduate Medical Council of Victoria**

Ms Beverley Sutton

### **Therapeutic Guidelines Limited**

Dr Hung The Nguyen (Director)

## **Auditor's Independence Declaration under Section 60 of the Australian Charities and Not-for-profits Commission Act 2012 to the Directors of Health Education Australia Limited**

I declare that, to the best of my knowledge and belief, during the year ended 30 June 2021, there have been:

- (i) 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
- (ii) no contraventions of any applicable code of professional conduct in relation to the audit.

### **ACCRU MELBOURNE (AUDIT) PTY LTD**



**C J FLYNN**

Director

50 Camberwell Road  
Hawthorn East Vic 3123

29 September 2021

## Statement of Financial Position

at 30th June 2021

	Note	2021 \$	2020 \$
<b>Current Assets</b>			
Cash and cash equivalents	3	559,542	955,270
Trade and other receivables	4	304,851	131,965
Other Assets	5	12,009	9,091
Inventories	6	6,414	6,820
<b>Total Current Assets</b>		<b>882,816</b>	<b>1,103,146</b>
<b>Non-Current Assets</b>			
Property, Plant & Equipment	7	369,066	407,395
Right of use assets	8	509,366	889,564
Investments	9	4,130,491	3,702,100
<b>Total Non-Current Assets</b>		<b>5,008,923</b>	<b>4,999,059</b>
<b>Total Assets</b>		<b>5,891,739</b>	<b>6,102,205</b>
<b>Current Liabilities</b>			
Trade & Other Payables	10	266,691	311,738
Other Liabilities	11	81,670	34,156
Provisions	12	264,895	263,874
Lease Liabilities	13	147,154	182,911
<b>Total Current Liabilities</b>		<b>760,410</b>	<b>792,679</b>
<b>Non-Current Liabilities</b>			
Provisions	12	10,921	6,494
Lease Liabilities	13	410,231	725,513
<b>Total Non-Current Liabilities</b>		<b>421,152</b>	<b>732,007</b>
<b>Total Liabilities</b>		<b>1,181,562</b>	<b>1,524,686</b>
<b>Net Assets</b>		<b>4,710,177</b>	<b>4,577,519</b>
<b>Equity</b>			
Retained Earnings/(Accumulated Losses)		(300,776)	(45,250)
Reserve		532,849	144,665
Contributed Equity - VMPF	14	1,371,885	1,371,885
Contributed Equity - MPF Trust	14	3,106,219	3,106,219
<b>Total Equity</b>		<b>4,710,177</b>	<b>4,577,519</b>

The accompanying notes form an integral part of these financial statements.

## Statement of Comprehensive Income

for the Year Ended 30th June 2021

	Note	2021 \$	2020 \$
<b>Income</b>			
Conference & Course Registration		1,116,803	851,786
Simulated Patient Hire		205,292	98,518
Interest Income		2,672	6,583
Grant Income		-	1,071,251
Sale of Publications		3,069	2,804
Other Income		20,000	37,890
<b>Total Income</b>		<b>1,347,836</b>	<b>2,068,832</b>
<b>Expenditure</b>			
Communication Expenses		24,850	29,093
Course Expenses		677,289	476,419
Employment Expenses		821,028	943,691
Finance & Legal Expenses		97,799	89,878
Occupancy Expenses		196,858	187,745
Project Development		-	2,205
Other Administration Expenses		304,314	380,319
<b>Total Expenses</b>		<b>2,122,138</b>	<b>2,109,350</b>
<b>Operating Surplus/(Deficit)</b>		<b>(774,302)</b>	<b>(40,518)</b>
<b>Add Other Income/(Expenses)</b>			
Investment Income		176,470	161,131
JobKeeper Subsidy		185,850	93,000
Business Cash Flow Boost		50,000	50,000
Victorian Business Support Fund		25,000	-
<b>Net Surplus/(Deficit)</b>		<b>(336,982)</b>	<b>263,613</b>
<b>Other Comprehensive Income</b>			
Fair Value Increment/(Decrement) of Investments		388,184	(140,043)
Net profit on sale of financial assets		81,456	7,379
<b>Total Comprehensive Income/(Loss) For The Year</b>		<b>132,658</b>	<b>130,949</b>

The accompanying notes form an integral part of this statement.

## Statement of Changes in Equity

for the Year Ended 30th June 2021

	Retained Earnings	Financial Assets Revaluation Reserve	Contributed Equity	Total
	\$	\$	\$	\$
<b>Balance 30 June 2019</b>	<b>(316,242)</b>	<b>284,708</b>	<b>4,478,104</b>	<b>4,446,570</b>
Surplus/(Deficit) attributable to members	263,613	-	-	263,613
Fair value increment/(decrement)	-	(140,043)	-	(140,043)
Net profit on sale of financial assets	7,379	-	-	7,379
<b>Balance 30 June 2020</b>	<b>(45,250)</b>	<b>144,665</b>	<b>4,478,104</b>	<b>4,577,519</b>
Surplus/(Deficit) attributable to members	(336,982)	-	-	(336,982)
Fair value increment/(decrement)	-	388,184	-	388,184
Net profit on sale of financial assets	81,456	-	-	81,456
<b>Balance 30 June 2021</b>	<b>(300,776)</b>	<b>532,849</b>	<b>4,478,104</b>	<b>4,710,177</b>

The accompanying notes form an integral part of this statement.

## Statement of Cash Flows

for the Year Ended 30th June 2021

	Note	2021 \$	2020 \$
<b>Cash Flows from Operating Activities</b>			
Receipts from course fees, sponsors, etc.		1,467,086	2,314,016
Payments to suppliers and employees		(2,095,930)	(2,239,626)
Interest received		3,439	11,581
Investment income received		189,258	166,863
<b>Net Cash (used in)/provided by Operating Activities</b>	<b>(a)</b>	<b>(436,147)</b>	<b>252,833</b>
<b>Cash Flows from Investing Activities</b>			
Sale of investments		560,298	663,415
Purchase of property, plant and equipment		(829)	(362,515)
Purchase of investments		(519,050)	(774,147)
<b>Net Cash (used in)/provided by Investing Activities</b>		<b>40,419</b>	<b>(473,247)</b>
<b>Net increase/(decrease) in cash held</b>		<b>(395,728)</b>	<b>(220,414)</b>
<b>Cash at beginning of Financial Year</b>		<b>955,270</b>	<b>1,175,684</b>
<b>Cash at end of Financial Year</b>		<b>559,542</b>	<b>955,270</b>

The accompanying notes form an integral part of this statement of cash flows.



## Note (a) – Reconciliation of Cash provided by Operating Activities to Operating Profit

	2021	2020
	\$	\$
<b>Surplus / (Deficit)</b>	<b>(336,982)</b>	<b>263,613</b>
<b>Adjustments:</b>		
Depreciation	39,158	30,800
(Profit)/Loss on Disposal of Assets	-	-
<b>Change in Assets and Liabilities:</b>		
(Increase)/Decrease in Accounts Receivable	(172,886)	26,834
(Increase)/Decrease in Inventories	407	349
(Increase)/Decrease in Other Current Assets	(2,919)	9,075
(Increase)/Decrease in ROU assets	29,158	18,860
Increase/(Decrease) in Trade and Other Payables	(45,047)	(87,116)
Increase/(Decrease) in Provisions	5,448	35,550
Increase/(Decrease) in Income in Advance	47,514	(45,132)
<b>Total Cash (used in)/provided by Operating Activities</b>	<b>(436,147)</b>	<b>252,833</b>

# Notes to the Financial Statements

for the Year Ended 30th June 2021

## Note 1 – Summary of Significant Accounting Policies

The financial statements are for Health Education Australia Limited as an individual entity, incorporated and domiciled in Australia. Health Education Australia Limited is a not-for-profit company limited by guarantee.

## Note 2 – Basis of Preparation

The directors have prepared the financial statements on the basis that the company is a non-reporting entity because there are no users who are dependent on its general purpose financial reports. This financial report is therefore a special purpose financial report that has been prepared in order to meet the requirements of the *Australian Charities and Not-for-profits Commission Act 2012*.

The financial report has been prepared in accordance with the mandatory Australian Accounting Standards applicable to entities reporting under the *Australian Charities and Not-for-profits Commission Act 2012* and the significant accounting policies disclosed below, which the directors have determined are appropriate to meet the needs of members. Such accounting policies are consistent with the previous period unless stated otherwise.

The financial statements, except for the cash flow information, have been prepared on an accruals basis and are based on historical costs unless otherwise stated in the notes.

## Revenue

Grant revenue is recognised in the statement of comprehensive income when the entity obtains control of the grant, it is probable that the economic benefits gained from the grant will flow to the entity and the amount of the grant can be measured reliably.

When grant revenue is received whereby the conditions of the agreement stipulates performance obligations that require fulfilling, the grant is recognised in the statement of financial position as a liability until the performance obligations have been fulfilled.

Revenue in relation to conference and course registration is recognised when the Company fulfils its performance obligations i.e. when the conference or course takes place.

Other income is recognised on an accruals basis when the Company is entitled to it.

## 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 Tax Office. In these circumstances, the GST is recognised as part of the cost of acquisition of the asset or as part of an item of the expense. Receivables and payables in the statement of financial position are shown inclusive of GST.

Cash flows are presented in the statement of cash flows on a gross basis, except for the GST components, which are disclosed as operating cash flows.

## Unexpended Grant Funds & Course Fees

Grants received by the organisation relate to specific projects or are awarded on an annual basis. The grant income is applied to a project and matched to the expenses incurred by that particular project. Income is recognised upon a performance obligation basis per AASB15. Income is brought to account when received and at the end of the financial year, unexpended grant monies against which future commitments have been made are carried forward and brought to account in the year in which the relevant expenditure is made.

## Fixed Assets

### ***Property, Plant and Equipment (PPE)***

Computer and office equipment are carried at cost less, where applicable, any accumulated depreciation.

The depreciable amount of all PPE is depreciated over the useful lives of the assets to the company commencing from the time the asset is held ready for use.

## Cash & Cash Equivalents

Cash and cash equivalents include cash on hand, deposits held at-call with banks, other short-term highly liquid investments with original maturities of three months or less, and bank overdrafts.

## Stock of Publications

Publications on hand at year end are brought to account at the lower of actual production and printing costs and net realisable value.

## Long Service Leave

The company provides for the long service leave entitlement of all employees on a pro rata basis plus on-costs and the amounts have been measured at their net present value.

## Income Tax

The company is exempt from income tax under Division 50 of the Income Tax Assessment Act 1997.

## New accounting standards for application in future periods

The AASB has issued new and amended Accounting Standards and Interpretations that have mandatory application dates for future reporting periods. The company has decided against early adoption of these Standards, but does not expect the adoption of these standards to have any significant impact on the reported position or performance of the company.

## Financial instruments

The company classifies non-derivative financial assets into the following categories which are described in detail below:

### *Trade and other receivables*

Loans and receivables are non-derivative financial assets with fixed or determinable payments that are not quoted in an active market. They arise principally through the provision of goods and services to customers but also incorporate other types of contractual monetary assets.

After initial recognition these are measured at amortised cost using the effective interest method, less provision for impairment. Any change in their value is recognised in profit or loss.

The company's trade and other receivables fall into this category of financial instruments.

Significant receivables are considered for impairment on an individual asset basis when they are past due at the reporting date or when objective evidence is received that a specific counterparty will default.

### *Financial assets – investments*

The company's financial assets comprise investments in listed securities. All financial assets are measured at fair value, with subsequent changes in value recognised in other comprehensive income.

Gains and losses arising from financial instruments are only recognised in profit or loss when they are sold or when the investment is impaired. In the case of impairment or sale, any gain or loss previously recognised in equity is transferred to the profit or loss.

*Impairment of financial assets*

At the end of the reporting period the company assesses whether there is any objective evidence that a financial asset or group of financial assets is impaired.

**Leases / ROU assets**

At the lease commencement, the Company recognises a right-of-use asset and associated lease liability for the lease term. The lease term includes extension periods where the Company believes it is reasonably certain that the option will be exercised.

The right-of-use asset is measured using the cost model where cost on initial recognition comprises of the lease liability, initial direct costs, prepaid lease payments, estimated cost of removal and restoration less any lease incentives received.

The right-of-use asset is depreciated over the lease term on a straight-line basis and assessed for impairment in accordance with the impairment of assets accounting policy.

The lease liability is initially measured at the present value of the remaining lease payments at the commencement of the lease. The discount rate is the rate implicit in the lease, however where this cannot be readily determined then the Company's incremental borrowing rate is used. \*\* The incremental borrowing rate used in calculations by the Company was 3.75%.

Subsequent to initial recognition, the lease liability is measured at amortised cost using the effective interest rate method. The lease liability is remeasured whether there is a lease modification, change in estimate of the lease term or index upon which the lease payments are based (e.g. CPI) or a change in the Company's assessment of lease term.

Where the lease liability is remeasured, the right-of-use asset is adjusted to reflect the remeasurement or is recorded in profit or loss if the carrying amount of the right-of-use asset has been reduced to zero.

The Company has elected to apply the exceptions to lease accounting for both short-term leases (i.e. leases with a term of less than or equal to 12 months) and leases of low-value assets. The Company recognises the payments associated with these leases as an expense on a straight-line basis over the lease term.

**Note 3 – Cash and Cash Equivalents**

	2021	2020
	\$	\$
Cash at Bank	199,515	595,381
Term Deposits	360,027	359,889
	<b>559,542</b>	<b>955,270</b>

**Note 4 – Trade and Other Receivables**

	2021	2020
	\$	\$
Trade Debtors	204,835	18,394
Sundry Debtors	100,016	113,571
	<b>304,851</b>	<b>131,965</b>

**Note 5 – Other Current Assets**

	2021	2020
	\$	\$
Prepaid Expenses	12,009	9,091
	<b>12,009</b>	<b>9,091</b>

**Note 6 – Inventories**

	2021	2020
	\$	\$
Stock of Publications	6,414	6,820
	<b>6,414</b>	<b>6,820</b>

**Note 7 – Property, Plant & Equipment**

	2021	2020
	\$	\$
<b>Leasehold Improvements</b>		
At Cost	328,470	328,470
Accumulated Depreciation	(27,698)	(18,040)
	<b>300,772</b>	<b>310,430</b>
<b>Office Furniture and Equipment:</b>		
At Cost	98,081	98,081
Accumulated Depreciation	(53,350)	(41,327)
	<b>44,731</b>	<b>56,754</b>
<b>Computer Equipment:</b>		
At Cost	102,813	101,984
Accumulated Depreciation	(79,250)	(61,773)
	<b>23,563</b>	<b>40,211</b>
<b>Total Property, Plant and Equipment</b>	<b>369,066</b>	<b>407,395</b>

**Movements in carrying amounts**

	Leasehold Improvements	Office Furniture and Equipment	Computer Equipment	Total
	\$	\$	\$	\$
<b>Balance at the beginning of 2020</b>	<b>28,997</b>	<b>31,519</b>	<b>15,164</b>	<b>75,680</b>
Additions	287,614	35,007	39,894	362,515
Depreciation expense	(6,181)	(9,772)	(14,847)	(30,800)
<b>Carrying amounts at the end of 2020</b>	<b>310,430</b>	<b>56,754</b>	<b>40,211</b>	<b>407,395</b>
<b>Balance at the beginning of 2021</b>	<b>310,430</b>	<b>56,754</b>	<b>40,211</b>	<b>407,395</b>
Additions	-	-	829	829
Depreciation expense	(9,658)	(12,023)	(17,477)	(39,158)
<b>Carrying amounts at the end of 2021</b>	<b>300,772</b>	<b>44,731</b>	<b>23,563</b>	<b>369,066</b>

**Note 8 – Right of Use Assets**

	2021	2020
	\$	\$
<b>Right-Of-Use asset:</b>		
At Cost	764,049	1,026,420
Accumulated Depreciation	(254,683)	(136,856)
	<b>509,366</b>	<b>889,564</b>

**Note 9 – Investments**

	2021	2020
	\$	\$
Investment at Fair Value	4,130,491	3,702,100
	<b>4,130,491</b>	<b>3,702,100</b>

**Note 10 – Trade & Other Payables**

	2021	2020
	\$	\$
Trade Creditors	67,408	59,996
Sundry Creditors	70,500	51,452
Grants Payable	20,903	20,903
Accrued Expenses	107,880	179,387
	<b>266,691</b>	<b>311,738</b>

**Note 11 – Other Current Liabilities**

	2021	2020
	\$	\$
Income in Advance	81,670	34,156
	<b>81,670</b>	<b>34,156</b>

**Note 12 – Provisions**

	2021	2020
	\$	\$
Provision for Annual Leave - Current	83,078	96,040
Provision for Long Service Leave – Current	181,817	167,834
Provision for Long Service Leave – Non - Current	10,921	6,494
	<b>275,816</b>	<b>270,368</b>

**Note 13 – Lease Liabilities**

	2021	2020
	\$	\$
<b>Current</b>		
Lease Liability	147,154	182,911
	<b>147,154</b>	<b>182,911</b>
<b>Non-Current</b>		
Lease Liability	410,231	725,513
	<b>410,231</b>	<b>725,513</b>

**Note 14 – Contributed Equity**

In 2014, to better facilitate national operations, the activities, financial management and assets of VMPPF were transferred on 1 January 2013 to the associated company limited by guarantee Health Education Australia Ltd. A contribution of net assets (specifically cash, receivables, stock, plant & equipment, accounts payable, income in advance and employee benefits) of \$1,371,885 was made to HEAL.

In 2016, the Board of Directors of the Medical Postgraduate Foundation Pty Ltd resolved to vest the MPF Trust at 31 March 2016 and transfer all assets to HEAL. A contribution of assets (specifically cash and investments) of \$3,106,219 was made to HEAL.

**Note 15 – Company Details**

The registered office of the company is:

Health Education Australia Limited  
Level 16  
120 Spencer Street  
Melbourne VIC 3000

**Note 16 – Trusteeship**

On 1 January 2013, Health Education Australia Ltd became the new trustee of the Victorian Medical Postgraduate Foundation Inc. – Educational Purposes Fund. This Fund was established in 1982. Since that date, further transfers have been made to the Fund.

As trustee the company is responsible for the liabilities of the Fund and has recourse to the assets of the Fund to meet these liabilities. At 30th June 2021 the accounts of the Fund disclosed that there were no liabilities and assets of \$428.

**Note 17 – Events after the end of the Reporting Period**

The COVID-19 pandemic has had a significant impact on the operations of the Company.

The Victorian Government declared a State of Emergency through to 26 August 2021, with the lockdown restrictions being extended from 9 August 2021 till 2 September 2021.

There were no further material events that occurred after the reporting date.

## **Health Education Australia Limited Responsible Persons' Declaration**

The Directors have determined that the company is not a reporting entity and that this special purpose financial report should be prepared in accordance with the accounting policies described in Note 1 to the financial statements.

The Directors of the company are the responsible persons and the responsible persons declare that:

1. The financial statements and notes, as set out in pages 29 to 39 are in accordance with the *Australian Charities and Not-for-profits Commission Act 2012*:
  - a) comply with Accounting Standards as stated in Note 1 and the *Australian Charities and Not-for-profits Commission Regulation 2013*; and
  - b) Give a true and fair view of the company's financial position as at 30 June 2021 and of its performance for the financial year ended on that date of the company.
2. In the responsible persons' opinion there are reasonable grounds to believe the company will be able to pay its debts as and when they become due and payable.

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



Professor Harvey Newnham – Chairman



Mr David Knowles – Deputy Chairman

Dated this 29<sup>th</sup> day of September 2021



## Independent Audit Report to the members of Health Education Australia Limited

### Report on the Audit of the Financial Report

#### Opinion

We have audited the accompanying financial report, being a special purpose financial report of Health Education Australia Limited (the Company), which comprises the statement of financial position as at 30 June 2021, the statement of comprehensive income, 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 summary of significant accounting policies, and responsible persons' declaration.

In our opinion, the financial report of Health Education Australia Limited has been prepared 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 Company's financial position as at 30 June 2021 and of its financial performance for the year then ended; and
- (ii) complying with Australian Accounting Standards to the extent described in Note 1, and Division 60 of the *Australian Charities and Not-for-profits Commission Regulation 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 Company in accordance with the auditor independence requirements of Division 60 of the *Australian Charities and Not-for-profits Commission Act 2012* (ACNC Act) 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.

#### Emphasis of Matter - Basis of Accounting

We draw attention to Note 1 to the financial report, which describes the basis of accounting. The financial report has been prepared to assist the Company to meet the financial reporting responsibilities under the ACNC Act. As a result, the financial report may not be suitable for another purpose. Our opinion is not modified in respect of this matter.

#### Other Information

The directors are responsible for the other information. The other information comprises the information included in the Company's annual report for the year ended 30 June 2021, but does not include the financial report and our auditor's report thereon.

Our opinion on the financial report does not cover the other information and accordingly we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial report, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial report or our knowledge obtained in the audit or otherwise appears to be materially misstated.

If, based on the work we have performed on the other information obtained prior to the date of this auditor's report, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

## Responsibilities of Responsible Persons

The directors of the Company are responsible persons and responsible for the preparation and fair presentation of the financial report that gives a true and fair view and have determined that the basis of preparation described in Note 1 to the financial report is appropriate to meet the requirements of the ACNC Act. The responsible persons' responsibility also includes such internal control as responsible persons determine is necessary to enable the preparation of a 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 responsible persons are responsible for assessing the Company'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 responsible persons either intend to liquidate the Company or to cease operations, or has no realistic alternative but to do so.

The responsible persons are responsible for overseeing the Company's financial reporting process.

## 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 Company'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 Company'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 Company 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.

*Accru Melbourne*

**ACCRU MELBOURNE (AUDIT) PTY LTD**

29 September 2021

*Cameron J Flynn*

**C J FLYNN**  
Director

## Statement of Financial Position

as at 30th June 2021

	Note	2021 \$	2020 \$
<b>Current Assets</b>			
Cash	3	428	428
Other Current Assets	4	-	-
<b>Total Current Assets</b>		<b>428</b>	<b>428</b>
<b>Total Assets</b>		<b>428</b>	<b>428</b>
<b>Total Liabilities</b>		<b>-</b>	<b>-</b>
<b>Net Assets</b>		<b>428</b>	<b>428</b>
<b>Equity</b>			
Capital fund		101,000	101,000
Retained earnings		(100,572)	(100,572)
<b>Total Equity</b>		<b>428</b>	<b>428</b>

The accompanying notes form an integral part of these financial statements.

## Statement of Comprehensive Income

for the Year Ended 30th June 2021

	2021	2020
	\$	\$
<b>Income</b>		
Interest	-	12,084
<b>Total Income</b>	-	<b>12,084</b>
<b>Expenses</b>		
General & Administrative Expenses	-	-
Scholarships	-	-
Grants	-	1,071,251
<b>Total Expenses</b>	-	<b>1,071,251</b>
<b>Net Surplus/(Deficit)</b>	-	<b>(1,059,167)</b>
<b>Total Comprehensive Income/(Loss) For The Year</b>	-	<b>(1,059,167)</b>

The accompanying notes form an integral part of this statement.

## Statement of Changes in Equity

for the Year Ended 30th June 2021

	Retained Earnings	Capital Fund	Total
	\$	\$	\$
<b>Balance at 30 June 2019</b>	<b>958,595</b>	<b>101,000</b>	<b>1,059,595</b>
Surplus/(Deficit) attributable to members	(1,059,167)		(1,059,167)
<b>Balance at 30 June 2020</b>	<b>(100,572)</b>	<b>101,000</b>	<b>428</b>
Surplus/(Deficit) attributable to members	-	-	-
<b>Balance at 30 June 2021</b>	<b>(100,572)</b>	<b>101,000</b>	<b>428</b>

The accompanying notes form an integral part of this statement.

## Statement of Cash Flows

for the Year Ended 30th June 2021

	Note	2021 \$	2020 \$
<b>Cash Flow from Operating Activities</b>			
Interest received		-	23,082
Payments to suppliers		-	-
Payments of sponsorship		-	(1,071,251)
<b>Net Cash provided by Operating Activities</b>	<b>(a)</b>	<b>-</b>	<b>1,048,169</b>
Net increase/(decrease) in cash held		-	1,048,169
Cash at beginning of Financial Year	(b)	428	1,048,597
<b>Cash at end of Financial Year</b>	<b>(b)</b>	<b>428</b>	<b>428</b>

The accompanying notes form an integral part of this statement of cash flows.

### Note (a) – Reconciliation of Cash Provided by Operating Activities to Operating Profit

		2021 \$	2020 \$
<b>Surplus/(Deficit)</b>		<b>-</b>	<b>(1,059,167)</b>
<b>Change in Assets and Liabilities:</b>			
(Increase)/Decrease in Sundry Debtors		-	10,998
<b>Net cash (used by)/provided by Operating Activities</b>		<b>-</b>	<b>(1,048,169)</b>

### Note (b) – Reconciliation of Cash

For the purpose of the Statement of Cash Flows, cash includes all cash on hand and cash equivalents as reported in the Statement of Financial Position and Note 3.

		2021 \$	2020 \$
Cash at Bank		428	428

## Notes to the Accounts

for the Year Ended 30th June 2021

### Note 1 – Summary of Significant Accounting Policies

The financial statements are for Health Education Australia Ltd – Educational Purposes Fund as an individual entity, incorporated and domiciled in Australia. Health Education Australia Ltd – Educational Purposes Fund is a not-for-profit trust.

#### Basis of preparation

The trustees have prepared the financial statements on the basis that the trust is a non-reporting entity because there are no users who are dependent on its general purpose financial reports. This financial report is therefore a special purpose financial report that has been prepared in order to meet the requirements of the Trust Deed.

The financial report has been prepared in accordance with significant accounting policies disclosed below, which the trustees have determined are appropriate to meet the needs of stakeholders. Such accounting policies are consistent with the previous period unless stated otherwise.

The following material accounting policies, which are consistent with the previous period unless otherwise stated, have been adopted in the preparation of this financial report.

#### Income Tax

The Fund is exempt from income tax by virtue of Division 50 of the Income Tax Assessment Act 1997.

#### Adoption of new and revised accounting standards

During the current year, the Fund adopted all of the new and revised Australian Accounting Standards and Interpretations applicable to its operations which became mandatory. The adoption of these Standards has not had a significant impact on the recognition, measurement and disclosure of transactions.

#### New accounting standards for application in future periods

The AASB has issued new and amended Accounting Standards and Interpretations that have mandatory application dates for future reporting periods. The Fund has decided against early adoption of these Standards, but does not expect the adoption of these standards to have any significant impact on the reported position or performance of the company.

### Note 2 – Nature of Fund

The Victorian Medical Postgraduate Foundation Inc. was instrumental in creating the Fund by a deed dated 13th August 1982 in order to fulfil an objective of the Foundation to establish and maintain a permanent fund for the continuance of postgraduate work in Victoria. The Foundation transferred investments (cost to the Foundation - \$101,000) to the Fund. The Victorian Medical Postgraduate Foundation Inc. was the trustee of the Fund from 1985 until 1 January 2013, when the trustee changed to Health Education Australia Ltd.

### Note 3 – Cash

		2021	2020
		\$	\$
Cash at Bank		428	428
Term Deposits		-	-
		<b>428</b>	<b>428</b>

### Note 4 – Other Current Assets

		2021	2020
		\$	\$
Accrued Income		-	-
		-	-

## Statement by Members of the Executive Committee

The Executive Committee has determined that the fund is not a reporting entity.

The Executive Committee has determined 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 Committee the financial report:

1. Presents a true and fair view of the financial position of Health Education Australia Limited – Educational Purposes Fund as at 30 June 2021 and its performance for the financial year ended on that date.
2. At the date of this statement, there are reasonable grounds to believe that Health Education Australia Ltd – Educational Purposes Fund will be able to pay its debts as and when they fall due.

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



Professor Harvey Newnham – Chairman



Mr David Knowles – Deputy Chairman

Dated this 29<sup>th</sup> Day of September 2021



## Independent Audit Report to the members of Health Education Australia Limited – Educational Purposes Fund

### Report on the Audit of the Financial Report

#### Opinion

We have audited the accompanying financial report, being a special purpose financial report of Health Education Australia Limited – Educational Purposes Fund (the Trust), which comprises the statement of financial position as at 30 June 2021, the statement of comprehensive income, 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 summary of significant accounting policies, and the statement by members of the executive committee.

In our opinion, the financial report of Health Education Australia Limited - Educational Purposes Fund has been prepared in accordance with accounting policies, including:

- (i) giving a true and fair view of the Trust's financial position as at 30 June 2021 and of its financial performance for the year then ended; and
- (ii) complying with Australian Accounting Standards to the extent described in Note 1.

#### 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 Company in accordance with the auditor independence requirements of Division 60 of the *Australian Charities and Not-for-profits Commission Act 2012* (ACNC Act) 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.

#### Emphasis of Matter - Basis of Accounting

We draw attention to Note 1 to the financial report, which describes the basis of accounting. The financial report has been prepared to assist the Fund to meet the financial reporting responsibilities under the trust deed. As a result, the financial report may not be suitable for another purpose. Our opinion is not modified in respect of this matter.

#### Other Information

The directors are responsible for the other information. The other information comprises the information included in the Company's annual report for the year ended 30 June 2021, but does not include the financial report and our auditor's report thereon.

Our opinion on the financial report does not cover the other information and accordingly we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial report, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial report or our knowledge obtained in the audit or otherwise appears to be materially misstated.

If, based on the work we have performed on the other information obtained prior to the date of this auditor's report, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

## Responsibilities of Trustee

The trustee is responsible persons and responsible for the preparation and fair presentation of the financial report that gives a true and fair view and have determined that the basis of preparation described in Note 1 to the financial report is appropriate to meet the requirements of the Trust deed. The trustee's responsibility also includes such internal control as responsible persons determine is necessary to enable the preparation of a 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 trustee is responsible for assessing the Trust'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 responsible persons either intend to liquidate the Trust or to cease operations, or has no realistic alternative but to do so.

The trustee is responsible for overseeing the Trust's financial reporting process.

## 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 Company'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 trustee's 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 Trust'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 Trust 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 trustee 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.



**ACCRU MELBOURNE (AUDIT) PTY LTD**

29 September 2021



**C J FLYNN**  
Director

#### **Disclaimer**

While every effort has been made to ensure the accuracy of this document, Health Education Australia Ltd (HEAL) makes no warranties in relation to the information contained herein. HEAL, its employees and agents disclaim liability for any loss or damage which may arise as a consequence of any person inappropriately relying on the information contained in this document.

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