



ANNUAL  
REPORT  
2016/17

# ANNUAL REPORT FOR THE YEAR ENDED 30 JUNE 2017

**HON ROGER H COOK DEPUTY PREMIER;  
MINISTER FOR HEALTH;  
MENTAL HEALTH**

In accordance with Section 63 of the *Financial Management Act 2006*, we hereby submit for your information and presentation to Parliament, the Annual Report of the Western Australian Health Promotion Foundation (Healthway) for the financial year ended 30 June 2017.

The Annual Report has been prepared in accordance with the provisions of the *Financial Management Act 2006* and other legislative requirements.

Healthway currently operates under the *Western Australian Health Promotion Foundation Act 2016*.

**RESPONSIBLE MINISTER:**

From 1 July 2016 to March 2017  
Hon John Day BSc, BDS Sc MLA

From March 2017 to 30 June 2017  
Hon Roger H Cook BA,  
GradDipBus, MBA MLA

**ACCOUNTABLE AUTHORITY:**

Western Australian Health  
Promotion Foundation Board

**BOARD OF MANAGEMENT  
PRESIDING MEMBER:**

1 July 2016 to 30 June 2017  
Professor Bryant Stokes AM



Professor Bryant Stokes AM  
PRESIDING MEMBER



Mr Steven Harris AM  
BOARD MEMBER

**Date: 24 August 2017**

**COVER PHOTO:**

**ORGANISATION:**

Garnduwa Amboorny Wirnan Aboriginal Corporation

**PHOTOGRAPHER:**

Brodie Albert

**EVENT:**

2016 John Lennard Easter Basketball Carnival in One arm Point. This carnival is run by Ardiyooloon Basketball Association. Garnduwa's Active Communities Program supports the planning and running of the event.

**DATE:** 2016

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Perth Glory Football Club  
Glory in the Community and Women's Glory team

# OVERVIEW OF THE AGENCY

The *Western Australian Health Promotion Foundation Act 2016* commenced on 1 September 2016 and a new governing Board was appointed.

Healthway funds activities related to the promotion of good health, with a particular emphasis on young people. It supports sporting and arts activities that encourage healthy lifestyles and advance health promotion programs, and provides grants for programs and research relevant to the promotion of good health in the community.

Healthway's priority health areas are identified in its Strategic Plan 2012-2017 as:

- Reducing smoking and working towards a smoke-free WA;
- Reducing harm from alcohol;
- Preventing overweight and obesity;
- Promoting good community and individual mental health.

The Strategic Plan also included a focus on preventing skin cancer and reducing harm from illicit drug use.

The new Board is leading the development of a new strategic plan which will be finalised in 2017/18.

The Board of Healthway is responsible to the Minister for Health for the effective and efficient operation of the organisation.



# PRESIDING MEMBER'S

## Introduction

2016/17 has been a pivotal year for Healthway.

1 September 2016 marked the commencement of the *Western Australian Health Promotion Foundation Act 2016*, new stand-alone governing legislation.

The Minister for Health appointed the first seven-member skills-based governing Board under the new Act from the same date.

The Board's comprehensive induction program included a focus on governance with presentations from the Public Sector Commissioner and other State Government oversight agencies. Our commitment to sound governance was also strengthened by the adoption of a new Charter and Code of Conduct.

I thank my fellow members of the Interim Board which had steered Healthway for the previous year, providing the stewardship necessary for a smooth transition to the new legislative and governance arrangements.

This year we started the process for setting new strategic directions beyond 2017, building on the learnings from detailed evaluations of the first 25 years of Healthway's work and other evidence-informed reports on options for our future operations.

We have learned from the strengths of our past, and are actively seeking opportunities to modernise and improve the work we do to meet our commitment to a healthier WA. In doing this, we are also committed to maximising the return on investment of public funds.

An extensive consultation process included the involvement of over 600 stakeholders in interviews, workshops and on-line surveys. This is helping to shape the new strategic plan which will be finalised in 2017/18.

One of Healthway's greatest assets is our partnership with organisations in health, research, arts, sport, racing, and community sectors throughout WA. It is through these partnerships that we work to deliver effective and innovative approaches to health promotion, and engage people in activities that build a healthier WA.

This year, from Healthway's appropriation of \$23 million, a total of \$18.7 million was allocated through grants and sponsorships for activities as diverse as our state. This included \$6.9 million allocated to sporting organisations and \$3.5 million to arts organisations, in accordance with our governing legislation.

Targets for key effectiveness and efficiency performance indicators were generally met or exceeded, with an independent survey showing slight increases in the proportion of people intending to take action to improve their health as a result of seeing and understanding health messages promoted at activities and events across the state.

We will build on Healthway's achievements in the coming year and use the framework provided by the new legislation to strengthen and modernise our operations.

On behalf of the Board, I thank the A/ Executive Director and staff for their professionalism and dedication as we work together towards our vision of a healthier Western Australia.



**Professor Bryant Stokes AM**  
**PRESIDING MEMBER**

# EXECUTIVE

## Summary

2016/17 saw Healthway's historic transition to new legislation and a new governing Board, and the commencement of planning for a new strategic direction.

Over 300 organisations in health, research, arts, sport and community sectors were funded.

We continued to improve communication with all partner organisations and stakeholder groups with whom we work to deliver our shared commitment to a healthier WA.

This included reviewing internal operations and making our processes more accessible and user-friendly.

From 2016/17 applicants for all categories of sponsorship were able to apply online. Applications for health promotion research grants were streamlined and made available all year round.

Healthway promotes and facilitates good health and healthy activities through two main program areas:

The **Health Promotion Program** provides grants for projects and research.

During the year, Healthway continued the re-alignment of the health promotion research program to increase the focus on the translation of research findings into practice and policy. A two-stage application process was introduced to reduce unnecessary work for applicants and staff, and increase the proportion of successful applications with stronger alignment to Healthway's objectives.

Also in this program area, Healthway continued direct support for major mass media health promotion campaigns. Mentally Healthy WA's campaign Act-Belong-Commit was awarded a three year grant of \$1.979m.

The **Sponsorship Program** provides funding for partnerships with sport, racing, arts and community-based events and

activities that encourage healthy lifestyles and support and advance health promotion programs including mass media campaigns.

Consistent with the previous year, in 2016/17, almost 80% of Healthway's funding was directed towards activities focusing on the high priority health issues identified in Healthway's Strategic Plan 2012-2017:

- Reducing smoking and working towards a smoke-free WA;
- Reducing harm from alcohol;
- Preventing overweight and obesity;
- Promoting good individual and community mental health.

In 2016/17, the highest allocations across all program areas were in the priority areas of promoting positive mental health (22.03%), reducing harm from tobacco smoking (21.76%), promoting physical activity and healthy eating (18.32%) and 17.32% of the budget was directed towards reducing harm from alcohol.

Healthway's additional priorities of preventing skin cancer and illicit drug use received a total of 13.32% of funding across all program areas.

In accordance with the requirements of the governing legislation, Healthway allocated 30% of its annual appropriation to sport organisations and 15% was allocated to arts organisations.

The new governing legislation, the *Western Australian Health Promotion Foundation Act 2016* continues the emphasis on young people as a priority. Across all Healthway programs, 87.78% of funding in 2016/17 was allocated to activities that included children and/or young people. This is similar to the previous year.

Healthway's strategic directions for 2012-2017 also identify community groups

## EXECUTIVE Summary continued

who are at higher risk of preventable chronic diseases due to a range of special health challenges they face.

These priority community groups are:

- Aboriginal and Torres Strait Islander people;
- People living in rural and remote communities, and
- People disadvantaged through economic, cultural or educational factors.

Across all Healthway programs, 71.34% of funding in 2016/17 supported activities that included Aboriginal people, 76.90% of funding supported activities reaching rural and remote populations and 71.88% included people from disadvantaged communities. For all three of these priority groups, Healthway's investment was higher in 2016/17 than in the previous year.

Healthway reported on two effectiveness indicators and one efficiency indicator this year.

In effectiveness indicators, results across both programs showed an improvement on previous years with the majority of funding recipients meeting or exceeding the full requirements of their contract and demonstrating value for money.

During the year, Healthway increased support for activities that engaged participants, audiences and spectators more effectively with health messages in sport, arts and community settings. This included support for partner organisations to develop their own health policies and to create healthier environments at their events and activities.

Organisational surveys undertaken by the Health Promotion Evaluation Unit (HPEU) at UWA showed that there was a slight increase in the percentage of organisations building partnerships and creating supportive environments as a result of Healthway funding, as well as in the percentage reaching new priority groups.

The biennial Sponsorship Monitor survey is also conducted by HPEU.

The Sponsorship Monitor for 2016/17 evaluated 35 of Healthway's major sport, arts and racing sponsorships.

It found that 65.7% of people who attended a Healthway sponsored event where a health message was promoted were aware of the message. Awareness levels were broadly similar to those measured in 2014/15 and the levels of comprehension or understanding of the message measured in the 2016/17 Sponsorship Monitor were similar to previous years, at 56.7% of all patrons surveyed.

Awareness and understanding of health issues and messages must be achieved before individuals act on the advice contained within the message and, this year, the proportion of people who said they intended to take action to improve their health as a result of seeing and understanding the messages at Healthway sponsored events increased slightly.

The levels of intention and total action reported in the 2016/17 monitor are encouraging and suggest that Healthway's sponsorship strategies have successfully incorporated action-oriented components and effectively promoted healthy environments.

This year Healthway commissioned advice on the development and retention of a healthy workplace culture from the ORS Group (Employee Assistance Program Provider) and on the control environment from Stanton's International (Healthway's Internal Auditor). The findings of both reports were incorporated into an action plan that is being implemented by the A/Executive Director with regular reports to the Board.



# OPERATIONAL Structure

Interim Board from 1 July 2016 – 31 August 2016 in accordance with the provisions of the *Tobacco Products Control Act 2006*.

Board Member	Period of Membership
Professor Bryant Stokes AM (Deputy Chairperson), Nominee of the Director General of the Department of Health	1 Jul 2016 – 31 Aug 2016
Mr Duncan Ord, Director General of the Department of Culture and the Arts	1 Jul 2016 – 31 Aug 2016
Mr Ron Alexander, Director General of the Department of Sport and Recreation	1 Jul 2016 – 31 Aug 2016
Ms Emma White, Director General for the Department of Child Protection and Family Support	1 Jul 2016 – 31 Aug 2016
Ms Ricky Burges, Chief Executive Officer of the WA Local Government Association	1 Jul 2016 – 31 Aug 2016

Membership of the Healthway Board as at 30 June 2017 in accordance with the provisions of the *Western Australian Health Promotion Foundation Act 2016*.

Board Member	Period of Membership
Professor Bryant Stokes AM (Presiding Member)	1 Sep 2016 – 30 Jun 2017
Ms Fiona Kalaf (Deputy Presiding Member)	1 Sep 2016 – 30 Jun 2017
Ms Ricky Burges	1 Sep 2016 – 30 Jun 2017
Adjunct Professor Terry Slevin	1 Sep 2016 – 30 Jun 2017
Mr Nathan Giles	1 Sep 2016 – 30 Jun 2017
Mr Steven Harris	1 Sep 2016 – 30 Jun 2017
Dr Roslyn Carbon	1 Sep 2016 – 30 Jun 2017

## Board Meeting Attendance

Member	Meetings eligible to attend *	Meetings attended *
Professor Bryant Stokes AM	12	12
Mr Duncan Ord	2	1
Mr Ron Alexander	2	2
Ms Emma White	2	1
Ms Ricky Burges	12	9
Ms Fiona Kalaf	10	6
Adjunct Professor Terry Slevin	10	8
Mr Nathan Giles	10	8
Mr Steven Harris	10	10
Dr Roslyn Carbon	10	8

\*comprises scheduled decision-making meetings, Board Induction meetings, and scheduled strategic planning meetings.

# HEALTHWAY

## Board

### **Professor Bryant Stokes AM, Presiding Member**

Professor Stokes was Acting Director General of the Department of Health from 2013 to 2015, and was previously Chief Medical Officer for the Department of Health. A long-standing member of the WA Board of the Medical Board of Australia, Professor Stokes is currently Chair of the North Metropolitan Health Service Board, an Emeritus Consultant Neurosurgeon and a Fellow and member of numerous medical organisations. He has performed a variety of government health sector advisory roles.

### **Ms Fiona Kalaf, Deputy Presiding Member**

Ms Kalaf is the Chief Executive Officer at Youth Focus Inc, and was previously the Chief Executive Officer of Lifeline WA. With experience as former Chair of the Board of the Art Gallery of WA and a former member of the Metropolitan Redevelopment Authority, she also has a strong background in brand strategy and implementation, business planning, performance and improvement.

### **Ms Ricky Burges**

Ms Burges is the Chief Executive Officer of the Western Australian Local Government Association. Her background includes positions as Director General of the Department of Culture and the Arts, Chief Executive of Perth Zoo, and a Director of the WA Tourism Commission. Ms Burges has extensive experience in leadership and governance roles, including as a member of the interim board that governed Healthway through its transition to new legislation.

### **Adjunct Professor Terry Slevin**

Adjunct Professor Slevin is the Director of Education and Research at the Cancer Council WA. He is an Adjunct Professor, School of Psychology and Speech Pathology at Curtin University, and a Fellow of the Public Health Association of Australia. His background includes

campaign management for the Alcohol Advisory Council WA and Quit for Life campaign in NSW. He has also chaired several national committees for the Cancer Council Australia.

### **Mr Nathan Giles**

Mr Giles is the Executive Director, Perth Public Art Foundation, and a member of a number of arts organisations including the Chamber of Arts and Culture (WA), the Art Gallery of WA, Turner Galleries Art Angels, an Art Ambassador of the Perth Institute of Contemporary Arts and is a current Board Member of the Murdoch University Art Collection. His background includes human resource management, sponsorship, communications, public relations, fundraising and arts administration.

### **Mr Steven Harris**

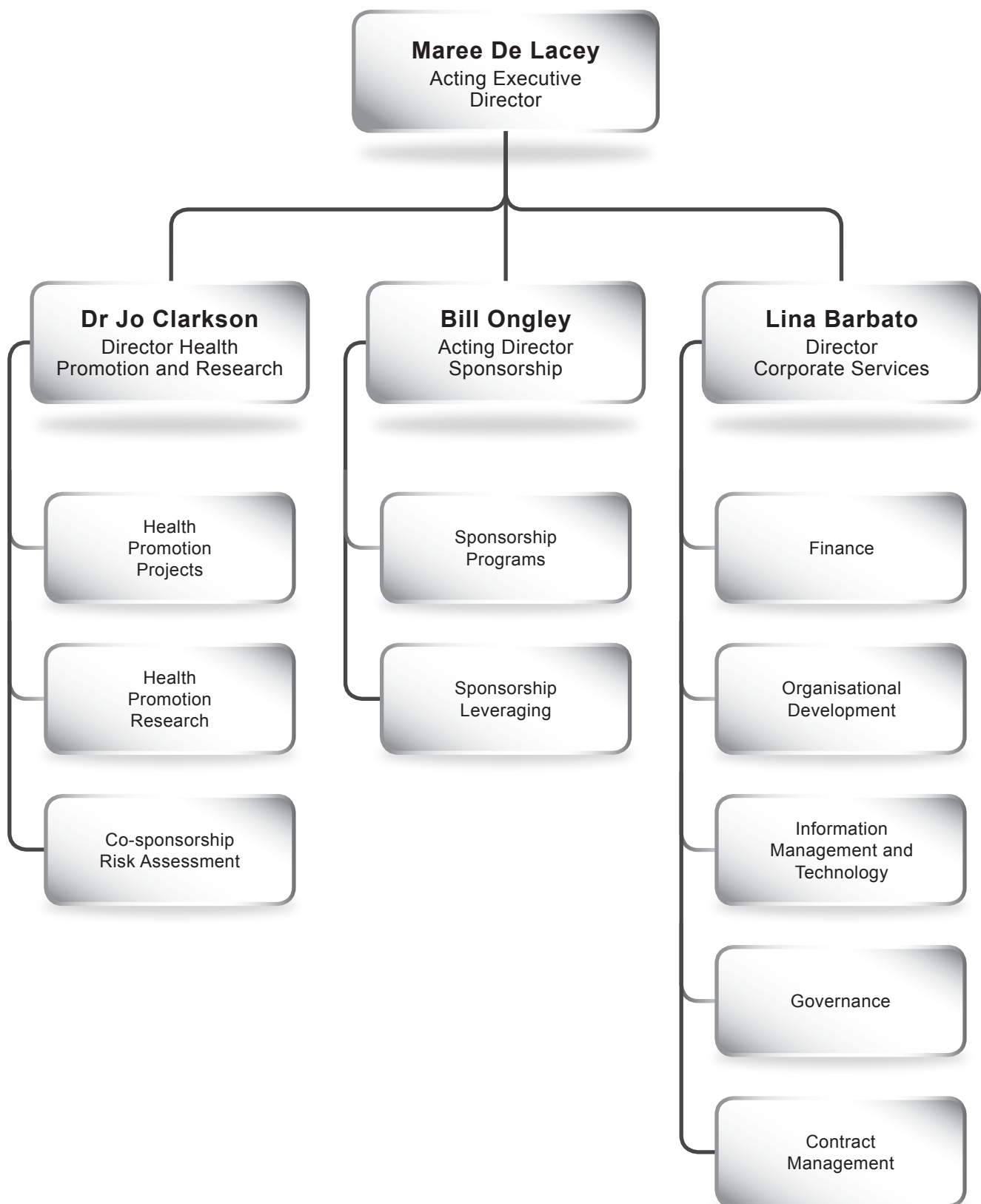
Mr Harris is CEO of The Brand Agency, a fully integrated communications agency that has offices in Perth, Melbourne, Auckland and London. He is Vice-President of the CCIWA General Council and a member of their Board of Directors. Steve's background includes oversight of major marketing, advertising, sponsorship and research investments.

### **Dr Roslyn Carbon**

Dr Carbon trained as a General Practitioner prior to specialising as a Sports and Exercise Physician, providing clinical services for athletes and the general public. She has prepared teams for multiple summer and winter Olympic Games. Previous roles include the National Medical Director of the English Institute of Sport, and Director Health Services at the WA Department of Corrective Services. Dr Carbon is a Commissioner on the Combat Sports Commission and has extensive board experience in sporting and health sectors.

# HEALTHWAY

## Corporate structure





# AGENCY PERFORMANCE

# AGENCY PERFORMANCE

## Report on Operations

The *Western Australian Health Promotion Foundation Act 2016* commenced on 1 September 2016. This new Act created, for the first time, standalone governing legislation.

The Act also introduced provisions for a 7 member Board, with membership reflecting the best mix of skills across defined criteria. The first Board was appointed from 1 September 2016.

It provided for the CEO to be appointed under Part 3 of the *Public Sector Management Act 1994*, and for Healthway's staff to also be appointed under the Public Sector Management Act.

The new Act provides that a decision by Healthway to disburse funds must be approved by the Minister before funds are disbursed. While the Minister may give general policy direction to Healthway, the Minister cannot direct Healthway to fund particular organisations or events.

From Healthway's appropriation of \$23,037,000 for 2016/17, a total of \$18,710,139 was allocated towards grants and sponsorships to organisations in health, research, sport, arts, racing and community sectors throughout Western Australia.

Healthway continued to operate under the Strategic Plan 2012-2017. The Priority Health Areas in this Plan are:

- Reducing smoking and working towards a smoke free WA;
- Reducing harm from alcohol;
- Encouraging healthy eating and physical activity to prevent overweight and obesity; and
- Promoting good community and individual mental health.

Additional priorities include preventing skin cancer and reducing harm from illicit

drug use. Compared to last year, support increased for projects that promote positive mental health and for those promoting physical activity and healthy eating. The distribution of Healthway's funding to these priority areas in 2016/17 compared to the previous year is shown in Table 1.

Table 1 Comparison of the Percentage of Healthway funding allocated to high priority health issues (across all Healthway programs) in 2015/16 and 2016/17

Health Issue	2015/16	2016/17
Reducing harm from tobacco smoking	32.65%	21.76%
Encouraging physical activity and healthy eating	15.78%	18.32%
Reducing harm from alcohol	24.78%	17.85%
Positive mental health promotion	15.42%	22.03%
Skin cancer prevention and illicit drug use	13.22%	13.32%
Other	7.14%	6.73%

The new governing legislation has maintained the strong mandate directing Healthway to have a particular focus on promoting good health among young people. This reflects the evidence linking early childhood experiences and behaviour with lifelong patterns of health behaviour. Across all programs, 87.78% of funding in 2016/17 was allocated to supporting Healthway's partner community organisations to promote healthy lifestyles through activities that included children and/or young people. This is similar to the previous year.

In addition, Healthway's strategic directions for 2012-2017 identify community groups who are at higher risk of preventable chronic diseases and early death and disability, due to a range of special health challenges they face. These priority community groups are:

## AGENCY Performance continued

- Aboriginal and Torres Strait Islander people;
- People living in rural and remote communities, and
- People disadvantaged through economic, cultural or educational factors.

For all three of these priority groups,

Healthway's investment was higher in 2016/17 than in the previous year.

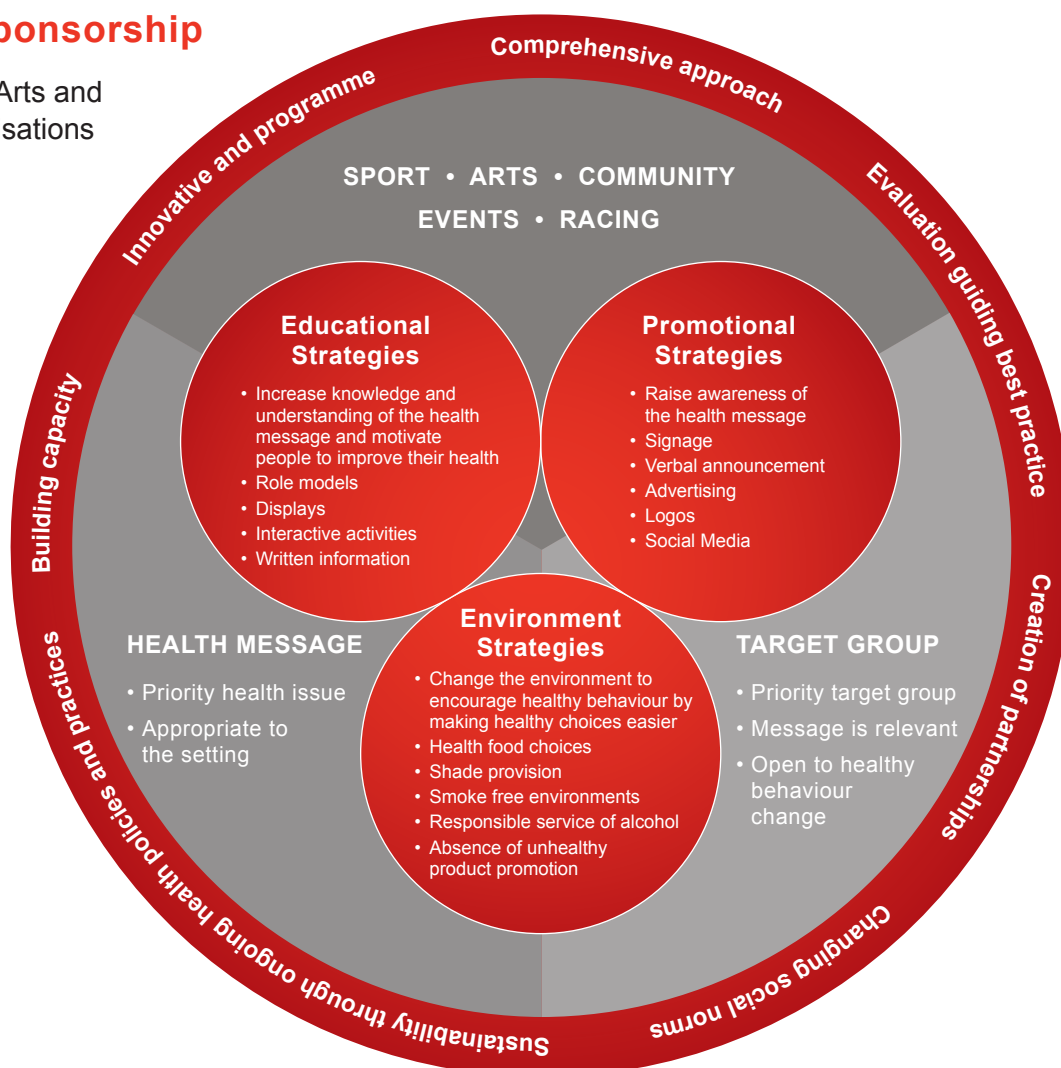
Table 2 Comparison of the Percentage of Healthway funding in 2015/16 and 2016/17 allocated to high priority groups (across all Healthway programs)

Priority Group	% of total projects in 2015/16	% of total projects in 2016/17	% of total programs budget in 2015/16	% of total programs budget in 2016/17
Aboriginal people	59.50%	74.01%	57.36%	71.34%
Rural and remote populations	68.44%	72.60%	62.48%	76.90%
Children and Young people	81.84%	94.92%	86.92%	87.78%
Other disadvantaged groups e.g. low income	59.50%	73.73%	62.13%	71.88%

Note - This classification allows for multiple responses therefore the percentages in the table total more than 100%

## Healthway Sponsorship

Supporting Sport, Arts and Community Organisations to promote healthy behaviour.





Healthway continued direct support for major health promotion campaigns. During the current year, Act-Belong-Commit was awarded a new three year grant totaling \$1.979m.

This and other statewide mass media campaigns such as Make Smoking History, LiveLighter and Alcohol.Think Again were also supported through sponsoring arts, sport and community organisations to promote the relevant health message and help direct people to the campaigns. Healthway's sponsorship approach incorporates three key elements as illustrated below: promotional strategies (raising awareness of the health message), educational strategies (increasing knowledge and understanding), and environmental strategies (making healthy choices easy). By working in partnership with community organisations, Healthway helps the campaigns to reach more Western Australians and consolidate the awareness and understanding of the messages promoted in the mass media.

While the promotion of health messages such as Alcohol.Think Again, LiveLighter or SunSmart helps to raise awareness of a specific health issue, it is the combination of message promotion plus educational and environmental strategies working together that is most likely to move people to make healthy lifestyle changes.

During the year, independent evaluation of the effect of Healthway's Sponsorship Program confirmed its effectiveness in raising awareness and understanding of health messages, and encouraging people to make healthier lifestyle choices.

The 2016/17 Sponsorship Monitor, an evaluation of 35 major sport, arts and racing sponsorships by the Health Promotion Evaluation Unit at The University of Western Australia, found that the number of people who said they were aware of and

understood health messages promoted at Healthway sponsored events had remained consistent with the previous year. The proportion of people who said they intended to act on the health advice in the message increased, although not significantly, from 23.2% in 2014/15 to 26.2% in the current year.

The proportion of people who are planning to take action to improve their health as a result of attending Healthway sponsored events, reflects a slight increase over recent surveys since 2012/13. The researchers said this indicates Healthway's efforts, in conjunction with partners in sport, arts and community groups, to incorporate opportunities for people to engage with the health message at events and encourage healthier action is working.

During the year, Healthway also increased the focus on creating healthier environments in partnership with sponsored organisations and increased support for partner organisations to develop their own health policies.

A number of State Sporting Associations implemented club based initiatives to extend encouragement of healthy lifestyles to grass roots level of their sports. Baseball WA, The Western Australian Cricket Association and Rugby WA have all introduced programs that provide assistance for clubs to develop a healthy club culture with a focus on reducing harm from alcohol, and to provide incentives to improve the health and wellbeing of their members and supporters. Similarly, Water Polo WA introduced a Club Reward Program that acknowledges local water polo clubs who implemented sun protection policies and strategies that not only improve the competition environment but promote the SunSmart message.

In addition, Healthway in conjunction with Netball WA, introduced an innovative 'Army of Educators Program' aimed at supporting netball leaders at multiple levels of the sport

## AGENCY Performance continued

to encourage healthy living throughout Netball WA network. The Program, which resulted from a \$300,000 one year Healthway sponsorship, integrates the health message and information about healthy lifestyles into existing programs and resources, which are then used to inform coaches and officials operating at the local level.

In 2016/17, Healthway progressed the re-alignment of the health promotion research program, which began during the previous year, to develop a stronger focus on seeing research findings put into practical application.

A new two stage application process was launched – an initial Expression of Interest, and then the potential for a full application.

This applied to applications for exploratory research grants up to \$75,000 per year and for multiyear intervention research of up to \$150,000 per year for up to three years.

The revised scheme was promoted through Healthway's networks including the university research grants offices and the changes have been positively viewed by the research community. The new process has enabled researchers to gain more feedback and guidance from Healthway during the submission phase. It has also ensured that funded research projects in 2016/17 have been more closely aligned with Healthway's health priorities and the objective of putting research findings into practice in the community.

## PRIORITY HEALTH AREAS AND POPULATIONS

### **Reducing smoking and working towards a smoke-free WA**

Smoking is a major risk factor for many chronic diseases including cancer, respiratory conditions, cardiovascular disease and stroke. The prevalence of smoking in Western Australia among people aged over 16 years has decreased significantly from 21.6% in 2002 to 12.5% in 2015.<sup>1</sup>

Healthway has played a significant role in reducing the prevalence of smoking in WA over the past 25 years. However, smoking continues to be the largest single preventable cause of premature death and disease. Tobacco use was responsible for an estimated 1,673 deaths of Western Australians in 2013, and 19,196 hospitalisations in 2015.<sup>2</sup>

In light of this, reducing smoking and working towards a smoke-free WA continues to be a high priority for Healthway with 21.76% of the total funding across all

programs directed towards reducing harm from tobacco smoking. In 2016/17, 17.58% of the total Health Promotion Program budget was allocated to this issue and 23.9% of the total Sponsorship Program budget was allocated to sport, arts, racing and community event projects promoting the Smarter than Smoking, Make Smoking History and Quit messages.

While most sections of the community are smoking less, smoking rates remain high among some community groups and they are the focus of Healthway's strategies to reduce smoking and minimise the harm caused by smoking.

For example, the most recent data from the National Aboriginal and Torres Strait Islander Social Survey 2014/15 shows 43% of Aboriginal and Torres Strait Islander people in WA aged 18 years and over were daily smokers in 2014/15. This compares with 14.2% of the general population 18 years and over (age-standardised) who were

<sup>1</sup> Tomlin S, Joyce S and Radomiljac A 2016. Health and Wellbeing of Adults in Western Australia 2015, Overview and Trends. Department of Health, Western Australia.

<sup>2</sup> Epidemiology Branch, Public Health Division, Western Australia Department of Health 2016. Tobacco-related hospitalisations and deaths. Perth: WA Department of Health, 2016.

current daily smokers in the same year<sup>3</sup>. And, Aboriginal people are twice as likely to need hospital treatment for cardiovascular disease and 1.8 times as likely to die from cardiovascular disease compared with non-Aboriginal Australians<sup>4</sup>.

Healthway is supporting the Puntukurnu Aboriginal Medical Service in the Pilbara with a \$10,000 Aboriginal Health grant to work with local Martu young people to develop a series of advertisements with messages about not smoking. The messages will be used locally and aired on line through the culturally relevant IndigiTube. The project is part of a broader strategy to reduce smoking and deliver health education to local young people in the Western Desert Aboriginal communities. It also provided an opportunity to link these locally developed messages to Healthway's sponsorship of the Ngurra Kujungka Western Desert League and deliver the message about the health risks of smoking in a more relevant and culturally appropriate format.

One of Healthway's largest single investments is the Cancer Council WA's Make Smoking History campaign, which is co-funded with the Cancer Council WA and the WA Department of Health. Healthway provided funding for the campaign and extended its reach by working in partnership with 36 arts, sport and community organisations which incorporated Make Smoking History into their activities.

The Make Smoking History campaign ensures its mass media advertising reaches the broader community and includes groups with higher rates of smoking. New advertising aired in 2017 was based on research among smokers who identified seeing other people smoke, including loved ones, as one of their top triggers to continue smoking. The 'From Every Quitter' campaign featured personal testimonies and

ran on television, radio, online, community locations, including petrol station bowisers, and social media. Evaluation results show that following each campaign wave the Make Smoking History advertising is recalled by more than 70% of smokers and prompts at least 50% to cut down or quit their smoking.

Mass media campaigns are effective in creating awareness of health issues and Healthway also used its Sponsorship Program to extend the reach of the Make Smoking History campaign to community groups with higher smoking rates than the general population. While people see the messages on television, exposure to the same messages in environments in which people feel comfortable, such as family friendly community events and activities, encourages more acceptance of the message.

During the year, Healthway partnered with multicultural groups who tend to have higher smoking rates than the general community to promote Make Smoking History at their events and activities.

Organisations in the metropolitan area including the Australian Arab Association, which received a \$65,000 sponsorship, the Vietnamese Community in Australia WA Chapter, which was awarded a \$10,000 sponsorship and the Te Haupai Maori and Pacific Island Trust Association, also awarded \$10,000 in sponsorship, worked with Healthway to ensure the message reached people from different cultural backgrounds. Make Smoking History featured prominently in regional community activities through partnerships with local community organisations to stage events such as agricultural shows in areas all over WA.

Sponsorships supporting popular festivals such as Boab, Mowanjum and Shinju Matsuri and the locally based sporting organisation,

<sup>3</sup> ABS, National Health Survey: First Results, 2014/15.

<sup>4</sup> Australian Institute of Health and Welfare, 2016.



## AGENCY Performance continued

Garnduwa Amboorny Wirnun, which received \$440,000 for a two year partnership with Healthway, ensured Aboriginal people in the Kimberley region were encouraged to Make Smoking History and to be Smarter than Smoking. The strong partnerships ensured people were involved in sport and cultural activities in smoke free environments.

Smarter than Smoking was promoted in partnership with organisations whose activities focused on young people. State sporting associations including the WA Basketball Federation, Football West, Golf WA, Lacrosse WA, Netball WA, WA Squash and WA Table Tennis promoted the message to an audience of more than 240,000 children and young people participating in competitions and development activities across the State. For the one year partnership with Healthway, WA Basketball Federation received support over one year of \$295,000, WA Table Tennis received \$16,000 over one year and Lacrosse WA was supported with a \$70,000 one year partnership.

### Reducing harm from alcohol

Alcohol consumption is associated with chronic disease, accidents and injury. Consuming alcohol above the recommended safe limits of two standard drinks per day increases the risks of lifetime harm including alcohol dependence, cardiovascular disease, cancers, type 2 diabetes and liver disease. More than one fifth of people aged 14 years and over in WA (21.6%) consumed alcohol at levels placing them at risk for lifetime harm. Single occasion harm is associated with consuming more than four standard drinks on any one occasion and includes increased risk of accidents, injury, violence and death. Over two-fifths of Western Australians aged 14 years and over (43.5%) drank at risky levels at least once in the last year.

In 2016/17, Healthway allocated 17.85% of its total funding budget to addressing the misuse of alcohol and other drugs.

The Mental Health Commission's Parents, Young People and Alcohol Education Campaign, in conjunction with the McCusker Centre for Action on Alcohol and Youth, continued to receive significant support from Healthway in 2016/17. This campaign is a component of the broader Alcohol. Think Again campaign and targets parents of young people aged 12-17 years and young people themselves and is part of a comprehensive, integrated state-wide strategy to reduce alcohol related harm among young people. The campaign is designed to communicate the NHMRC guideline that, for under 18 year-olds, no alcohol is the safest choice. Awareness of the guideline among parents of teenagers increased from 68% in 2012 to 95% in 2016, with 73% of parents in 2016 reporting that they had never given alcohol to their child, increasing from 56% in 2012.<sup>5</sup>

A small health promotion grant of \$4,459 to the Aboriginal Alcohol and Drug Service in 2016/17 supported a program with Aboriginal young people at the Dungeon Youth Centre in Ballajura to educate participants on the consequences of using alcohol and illicit drugs, with sessions designed around the six Noongar seasons. The program was delivered in partnership with key service delivery organisations.

A \$104,745 one year research grant awarded in 2016/17 to a group at Curtin University will develop evidence-based responsible drinking messages that will be incorporated into health promotion campaigns. Health promotion messages are more effective when they offer clear information on how to make the healthiest choices and currently there is limited evidence on the most effective responsible

<sup>5</sup> Kantar Public (2016) Alcohol Attitudes 2016: Parents & Young People.

drinking messages for adults in the Australian context.

Of the total sponsorship budget, 20% was allocated to partnerships with community organisations which focused on reducing harm from alcohol through promotion of the Alcohol.Think Again message.

In the sport sector, the Alcohol.Think Again message continued to be promoted in partnership with well-known sporting teams such as the Perth Wildcats (\$540,000 for one year), the West Coast Fever (\$275,000 in 2017), the Western Force (\$333,000 in 2017) and the Perth Heat (\$93,500 over two years), and sporting associations including the WA Volleyball Association (\$120,000 in the current year), Baseball WA (\$80,000 for 2017), the WA Rugby Union and the WA Cricket Association (WACA).

As part of the \$1.5m two year partnership with the WACA, Alcohol.Think Again has become widely recognised and accepted through the Western Warriors, the Western Fury and the Perth Scorchers WBBL team. During the year, the partnership worked hard to expand behavioural and cultural change initiatives into regional cricket. The WACA is the only cricket association in Australia to take a stance against the promotion of alcohol and junk food in sport and its advocacy at the national level has led to positive changes including an agreement to remove alcohol promotion from the Big Bash League.

Also during the year, Healthway began working with the Mental Health Commission and the School Drug Education and Road Aware (SDERA) group to develop a 'Think Again' message which focuses on resilience and good decision making, particularly focused on young people. This approach was trialled in partnership with Baseball WA, where promoting the Alcohol.Think Again message to an adult audience is the

primary focus, but where there is also an opportunity to encourage healthy lifestyles with young people.

The impact of Healthway sponsorships on the Alcohol.Think Again campaign was evaluated during the year. A survey by the Mental Health Commission showed that two in 10 adults and three in 10 young people associate the Alcohol.Think Again message with sporting teams, with the Perth Wildcats the team most likely to be specifically mentioned.

An online survey of Perth Wildcats' members was conducted part way through the 2016/17 season. With almost all members surveyed (96%) saying they are aware of the Alcohol.Think Again message, the results indicate that Healthway's partnership with the Perth Wildcats resonated with the members. This has translated into 9% of all members taking their awareness and understanding of the message to the next level and deciding to take action to reduce their alcohol consumption.

## **Encouraging healthy eating and physical activity**

Poor nutrition and physical inactivity are risk factors for overweight and obesity, and all three are risk factors for chronic diseases such as type 2 diabetes, cardiovascular disease, some cancers and osteoarthritis. In 2015, only half (51%) of Western Australians aged 16 years and over consumed sufficient amounts of fruit and 10% consumed sufficient amounts of vegetables.<sup>1</sup> In addition, nearly a third (30%) ate fast food once or twice a week, and 36% did not meet the recommended levels of physical activity. In Western Australia, 27% of adults aged 16 years and over were obese and 40% were overweight, while nearly 22% of children and teenagers (5 to 15 years) were overweight or obese.<sup>6</sup>

<sup>6</sup> Tomlin S, Joyce S and Radomiljac A. 2016. Health and Wellbeing of Adults in Western Australia 2015, Overview and Trends. Department of Health, Western Australia.

## AGENCY Performance continued

In 2016/17, a total of 18.32% of Healthway's combined Health Promotion and Sponsorship Program budgets was directed towards promoting healthy eating and physical activity.

A health promotion project grant awarded to the UWA School of Dentistry in 2016/17 is improving nutrition and oral health outcomes among young Aboriginal children by providing culturally appropriate training and resources for parents, carers and health professionals on diet and dental health. Working in collaboration with local community health services, the project focuses on the south metropolitan area and was developed from earlier Healthway-funded research conducted by the team.

The Foodbank WA School Breakfast Program provides a nutritious breakfast to more than 400 schools in some of the most disadvantaged communities in WA. In 2016/17 Healthway provided \$112,137 of support to Foodbank WA through a health promotion project grant that will create a suite of new educational resources for Aboriginal children. The original "SuperHero Foods" resources were previously disseminated with Healthway support, and feedback from teachers identified a need for culturally appropriate characters and stories suitable for Aboriginal children.

More than 50% of Healthway's Health Promotion Research budget in 2016/17 supported studies focusing on the prevention of overweight and obesity. An exploratory research grant awarded to the University of WA is testing the impact of professional development programs for childcare educators on their knowledge and practices, and ultimately on children's physical activity and outdoor play. The study builds on earlier Healthway-funded research and, through a series of natural experiments, will also examine if upgrading outdoor spaces in childcare centres has an impact on how educators encourage children to be

physically active and on children's physical activity levels.

Another study funded by Healthway in 2016/17 illustrates Healthway's increased emphasis on supporting research with strong potential for leading to practical applications to improve community health. Researchers from Curtin University are collaborating with the LiveLighter campaign to investigate if overweight people can improve their diet and physical activity levels through personalised feedback provided online.

Fifteen percent of Healthway's total Sponsorship Program budget was allocated to projects promoting the Be Active, Go for 2&5 and LiveLighter health messages. In addition to promoting healthy eating through messages, Healthway partnerships ensure that healthy food choices are available at sponsored events and activities. Almost all (99%) of Healthway sponsored organisations now have healthy food choices available at their events, a condition of Healthway sponsorship where food is served, compared to just 43% of organisations when Healthway was established more than 26 years ago.

During the year, Healthway commenced a new \$340,000 partnership over two years with the Perth Glory to promote the Go for 2&5 message through the 'Glory in the Community Program'. This Program annually engages over 60,000 children in football participation programs, game day activations and community appearances. In addition, Healthway also partnered with the Women's Glory to promote the LiveLighter message to the wider community.

Partnerships with Touch Football, Badminton WA and Masters Swimming WA, together with support for several cultural and community arts festivals such as Bonjour Perth, the Perth Basant Festival, the Swan Festival of Lights and the City of Wanneroo's Global Beats and



Eats, enabled Healthway to reach families throughout the State to encourage healthy eating through LiveLighter.

With recent Heart Foundation research showing 14% of people living in inner city Perth are obese compared with 33% of those living in regional areas of the State, Healthway actively sought partnerships with organisations based in regional areas with whom to work to encourage healthy food choices.

Over 30% of partnerships supported through the Community Event Sponsorship Program encouraged healthy eating among people living in regional areas with either the LiveLighter or Go for 2&5 messages at events such as the York Agricultural Show, which received \$2,000, the Manjimup Cherry Harmony Festival, \$12,000, and the Wyalkatchem Fair which received \$2,000.

Healthy food choices were definitely the easy choice for the record number of visitors to the popular Mandurah Crab Fest in 2017, WA's biggest free regional community event attracting people from the Peel Region and other parts of WA.

With Department of Health data showing 77.8% of adults in the Peel area are overweight or obese and 35.4% are not active enough to be healthy, Healthway renewed the partnership with Crab Fest organisers, the City of Mandurah, with a sponsorship of \$120,000 per year for two years. All festival food vendors worked with the WA School Canteen Association so that visitors had more healthy food choices available than ever before. The LiveLighter message was prominent which reinforced reasons for making healthy choices and ways to be active were integrated into the festival activities.

## **Promoting good community and individual mental health**

Poor mental health is a major cause of disease and injury in the community. In 2015, 13.8% of WA adults were diagnosed with a mental health issue during the previous 12 months and around one-half of these were receiving treatment. Studies have shown that mental health and resilience among individuals can be improved through health promotion that encourages participation in community activities and developing strong social networks. Promoting positive mental health is a high priority for Healthway in the current strategic period.<sup>7</sup>

During the year, Healthway allocated 22.03% of its budget across all program areas towards mental health promotion.

A unique Aboriginal-led program to improve mental health of young people will be developed through a three-year health promotion research grant Healthway awarded to a team from Curtin University in 2016/17. Working with established mental health service providers for young people, the project titled Building Bridges, will use traditional cultural methods, engaging elders in yarning and storytelling workshops with young people. Young Aboriginal people will be directly involved in the design, development and implementation of solutions that are appropriate for them and can be delivered through current mental health services.

Through support of projects like this, Healthway aims to facilitate building better relationships between the Aboriginal community and service providers that will sustain long-term partnerships.

There is strong evidence that involvement and participation in community activities is protective against mental health problems and people already experiencing mental illness can benefit from being involved in activities and having social networks.

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<sup>7</sup> Tomlin S, Joyce S and Radomiljac A 2016. Health and Wellbeing of Adults in Western Australia 2015, Overview and Trends. Department of Health, Western Australia.

## AGENCY Performance continued

The Mentally Healthy WA campaign promotes the message Act-Belong-Commit, and works with more than 150 partner organisations across WA, with nearly half of these located in regional areas. The campaign is evaluated regularly and the most recent evaluation in 2016 found that 76% of people in WA were aware of the Act-Belong-Commit message and among this group, more than one in five reported that it had changed the way they think about mental health and mental illness. Twelve per cent reported that it had prompted them to do an activity promoted by the campaign to improve their mental health and the vast majority of these (96%) said they felt better as a result of doing the activity or activities.

In 2016/17 Healthway renewed its funding for the Mentally Healthy WA campaign with a three year grant of \$1.979. A major focus in the current phase is an 'ABC Youth Connectors' strategy targeting young people, a high priority target group for Healthway. This initiative involves peer learning and support for young people seeking help with their mental health, and has been successfully piloted in one metropolitan and two regional locations.

Healthway increased the number of partnerships with organisations promoting the Act- Belong- Commit health message in 2016/17. The campaign has recently developed and launched an Aboriginal sub-campaign and message, working with Aboriginal communities in the Pilbara. During the year Healthway introduced the Aboriginal Act-Belong-Commit message for relevant sponsorships. The total Healthway support for Mentally Healthy WA across the program areas is a significant contribution to promoting positive mental health in the State. In 2016/17, almost 24% of the total

Sponsorship Program budget was allocated to partnerships with organisations working with Healthway to extend the reach of the Act-Belong-Commit message.

This strategy was developed in consultation with representatives of community arts organisations reflecting the evidence of the connection between positive mental wellbeing and participation in the arts. Healthway funded research by Dr Christina Davies at The University of Western Australia has shown that people involved with the arts for two or more hours per week are much more likely to have better mental health and those who do not engage in artistic activities.<sup>8</sup>

Over 35% of all sponsorships approved and almost 60% of arts sponsorships carried this message, with an increasing number of arts organisations and community events choosing to focus their activities around the promotion of good community and individual mental health to around one million Western Australians. This included some of Healthway's major sponsorship partners in the arts such as the West Australian Ballet, WA Symphony Orchestra, Barking Gecko Theatre Company and Musica Viva. All these organisations are seeking to improve mental wellbeing within priority groups by increasing opportunities for involvement in music and theatre activities.

Healthway also forged a new partnership with the Art Gallery of Western Australia for a one year sponsorship of \$85,000 which resulted in positive mental health being promoted to young people and their families who visited the gallery's exhibitions.

The Act-Belong-Commit message was also promoted in one third of Community Event Sponsorships with the majority of these looking to encourage and increase community engagement in rural and remote areas.

<sup>8</sup> The art of being mentally healthy: a study to quantify the relationship between recreational arts engagement and mental well-being in the general population; Christina Davies, Matthew Knuiman and Michael Rosenberg, BMC Public Health BMC 2016.

Healthway worked with a range of arts and sport organisations including DADAA (\$50,000 for the current year), Catch Music (\$41,800), WA Disabled Sports Association (\$235,000), Riding for the Disabled Association WA (\$40,000), Sailability WA (\$30,000) and the Enable Southwest, \$7,500, to increase participation opportunities and improve mental wellbeing through connection, interaction and active involvement for people with disabilities.

Sponsorship of the Augusta Adventure Fest, which received a sponsorship of \$180,000 over two years, Dwellingup 100 Mountain Bike Event, which received \$44,000 over two years, and the Avon Descent enabled Healthway and the partner organisations to provide opportunities for promoting positive mental health through involvement in strongly supported mass-participation community activities.

The partnership with Northam's Avon Descent Association, \$25,000 for this year, enabled promotion of the Act-Belong-Commit message to be focused on the Avon Support Unit which provides 120 highly trained volunteers to oversee event safety and undertake rescues. The level of dedication required by members of the Support Unit, coupled with an event that epitomises commitment and active engagement, proved to be a great way of demonstrating the meaning of the message.

### **Additional priorities – preventing skin cancer and reducing harm from illicit drug use**

Two in every three West Australians will be diagnosed with skin cancer before they reach the age of 70. And, skin cancer was the cause of death of 221 Western Australians in the year 2015.<sup>9</sup>

In 2016/17, Healthway continued to support the Cancer Council of WA's SunSmart

campaign with 2017 marking the third year of an \$800,000 grant. The campaign focuses on improving knowledge of and behaviour towards sun protection among all age groups in WA. The current phase of the SunSmart campaign has a strong focus on increasing understanding and use of the UV Index to reduce over-exposure to UV radiation, through a SunSmart app, website, and a range of community-based activities during the spring and summer months.

Healthway also partners with organisations conducting summer outdoor activities aimed to increase the awareness of the SunSmart message and to reinforce sun protection measures promoted in the campaign.

Healthway has forged productive working relationships with sport organisations such as Surf Life Saving Western Australia, Tennis West, Triathlon WA, Surfing Western Australia, Swimming WA, Water Polo WA, Synchro WA and Rowing WA and these partnerships have been very successful in promoting awareness of skin cancer prevention measures. During the year, a total of \$817,500 was directed towards these eight sporting organisations to support them to incorporate sun protection awareness and education into their programs and activities.

During the year, Healthway and its partners in skin cancer prevention were delighted with new data linking the SunSmart campaign with a big drop in youth melanoma rates. Although skin cancer rates among people over 60 years continued to increase, the data revealed that over the past 15 years, melanoma rates have more than halved among young West Australians aged 15 to 19, the generations that grew up with sun protection campaigns like SunSmart. Among young women, the incidence of melanoma has fallen from 31 cases per 100,000 down to just 13 and, among young

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<sup>9</sup> Australian Bureau of Statistics report September 2016.

## AGENCY Performance continued

men, there are now 10 cases per 100,000, down from 26 only 15 years ago.

The sun protection message is particularly relevant where participants in recreational activities spend extended periods of time in the sun. The two year \$100,000 partnership with Recfishwest continued to provide an opportunity to promote the SunSmart message to the many thousands of recreational fishers and the young people in metropolitan and regional areas who experience fishing for the first time through the SunSmart Fishing Clinic program.

Drug use affects both physical and mental health. Drugs have consequences for an individual's social life, family, work, and financial situation. In 2016, to address the increasing use of methamphetamines, the WA Government announced a range of new and enhanced initiatives in response to the National Ice Task Force recommendations.

To complement the work already planned or underway in WA for the State Ice Campaign, Healthway partnered with the Mental Health Commission in 2016/17 to develop two new initiatives. The first involves collaboration with the contemporary music industry in WA with a focus on front line workers at music festivals and concerts. The project is implementing and evaluating ways of ensuring young people attending high risk events including contemporary music festivals are made aware of the risks of ice and are equipped to protect themselves and their friends from harm.

The second project seeks to prevent and reduce the harm associated with methamphetamine use through developing a suite of on-line resources for the Drug Aware web-site to direct young people using or experimenting with methamphetamines to appropriate sources of information and help in WA.

In the Sponsorship Program, Drug Aware was promoted in 5% of sport sponsorships

and 9% of arts projects and had the highest level of awareness (85%) across all sponsorships included in the 2016/17 Sponsorship Monitor survey.

Healthway built on working relationships with community organisations whose activities focus on young people, especially those at risk of being involved in drug taking, crime and antisocial behavior.

A three-way partnership with the City of Armadale, the Department of Sport and Recreation and Healthway aims to provide basketball coaching from professionals in the sport as a drawcard for getting young people in the Armadale area involved in after school activities, while learning about the negative health impacts of drug use.

The Drug Aware Ignite Basketball team will reach around 700 young people aged between 11 and 21 years of age who risk being involved in antisocial behaviour. The program will provide them with an outlet for physical activity, an opportunity to be coached by professionals and to learn about healthy lifestyles and the health, social and legal consequences of drug use.

In partnership with the Albany Youth Support Association, Healthway supported a program of activities for young people with a one year sponsorship for \$42,000. The Drug Aware message is promoted throughout the program, which also encourages positive mental health through new friendships, contact with positive role models and the learning of new art skills.

A \$4,500 sponsorship of the Youth Focus/ Headspace Albany Drug Aware Kinjarling Cup targeted Aboriginal youth in the Great Southern through a basketball competition, while a \$3,000 two year sponsorship of the City of Mandurah's Gnoonie Cup football match ensures the Drug Aware message is promoted at a fun, family-friendly event for Aboriginal young people in the Peel community.





City of Swan  
HyperFest 2017

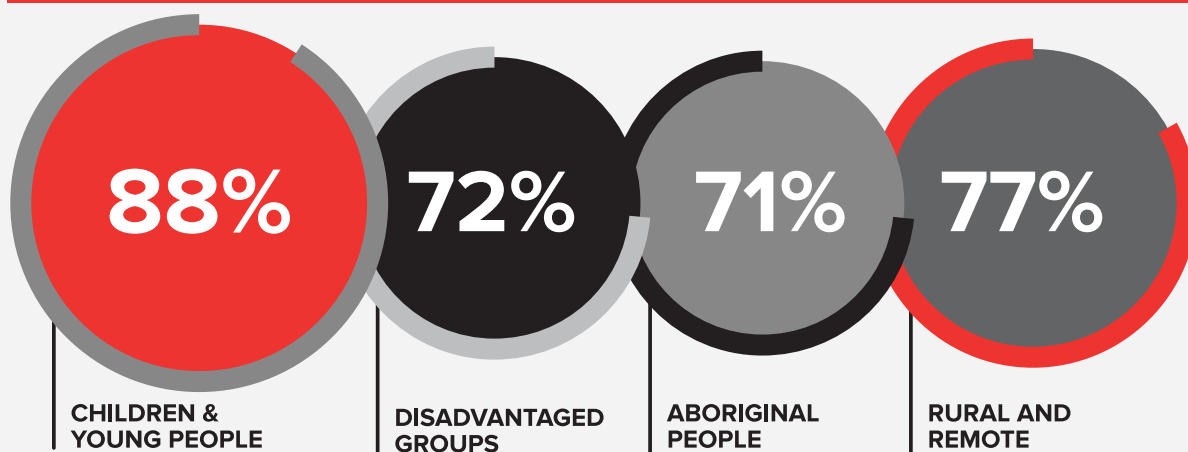
**\$11 MILLION**  
IN SPONSORSHIPS  
**TO OVER 300**  
**ORGANISATIONS**

**\$5.9 MILLION FOR**  
**HEALTH PROMOTION**  
**PROJECT GRANTS**  
INCLUDING FUNDING TO STATEWIDE  
HEALTH PROMOTION CAMPAIGNS

**OVER \$1.8 MILLION DOLLARS**  
ACROSS 20 HEALTH PROMOTION RESEARCH GRANTS  
FUNDING RESEARCH LEADING TO THE PROMOTION OF  
**GOOD HEALTH & THE PREVENTION**  
**OF ILLNESS IN THE COMMUNITY**

**HEALTHWAY FUNDING**  
ENGAGED THE COMMUNITY BY REACHING  
**9.52 MILLION PEOPLE**  
AT A COST OF **\$1.94 PER PERSON**

#### DISTRIBUTION OF FUNDING ACROSS TARGET POPULATION GROUPS



#### CREATION OF HEALTHY ENVIRONMENTS

Percent of funded organisations with health policies and practices:



# HEALTHWAY IMPACT OF FUNDING 2016/2017

## CAPACITY BUILDING

Healthway funding has enabled:

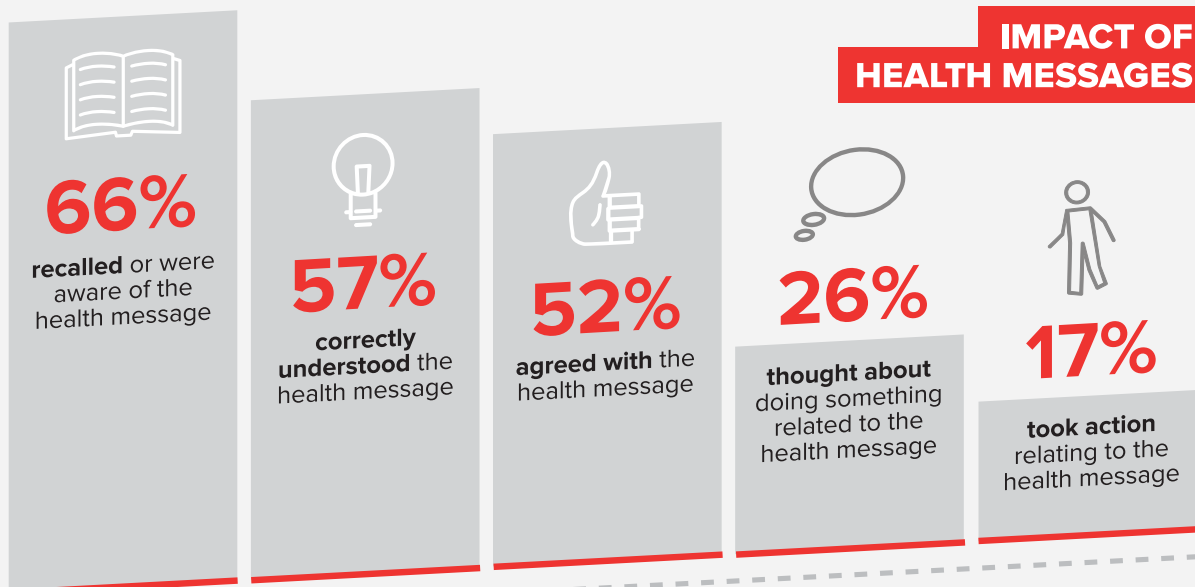
**95%** of organisations to run new activities that **bring together different sections of the community**

**77%** of organisations to **develop partnerships with other organisations**

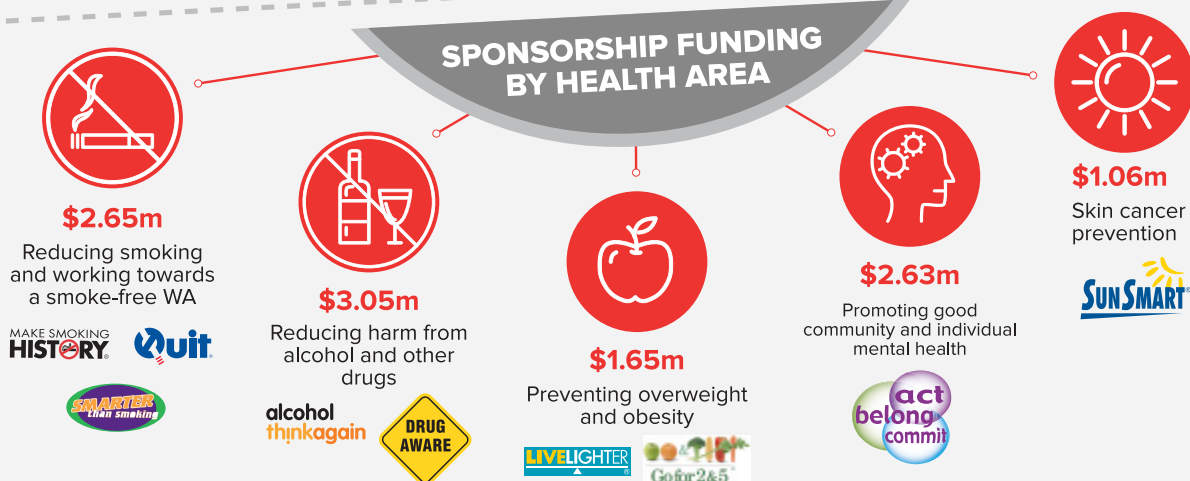
**75%** of organisations to **reach new target groups**

**83%** of organisations reported an **increase in overall level of health promotion activity**

## IMPACT OF HEALTH MESSAGES



## SPONSORSHIP FUNDING BY HEALTH AREA



# SIGNIFICANT ISSUES IMPACTING THE AGENCY

## Changes in legislation and governance

The *Western Australian Health Promotion Foundation Act 2016* came into effect on 1 September 2016 and Healthway transitioned to new legislation and governance arrangements. This included the appointment and induction of a new governing Board.

Some operational processes were adjusted to accommodate the provisions of the new legislation, within existing resources.

Healthway continued to operate under the Strategic Plan 2012-2017 this year.

Work started on the development of a new plan, aligned with the new Act and contemporary approaches to the promotion of good health. The Board considered comprehensive evaluations of Healthway's work over the past 25 years, independent advice on options for future directions, and the results of consultation with over 600 stakeholders.

The new plan will be finalised in 2017/18.





Western Australian Volleyball Association  
WA Beach Volleyball Tour

# DISCLOSURES & LEGAL COMPLIANCE

# OPINION OF Auditor General



## Auditor General

### INDEPENDENT AUDITOR'S REPORT

To the Parliament of Western Australia

### WESTERN AUSTRALIAN HEALTH PROMOTION FOUNDATION

#### Report on the Financial Statements

##### **Opinion**

I have audited the financial statements of the Western Australian Health Promotion Foundation which comprise the Statement of Financial Position as at 30 June 2017 the Statement of Comprehensive Income, Statement of Changes in Equity, Statement of Cash Flows for the year then ended, and Notes comprising a summary of significant accounting policies and other explanatory information.

In my opinion, the financial statements are based on proper accounts and present fairly, in all material respects, the operating results and cash flows of the Western Australian Health Promotion Foundation for the year ended 30 June 2017 and the financial position at the end of that period. They are in accordance with Australian Accounting Standards, the *Financial Management Act 2006* and the Treasurer's Instructions.

##### **Basis for Opinion**

I conducted my audit in accordance with the Australian Auditing Standards. My responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of my report. I am independent of the Foundation in accordance with the *Auditor General Act 2006* and the relevant 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 my audit of the financial statements. I have also fulfilled my other ethical responsibilities in accordance with the Code. I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my opinion.

##### **Responsibility of the Board for the Financial Statements**

The Board is responsible for keeping proper accounts, and the preparation and fair presentation of the financial statements in accordance with Australian Accounting Standards, the *Financial Management Act 2006* and the Treasurer's Instructions, and for such internal control as the Board determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Board is responsible for assessing the agency'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 Western Australian Government has made policy or funding decisions affecting the continued existence of the Foundation.

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

As required by the *Auditor General Act 2006*, my responsibility is to express an opinion on the financial statements. The objectives of my audit are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes my 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 statements.



## OPINION OF Auditor General continued

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

- Identify and assess the risks of material misstatement of the financial statements, 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 my 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 agency's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the Board.
- Conclude on the appropriateness of the Board'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 agency's ability to continue as a going concern. If I conclude that a material uncertainty exists, I am required to draw attention in my auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify my opinion. My conclusions are based on the audit evidence obtained up to the date of my auditor's report.
- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

I communicate with the Board regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that I identify during my audit.

### **Report on Controls**

#### ***Opinion***

I have undertaken a reasonable assurance engagement on the design and implementation of controls exercised by the Western Australian Health Promotion Foundation. The controls exercised by the Foundation are those policies and procedures established by the Board to ensure that the receipt, expenditure and investment of money, the acquisition and disposal of property, and the incurring of liabilities have been in accordance with legislative provisions (the overall control objectives).

My opinion has been formed on the basis of the matters outlined in this report.

In my opinion, in all material respects, the controls exercised by the Western Australian Health Promotion Foundation are sufficiently adequate to provide reasonable assurance that the receipt, expenditure and investment of money, the acquisition and disposal of property and the incurring of liabilities have been in accordance with legislative provisions during the year ended 30 June 2017.

#### ***The Board's Responsibilities***

The Board is responsible for designing, implementing and maintaining controls to ensure that the receipt, expenditure and investment of money, the acquisition and disposal of property, and the incurring of liabilities are in accordance with the *Financial Management Act 2006*, the Treasurer's Instructions and other relevant written law.



**Auditor General's Responsibilities**

As required by the *Auditor General Act 2006*, my responsibility as an assurance practitioner is to express an opinion on the suitability of the design of the controls to achieve the overall control objectives and the implementation of the controls as designed. I conducted my engagement in accordance with Standard on Assurance Engagements ASAE 3150 *Assurance Engagements on Controls* issued by the Australian Auditing and Assurance Standards Board. That standard requires that I comply with relevant ethical requirements and plan and perform my procedures to obtain reasonable assurance about whether, in all material respects, the controls are suitably designed to achieve the overall control objectives and the controls, necessary to achieve the overall control objectives, were implemented as designed.

An assurance engagement to report on the design and implementation of controls involves performing procedures to obtain evidence about the suitability of the design of controls to achieve the overall control objectives and the implementation of those controls. The procedures selected depend on my judgement, including the assessment of the risks that controls are not suitably designed or implemented as designed. My procedures included testing the implementation of those controls that I consider necessary to achieve the overall control objectives.

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

**Limitations of Controls**

Because of the inherent limitations of any internal control structure it is possible that, even if the controls are suitably designed and implemented as designed, once the controls are in operation, the overall control objectives may not be achieved so that fraud, error, or noncompliance with laws and regulations may occur and not be detected. Any projection of the outcome of the evaluation of the suitability of the design of controls to future periods is subject to the risk that the controls may become unsuitable because of changes in conditions.

**Report on the Key Performance Indicators****Opinion**

I have undertaken a reasonable assurance engagement on the key performance indicators of the Western Australian Health Promotion Foundation for the year ended 30 June 2017. The key performance indicators are the key effectiveness indicators and the key efficiency indicators that provide performance information about achieving outcomes and delivering services.

In my opinion, in all material respects, the key performance indicators of the Western Australian Health Promotion Foundation are relevant and appropriate to assist users to assess the Foundation's performance and fairly represent indicated performance for the year ended 30 June 2017.

**The Board's Responsibility for the Key Performance Indicators**

The Board is responsible for the preparation and fair presentation of the key performance indicators in accordance with the *Financial Management Act 2006* and the Treasurer's Instructions and for such internal control as the Board determines necessary to enable the preparation of key performance indicators that are free from material misstatement, whether due to fraud or error. In preparing the key performance indicators, the Board is responsible for identifying key performance indicators that are relevant and appropriate having regard to their purpose in accordance with Treasurer's Instruction 904 *Key Performance Indicators*.

**Auditor General's Responsibility**

As required by the *Auditor General Act 2006*, my responsibility as an assurance practitioner is to express an opinion on the key performance indicators. The objectives of my engagement are to obtain reasonable assurance about whether the key performance indicators are relevant and appropriate to assist users to assess the agency's performance and whether the key performance indicators are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes my opinion.

## OPINION OF Auditor General continued

I conducted my engagement in accordance with Standard on Assurance Engagements ASAE 3000 *Assurance Engagements Other than Audits or Reviews of Historical Financial Information* issued by the Australian Auditing and Assurance Standards Board. That standard requires that I comply with relevant ethical requirements relating to assurance engagements.

An assurance engagement involves performing procedures to obtain evidence about the amounts and disclosures in the key performance indicators. It also involves evaluating the relevance and appropriateness of the key performance indicators against the criteria and guidance in Treasurer's Instruction 904 for measuring the extent of outcome achievement and the efficiency of service delivery. The procedures selected depend on my judgement, including the assessment of the risks of material misstatement of the key performance indicators. In making these risk assessments I obtain an understanding of internal control relevant to the engagement in order to design procedures that are appropriate in the circumstances.

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

### **My Independence and Quality Control Relating to the Reports on Controls and Key Performance Indicators**

I have complied with the independence requirements of the *Auditor General Act 2006* and the relevant ethical requirements relating to assurance engagements. In accordance with ASQC 1 *Quality Control for Firms that Perform Audits and Reviews of Financial Reports and Other Financial Information, and Other Assurance Engagements*, the Office of the Auditor General maintains a comprehensive system of quality control including documented policies and procedures regarding compliance with ethical requirements, professional standards and applicable legal and regulatory requirements.

### **Matters Relating to the Electronic Publication of the Audited Financial Statements and Key Performance Indicators**

This auditor's report relates to the financial statements and key performance indicators of the Western Australian Health Promotion Foundation for the year ended 30 June 2017 included on the Foundation's website. The Foundation's management is responsible for the integrity of the Foundation's website. This audit does not provide assurance on the integrity of the Foundation's website. The auditor's report refers only to the financial statements and key performance indicators described above. It does not provide an opinion on any other information which may have been hyperlinked to/from these financial statements or key performance indicators. If users of the financial statements and key performance indicators are concerned with the inherent risks arising from publication on a website, they are advised to refer to the hard copy of the audited financial statements and key performance indicators to confirm the information contained in this website version of the financial statements and key performance indicators.

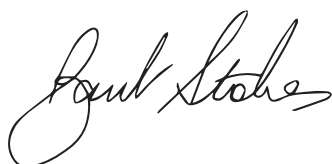


DON CUNNINGHAME  
ACTING DEPUTY AUDITOR GENERAL  
Delegate of the Auditor General for Western Australia  
Perth, Western Australia  
// August 2017

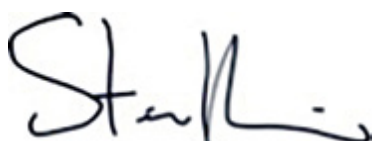
# CERTIFICATION OF Financial Statements

The accompanying financial statements of the Western Australian Health Promotion Foundation have been prepared in compliance with the provisions of the *Financial Management Act 2006* from proper accounts and records to present fairly the financial transactions for the reporting year ended 30 June 2017 and the financial position as at 30 June 2017.

At the date of signing we are not aware of any circumstances which would render the particulars included in the financial statements misleading or inaccurate.



Professor Bryant Stokes AM  
CHAIRPERSON



Mr Steve Harris  
BOARD MEMBER



Ms Lina Barbato  
CHIEF FINANCE OFFICER

11 August 2017

# FINANCIAL Statements

## Western Australian Health Promotion Foundation Statement of Comprehensive Income For The Year Ended

30 June 2017

	Note	2017 \$	2016 \$
<b>COST OF SERVICES</b>			
<b>Expenses</b>			
Employee benefits expense	6	2,313,590	2,218,702
Supplies and services	7	1,413,396	1,193,973
Depreciation and amortisation expense	8	32,391	30,923
Accommodation expenses	9	500,542	497,149
Grants and sponsorships	10	18,710,139	18,501,874
Other expenses	11	77,653	89,556
<b>Total cost of services</b>		<b>23,047,711</b>	<b>22,532,177</b>
<b>Income</b>			
Revenue			
Interest revenue	12	100,781	477,033
Other revenue	13	309,762	282,660
<b>Total Revenue</b>		<b>410,543</b>	<b>759,693</b>
<b>Total income other than income from State Government</b>		<b>410,543</b>	<b>759,693</b>
<b>NET COST OF SERVICES</b>		<b>22,637,168</b>	<b>21,772,484</b>
<b>INCOME FROM STATE GOVERNMENT</b>	15		
Service appropriation		23,037,000	22,492,000
Services received free of charge		23,280	1,329
<b>Total income from State Government</b>		<b>23,060,280</b>	<b>22,493,329</b>
<b>SURPLUS/(DEFICIT) FOR THE PERIOD</b>		<b>423,112</b>	<b>720,845</b>
<b>TOTAL COMPREHENSIVE INCOME FOR THE PERIOD</b>		<b>423,112</b>	<b>720,845</b>

The Statement of Comprehensive Income should be read in conjunction with the accompanying notes.



**Western Australian Health Promotion Foundation**  
Statement of Financial Position  
As At

**30 June 2017**

	Note	2017 \$	2016 \$
<b>ASSETS</b>			
<b>Current Assets</b>			
Cash and cash equivalents	16	12,825,503	9,977,963
Receivables	17	1,026,616	787,388
Other current assets	18	6,318	54,071
<b>Total Current Assets</b>		<b>13,858,437</b>	<b>10,819,422</b>
<b>Non-Current Assets</b>			
Property, plant and equipment	19	7,485	11,351
Intangible assets	20	89,737	104,812
<b>Total Non-Current Assets</b>		<b>97,222</b>	<b>116,163</b>
<b>TOTAL ASSETS</b>		<b>13,955,659</b>	<b>10,935,585</b>
<b>LIABILITIES</b>			
<b>Current Liabilities</b>			
Payables	21	7,381,335	4,789,107
Provisions	22	335,948	271,464
<b>Total Current Liabilities</b>		<b>7,717,283</b>	<b>5,060,571</b>
<b>Non-Current Liabilities</b>			
Provisions	22	109,305	169,055
<b>Total Non-Current Liabilities</b>		<b>109,305</b>	<b>169,055</b>
<b>TOTAL LIABILITIES</b>		<b>7,826,588</b>	<b>5,229,626</b>
<b>NET ASSETS</b>		<b>6,129,071</b>	<b>5,705,959</b>
<b>EQUITY</b>			
	23		
Accumulated surplus		6,129,071	5,705,959
<b>TOTAL EQUITY</b>		<b>6,129,071</b>	<b>5,705,959</b>

The Statement of Financial Position should be read in conjunction with the accompanying notes.

## FINANCIAL Statements continued

Western Australian Health Promotion Foundation			
Statement Of Changes In Equity			
For The Year Ended			
30 June 2017			
	Note	Accumulated surplus/ (deficit) \$	Total equity \$
Balance at 1 July 2015	23	4,985,114	4,985,114
Surplus		720,845	720,845
<b>Total comprehensive income for the period</b>		<b>5,705,959</b>	<b>5,705,959</b>
<b>Balance at 30 June 2016</b>		<b>5,705,959</b>	<b>5,705,959</b>
Balance at 1 July 2016		5,705,959	5,705,959
Surplus		423,112	423,112
<b>Total comprehensive income for the period</b>		<b>423,112</b>	<b>423,112</b>
<b>Balance at 30 June 2017</b>		<b>6,129,071</b>	<b>6,129,071</b>

The Statement of Changes in Equity should be read in conjunction with the accompanying notes.

**Western Australian Health Promotion Foundation**  
Statement of Cash Flows  
For The Year Ended

**30 June 2017**

	Note	2017 \$	2016 \$
<b>CASH FLOWS FROM STATE GOVERNMENT</b>			
Service appropriation		23,037,000	22,492,000
<b>Net cash provided by State Government</b>		<b>23,037,000</b>	<b>22,492,000</b>
Utilised as follows:			
<b>CASH FLOWS FROM OPERATING ACTIVITIES</b>			
<b>Payments</b>			
Employee benefits		(2,280,077)	(2,286,189)
Supplies and services		(1,391,540)	(1,291,940)
Accommodation		(454,828)	(497,000)
Grants and sponsorships		(16,197,889)	(19,265,311)
GST payments on Purchases		(1,746,576)	(2,064,482)
<b>Receipts</b>			
Interest received		187,576	469,397
GST receipts on sales		5,642	5,685
GST receipts from taxation authority		1,638,873	1,922,767
Other receipts		62,809	67,165
<b>Net cash provided by/(used in) operating activities</b>	<b>24</b>	<b>(20,176,010)</b>	<b>(22,939,908)</b>
<b>CASH FLOWS FROM INVESTING ACTIVITIES</b>			
<b>Payments</b>			
Purchase of non-current assets		(13,450)	(33,371)
<b>Receipts</b>			
Proceeds from sale of non-current assets		-	-
<b>Net cash provided by/(used in) investing activities</b>		<b>(13,450)</b>	<b>(33,371)</b>
Net increase/(decrease) in cash and cash equivalents		2,847,540	(481,279)
Cash and cash equivalents at the beginning of period		9,977,963	10,459,242
<b>CASH AND CASH EQUIVALENTS AT THE END OF PERIOD</b>	<b>24</b>	<b>12,825,503</b>	<b>9,977,963</b>

The Statement of Cash Flows should be read in conjunction with the accompanying notes.

# FINANCIAL Statements continued

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## Western Australian Health Promotion Foundation

Notes To The Financial Statements  
For The Year Ended

30 June 2017

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### 1 Australian Accounting Standards

#### General

The Authority's financial statements for the year ended 30 June 2017 have been prepared in accordance with Australian Accounting Standards. The term 'Australian Accounting Standards' includes Standards and Interpretations issued by the Australian Accounting Standard Board (AASB).

The Authority has adopted any applicable new and revised Australian Accounting Standards from their operative dates.

#### Early adoption of standards

The Authority cannot early adopt an Australian Accounting Standard unless specifically permitted by TI 1101 *Application of Australian Accounting Standards and Other Pronouncements*. There has been no early adoption of any other Australian Accounting Standards that have been issued or amended (but not operative) by the Authority for the annual reporting period ended 30 June 2017.

### 2 Summary of significant accounting policies

#### (a) General Statement

The Authority is a not-for-profit reporting entity that prepares general purpose financial statements in accordance with Australian Accounting Standards, the Framework, Statements of Accounting Concepts and other authoritative pronouncements of the AASB as applied by the Treasurer's instructions. Several of these are modified by the Treasurer's instructions to vary application, disclosure, format and wording.

*The Financial Management Act 2006* and the Treasurer's instructions impose legislative provisions that govern the preparation of financial statements and take precedence over Australian Accounting Standards, the Framework, Statements of Accounting Concepts and other authoritative pronouncements of the AASB.

Where modification is required and has had a material or significant financial effect upon the reported results, details of that modification and the resulting financial effect are disclosed in the notes to the financial statements.

#### (b) Basis of Preparation

The financial statements have been prepared on the accrual basis of accounting using the historical cost convention.

The accounting policies adopted in the preparation of the financial statements have been consistently applied throughout all periods presented unless otherwise stated.

The financial statements are presented in Australian dollars and all values are rounded to the nearest dollar (\$).

Note 3 'Judgements made by management in applying accounting policies' discloses judgements that have been made in the process of applying the Authority's accounting policies resulting in the most significant effect on amounts recognised in the financial statements.

Note 4 'Key sources of estimation uncertainty' discloses key assumptions made concerning the future and other key sources of estimation uncertainty at the end of the reporting period, that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next reporting period.

#### (c) Reporting Entity

The reporting entity comprises the Authority only.



**(d) Income**

**Revenue recognition**

Revenue is recognised and measured at the fair value of consideration received or receivable. Revenue is recognised for the major business activities as follows:

**Sale of goods**

Revenue is recognised from the sale of goods and disposal of other assets when the significant risks and rewards of ownership transfer to the purchaser and can be measured reliably.

**Provision of services**

Revenue is recognised by reference to the stage of completion of the transaction.

**Interest**

Revenue is recognised as the interest accrues.

**Service Appropriations**

Service Appropriations are recognised as revenues at fair value in the period in which the Authority gains control of the appropriated funds. The Authority gains control of appropriated funds at the time those funds are deposited to the bank account or credited to the 'Amounts receivable for services' (holding account) held at Treasury.

**Grants, donations, gifts and other non-reciprocal contributions**

Revenue is recognised at fair value when the Authority obtains control over the assets comprising the contributions, usually when cash is received.

Other non-reciprocal contributions that are not contributions by owners are recognised at their fair value. Contributions of services are only recognised when a fair value can be reliably determined and the services would be purchased if not donated.

**Gains**

Realised and unrealised gains are usually recognised on a net basis. These include gains arising on the disposal of non-current assets and some revaluations of non-current assets.

**(e) Property, Plant and Equipment**

**Capitalisation/Expensing of assets**

Items of property, plant and equipment costing \$5,000 or more are recognised as assets and the cost of utilising assets is expensed (depreciated) over their useful lives. Items of property, plant and equipment costing less than \$5,000 are immediately expensed direct to the Statement of Comprehensive Income (other than where they form part of a group of similar items which are significant in total).

**Initial recognition and measurement**

Property, plant and equipment are initially recognised at cost.

For items of property, plant and equipment acquired at no cost or for nominal cost, the cost is the fair value at the date of acquisition.

**Subsequent measurement**

Property, plant and equipment are stated at historical cost less accumulated depreciation and accumulated impairment losses.

# FINANCIAL Statements continued

## **Depreciation**

All non-current assets having a limited useful life are systematically depreciated over their estimated useful lives in a manner that reflects the consumption of their future economic benefits.

Depreciation is calculated using the straight line method, using rates which are reviewed annually.

Estimated useful lives for each class of depreciable asset are:

Furniture, Fixture and Fittings	5 to 20 years
Office Equipment	5 to 20 years
Computer Equipment	3 years

## **(f) Intangible assets**

### **Capitalisation/expensing of assets**

Acquisitions of intangible assets costing \$5,000 or more are capitalised. The cost of utilising the assets is expensed (amortised) over their useful life. Costs incurred below these thresholds are immediately expensed directly to the Statement of Comprehensive Income.

Intangible assets are stated at historical cost less accumulated amortisation and accumulated impairment losses.

Amortisation for intangible assets with finite useful lives is calculated for the period of the expected benefit (estimated useful life which is reviewed annually) on the straight line basis. All intangible assets controlled by the Authority have a finite useful life and zero residual value.

The expected useful lives of intangible assets are:

Software (a)	3 to 5 years
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(a) Software that is not integral to the operation of any related hardware.

## **(g) Impairment of Assets**

Property, plant and equipment and intangible assets are tested for any indication of impairment at the end of each reporting period. Where there is an indication of impairment, the recoverable amount is estimated. Where the recoverable amount is less than the carrying amount, the asset is considered impaired and is written down to the recoverable amount and an impairment loss is recognised. Where an asset measured at cost is written down to recoverable amount an impairment loss is recognised in profit or loss.

As the Authority is a not-for-profit entity, unless a specialised asset has been identified as a surplus asset, the recoverable amount is the higher of an asset's fair value less costs to sell and depreciated replacement cost.

The risk of impairment is generally limited to circumstances where an asset's depreciation is materially understated, where the replacement cost is falling or where there is a significant change in useful life. Each relevant class of assets is reviewed annually to verify that the accumulated depreciation/amortisation reflects the level of consumption or expiration of the asset's future economic benefits and to evaluate any impairment risk from falling replacement costs.

Intangible assets with an indefinite useful life and intangible assets not yet available for use are tested for impairment at the end of the reporting period irrespective of whether there is any indication of impairment.

The recoverable amount of assets identified as surplus assets is the higher of fair value less costs to sell and the present value of future cash flows expected to be derived from the asset. Surplus assets carried at fair value have no risk of material impairment where fair value is determined by reference to market-based evidence. Where fair value is determined by reference to depreciated replacement cost, surplus assets are at risk of impairment and the recoverable amount is measured. Surplus assets at cost are tested for indications of impairment at the end of each reporting period.

## **(h) Leases**

The Authority has entered into an operating lease arrangement for the rent of the office building and motor vehicles where the lessor effectively retains all of the risks and benefits incident to ownership of the items held under the operating leases. Operating leases are expensed on a straight line basis over the lease term as this represents the pattern of benefits derived from the leased properties.

**(i) Financial Instruments**

In addition to cash, the Authority has two categories of financial instrument:

- Receivables; and
- Financial liabilities measured at amortised cost.

Financial instruments have been disaggregated into the following classes:

**Financial Assets**

- Cash and cash equivalents
- Receivables

**Financial Liabilities**

- Payables

Initial recognition and measurement of financial instruments is at fair value which normally equates to the transaction cost or the face value. Subsequent measurement is at amortised cost using the effective interest method.

The fair value of short-term receivables and payables is the transaction cost or the face value because there is no interest rate applicable and subsequent measurement is not required as the effect of discounting is not material.

**(j) Cash and Cash Equivalents**

For the purpose of the Statement of Cash Flows, cash and cash equivalent assets comprise cash on hand and short-term deposits with original maturities of three months or less that are readily convertible to a known amount of cash and which are subject to insignificant risk of changes in value.

**(k) Accrued Salaries**

Accrued salaries (see Note 21) represent the amount due to staff but unpaid at the end of the reporting period. Accrued salaries are settled within a fortnight of the reporting period end. The Authority considers the carrying amount of accrued salaries to be equivalent to its net fair value.

**(l) Receivables**

Receivables are recognised at original invoice amount less an allowance for any uncollectible amounts (i.e. impairment). The collectability of receivables is reviewed on an ongoing basis and any receivables identified as uncollectible are written-off against the allowance account. The allowance for uncollectible amounts (doubtful debts) is raised when there is objective evidence that the Authority will not be able to collect the debts. The carrying amount is equivalent to fair value as it is due for settlement within 30 days.

**(m) Payables**

Payables are recognised when the Authority becomes obliged to make future payments as a result of a purchase of assets or services. The carrying amount is equivalent to fair value, as settlement is generally within 30 days.

The Authority applies AASB 137 to determine items that meet the criteria of accounts payable, including grants and sponsorships. The payables are approved and due to be paid within the next 12 months. Funding recipients are generally required to meet certain conditions which are outside the Authority's control. Where the grants and sponsorships do not meet the criteria of AASB 137 these are included as future commitments in note 25.

**(n) Provisions**

Provisions are liabilities of uncertain timing or amount and are recognised where there is a present legal or constructive obligation as a result of a past event and when the outflow of resources embodying economic benefits is probable and a reliable estimate can be made of the amount of the obligation. Provisions are reviewed at the end of each reporting period.

**Provisions - Employee Benefits**

All annual leave and long service leave provisions are in respect of employees' services up to the end of the reporting period.

## FINANCIAL Statements continued

### Annual leave

Annual leave is not expected to be settled wholly within 12 months after the end of the reporting period and is therefore considered to be “other long term employee benefits”. The annual leave liability is recognised and measured at the present value of amounts expected to be paid when the liabilities are settled using the remuneration rate expected to apply at the time of settlement.

When assessing expected future payments consideration is given to expected future wage and salary levels including non-salary components such as employer superannuation contributions, as well as the experience of employee departures and periods of service. The expected future payments are discounted using market yields at the end of the reporting period on national government bonds with terms to maturity that match, as closely as possible, the estimated future cash outflows.

The provision for annual leave is classified as a current liability as the Authority does not have an unconditional right to defer settlement of the liability for at least 12 months after the end of the reporting period.

### Long service leave

Long service leave is not expected to be settled wholly within 12 months after the end of the reporting period and is therefore recognised and measured at the present value of amounts expected to be paid when the liabilities are settled using the remuneration rate expected to apply at the time of settlement.

A liability for long service leave is recognised after an employee has completed four years of service based on remuneration rates current as at the end of the reporting period.

When assessing expected future payments consideration is given to expected future wage and salary levels including non-salary components such as employer superannuation contributions, as well as the experience of employee departures and periods of service. The expected future payments are discounted using market yields at the end of the reporting period on national government bonds with terms to maturity that match, as closely as possible, the estimated future cash outflows.

Unconditional long service leave provisions are classified as current liabilities as the Authority does not have an unconditional right to defer the settlement of the liability for at least 12 months after the end of the reporting period. Pre-conditional and conditional long service leave provisions are classified as non-current liabilities because the Authority has an unconditional right to defer the settlement of the liability until the employee has completed the requisite years of service.”

### Superannuation

The Government Employees Superannuation Board (GESB) and other fund providers administer public sector superannuation arrangements in Western Australia in accordance with legislative requirements. Eligibility criteria for membership in particular schemes for public sector employees varies according to commencement and implementation dates.

Eligible employees contribute to the Pension Scheme, a defined benefit pension scheme closed to new members since 1987, or the Gold State Superannuation Scheme (GSS), a defined benefit lump sum scheme closed to new members since 1995.

Employees commencing employment prior to 16 April 2007 who were not members of either the Pension Scheme or the GSS became non-contributory members of the West State Superannuation Scheme (WSS). Employees commencing employment on or after 16 April 2007 became members of the GESB Super Scheme (GESBS). From 30 March 2012, existing members of the WSS or GESBS and new employees have been able to choose their preferred superannuation fund provider. The Authority makes contributions to GESB or other fund providers on behalf of employees in compliance with the *Commonwealth Government's Superannuation Guarantee (Administration) Act 1992*. Contributions to these accumulation schemes extinguish the Authority's liability for superannuation charges in respect of employees who are not members of the Pension Scheme or GSS.

The GSS is a defined benefit scheme for the purposes of employees and whole-of-government reporting. However, it is a defined contribution plan for agency purposes because the concurrent contributions (defined contributions) made by the Authority to GESB extinguishes the agency's obligations to the related superannuation liability.



The Authority has no liabilities under the Pension Scheme or the GSS. The liabilities for the unfunded Pension Scheme and the unfunded GSS transfer benefits attributable to members who transferred from the Pension Scheme, are assumed by the Treasurer. All other GSS obligations are funded by concurrent contributions made by the Authority to the GESB.

### **Provisions - Other**

#### **Employment On-Costs**

Employment on-costs, including workers' compensation insurance, are not employee benefits and are recognised separately as liabilities and expenses when the employment to which they relate has occurred. Employment on-costs are included as part of 'Other expenses' and are not included as part of the Authority's 'Employee benefits expense'. The related liability is included in 'Employment on-costs provision'.

#### **(o) Superannuation expense**

The superannuation expense recognised in the Statement of Comprehensive Income comprises employer contributions paid to the GSS (concurrent contributions), WSS, the GESBS, or other superannuation funds.

#### **(p) Comparative Figures**

Comparative figures are, where appropriate, reclassified to be comparable with the figures presented in the current reporting period.

#### **(q) Assets and services received free of charge or for nominal cost**

Assets or services received free of charge or for nominal cost, that the Authority would otherwise purchased if not donated, are recognised as income at the fair value of the assets or services where they can be reliably measured. A corresponding expense is recognised for services received. Receipts of assets are recognised in the Statement of Financial Position.

Assets and services received from other State Government agencies are separately disclosed under Income from State Government in the Statement of Comprehensive Income.

### **3 Judgements made by management in applying accounting policies**

The preparation of financial statements requires management to make judgements about the application of accounting policies that have a significant effect on the amounts recognised in the financial statements. The Authority evaluates these judgements regularly.

#### **Operating Lease Commitments**

The Authority has entered into commercial leases for accommodation and vehicles and has determined that the lessor retains all the significant risks and rewards of ownership of the property. Accordingly, the leases have been classified as operating leases.

### **4 Key sources of estimation uncertainty**

Key estimates and assumptions concerning the future are based on historical experience and various other factors that have a significant risk of causing a material adjustment to the carrying amount of assets and liabilities within the next reporting period.

#### **Long Service Leave**

Several estimations and assumptions used in calculating the Authority's long service leave provision include expected future salary rates, discount rates, employee retention rates and expected future payments. Changes in these estimations and assumptions may impact on the carrying amount of the long service leave provision.

### **5 Disclosure of changes in accounting policy and estimates**

#### **Initial application of an Australian Accounting Standard**

## FINANCIAL Statements continued

The Authority has applied the following Australian Accounting Standards effective for annual reporting periods beginning on or after 1 July 2016 that impacted on the Authority.

**AASB 1057 Application of Australian Accounting Standards**

This Standard lists the application paragraphs for each other Standard (and interpretation), grouped where they are the same. There is no financial impact.

**AASB 2014-4 Amendments to Australian Accounting Standards - Clarification of Acceptable**

Methods of Depreciation and Amortisation [AASB 116 & 138].

The adoption of this Standard has no financial impact for the Authority as depreciation and amortisation is not determined by reference to revenue generation, but reference to consumption of future economic benefits.

**AASB 2015-1 Amendments to Australian Accounting Standards - Annual Improvements to Australian Accounting Standards 2012-2014 Cycle [AASB 1, 2, 3, 5, 7, 11, 110, 119, 121, 133, 134, 137 & 140]**

These amendments arise from the issuance of International Financial Reporting Standard Annual Improvements to IFRSs 2012-2014 Cycle in September 2014 and editorial corrections. The Authority has determined that the application of the Standard has no financial impact.

**AASB 2015-2 Amendments to Australian Accounting Standards - Disclosure Initiative:**

Amendments to AASB 101 [AASB7, 101, 134, 1049]

This Standard amends AASB 101 to provide clarification regarding disclosure requirements in AASB 101. Specifically, the Standard proposes narrow-focus amendments to address some of the concerns expressed about existing presentation and disclosures requirements and to ensure entities are able to use judgement when applying a Standard in determining what information to disclose in the financial statements. There is no financial impact.

**AASB 2015-6 Amendments to Australian Accounting Standards - Extending Related Party**

Disclosures to Not-for-Profit Sector Entities [AASB 10, 124 & 1049]

The amendments extend the scope of AASB 124 to include application by not-for-profit public sector entities. Implementation guidance is included to assist application of the Standard by not -for-profit public sector entities.

There is no financial implications.

**Future impact of Australian Accounting Standards not yet operative**

The Authority cannot early adopt an Australian Accounting Standard unless specifically permitted by TI 1101 *Application of Australian Accounting Standards and Other Pronouncements* or by an exemption from TI 1101. By virtue of a limited exemption, the Authority has early adopted AASB 2015-7 Amendments to Australian Accounting Standards - Fair Value Disclosures of Not-for-Profit Public Sector Entities.

Where applicable, the Authority plans to apply the following Australian Accounting Standards from their application date.

**Operative for  
reporting periods  
beginning on/after**

AASB 9	<p>Financial Instruments</p> <p>This Standard supersedes AASB 139 Financial Instruments: Recognition and Measurement, introducing a number of changes to accounting treatments.</p> <p>The mandatory application date of this Standard is currently 1 January 2018 after being amended by AASB 2012-6, AASB 2013-9 and AASB 2014-1 Amendments to Australian Accounting Standards.</p> <p>The Authority has not yet determined the application or the potential impact of the Standard.</p>	1 Jan 2018
AASB 15	<p>Revenues from Contracts with Customers</p> <p>This Standard establishes the principles that the Authority shall apply to report useful information to users of financial statements about the nature, amount, timing and uncertainty of revenue and cash flows arising from a contract with a customer.</p> <p>The Authority's income is principally derived from appropriations which will be measured under AASB 1058 Income of Not-for-Profit Entities and will be unaffected by this change. However, the Authority has not yet determine the potential impact of the Standard on "User charges and Fee" and "Sales" revenues. In broad terms it is anticipated that the terms and conditions attached to these revenues will defer revenue recognition until the Authority has discharged its performance obligations.</p>	1 Jan 2019
AASB 16	<p>Leases</p> <p>This Standard introduces a single lessee accounting model and requires a lessee to recognise assets and liabilities for all leases with a term of more than 12 months, unless the underlying asset is of low value.</p> <p>Whilst the impact of AASB 16 has not yet been quantified, the entity has operating lease commitments for \$1,042,460. The worth of non-cancellable operating leases which the Authority anticipates most of this amount will be brought onto the Statement of Financial Position excepting amounts pertinent to short-term or low-value leases. Interest and amortisation expense will increase and rental expense will decrease.</p>	1 Jan 2019
AASB 1058	<p>Income of Not-for-Profit Entities</p> <p>This Standard clarifies and simplifies the income recognition requirements that apply to not for profit (NFP) entities, more closely reflecting the economic reality of NFP entity transactions that are not contracts with customers. Timing of income recognition is dependent on whether such a transaction gives rise to a liability, or a performance obligation ( a promise to transfer a good or service) or an obligation to acquire an asset.</p> <p>The Authority has not yet determined the application or the potential impact of the Standard.</p>	1 Jan 2019

## FINANCIAL Statements continued

		Operative for reporting periods beginning on/after
AASB 2010-7	<p>Amendments to Australian Accounting Standards arising from AASB 9 (December 2010) [AASB 1, 3, 4, 5, 7, 101, 102, 108, 112, 118, 120, 121, 127, 128, 131, 132, 136, 137, 139, 1023 &amp; 1038 and Int 2, 5, 10, 12, 19 &amp; 127]</p> <p>This Standard makes consequential amendments to other Australian Accounting Standards and Interpretations as a result of issuing AASB 9 in December 2010.</p> <p>The mandatory application date of this Standard has been amended by AASB 2012-6, and AASB 2014-1 to 1 January 2018. The Authority has not yet determined the application or the potential impact of the Standard.</p>	1 Jan 2018
AASB 2014-1	<p>Amendments to Australian Accounting Standards</p> <p>Part E of this Standard makes amendments to AASB 9 and consequential amendments to other Standards. It has not been assessed by the Authority to determine the application or potential impact of the Standard.</p>	1 Jan 2018
ASASB 2014-5	<p>Amendments to Australian Accounting Standards arising from AASB 15</p> <p>This Standard gives effect to the consequential amendments to Australian Accounting Standards (including interpretation) arising from the issuance of AASB 15.</p> <p>The Authority has not yet determined the application or the potential impact of the Standard.</p>	1 Jan 2018
AASB 2014-7	<p>Amendments to Australian Accounting Standards arising from AASB 9 (December 2014)</p> <p>This Standard gives effect to the consequential amendments to Australian Accounting Standards (including interpretations) arising from the issuance of AASB 9 (December 2014). The Authority has not yet determined the application or the potential impact of this Standard.</p>	1 Jan 2018
AASB 2015-8	<p>Amendments to Australian Accounting Standards - Effective Date of AASB 15</p> <p>This Standard amends the mandatory effective date (application date) of AASB 15 Revenue from Contracts with Customers so that AASB 15 is required to be applied for annual reporting periods beginning on or after 1 January 2018 instead of 1 January 2017. For Not-for-Profit entities the mandatory effective date has subsequently been amended to 1 January 2019 by AASB 2016-7.</p> <p>The Authority has not yet determined the application or the potential impact of AASB 15.</p>	1 Jan 2019
AASB 2016-2	<p>Amendments to Australian Accounting Standards - Disclosure Initiative: Amendments to AASB 107</p> <p>This Standard amends AASB 107 Statement of Cash Flow (August 2015) to require disclosures that enable users of financial statements to evaluate changes in liabilities arising from financing activities, including both changes arising from cash flows and non-cash changes. There is no financial impact.</p>	1 Jan 2017



		<b>Operative for reporting periods beginning on/after</b>
AASB 2016-3	<p>Amendments to Australian Accounting Standards - Clarifications to AASB 15</p> <p>This Standard clarifies identifying performance obligations, principal versus agent considerations, timing of recognising revenue from granting a license and provides further transitional provisions to AASB 15. The Authority has not yet determined the application or the potential impact.</p>	1 Jan 2018
AASB 2016-4	<p>Amendments to Australian Accounting Standards - Recoverable Amount of Non-Cash Generating Specialised Assets of Not-for-Profit Entities</p> <p>This Standard clarifies that the recoverable amount of primary non-cash-generating assets of not-for-profit entities, which are typically specialised in nature and held for continuing use of their service capacity, is expected to be materially the same as fair value determined under AASB 13 Fair Value Measurement.</p> <p>The Authority has not yet determined the application or the potential impact.</p>	1 Jan 2017
AASB 2016-7	<p>Amendments to Australian Accounting Standards - Deferral of AASB 15 for Not-for-Profit Entities</p> <p>This Standard amends the mandatory effective date (applicable date) of AASB 15 and defers the consequential amendments that were originally set out in AASB 2014-5 Amendments to Australian Accounting Standards arising from AASB 15 for Not-for-Profit entities to annual reporting periods beginning on or after 1 January 2019, instead of 1 January 2018. There is no financial impact.</p>	1 Jan 2017
AASB 2016-8	<p>Amendments to Australian Accounting Standards - Australian Implementation Guidance for Not-for-Profit Entities</p> <p>This Standard inserts Australian requirements and authoritative implementation guidance for not-for-profit entities into AASB 9 and AASB 15. This guidance assists not-for-profit entities in applying those Standards to particular transactions and other events. There is no financial impact.</p>	1 Jan 2019

# FINANCIAL Statements continued

## Western Australian Health Promotion Foundation

Notes To The Financial Statements

For The Year Ended

30 June 2017

	2017 \$	2016 \$
<b>6 Employee benefits expense</b>		
Wages and salaries (a)	2,133,992	2,053,051
Superannuation – defined contribution plans(b)	179,598	165,651
	<b>2,313,590</b>	<b>2,218,702</b>
(a) Includes the value of the fringe benefit to the employee plus the fringe benefits tax component, leave entitlements including superannuation contribution component.		
(b) Defined contribution plans include West State, Gold State, GESBS and other eligible funds.		
Employment on-costs such as workers' compensation insurance are included at note 11 'Other Expenses'.		
The employment on-costs liability is included at note 22 'Provisions'.		
<b>7 Supplies and services</b>		
Communications	41,660	45,349
Consultants and contractors	1,267,264	1,022,199
Consumables	30,369	34,231
Travel	4,971	7,839
Other	69,132	84,355
	<b>1,413,396</b>	<b>1,193,973</b>
<b>8 Depreciation and amortisation expense</b>		
<u>Depreciation</u>		
Equipment and apparatus	2,327	2,472
Computing equipment and software	1,539	9,609
	<b>3,866</b>	<b>12,081</b>
<u>Amortisation</u>		
Intangible assets	28,525	18,842
	<b>28,525</b>	<b>18,842</b>
<b>Total depreciation and amortisation</b>	<b>32,391</b>	<b>30,923</b>
<b>9 Accommodation expenses</b>		
Lease rentals	432,995	420,675
Cleaning	67,547	76,474
	<b>500,542</b>	<b>497,149</b>

	2017	2016
	\$	\$
<b>10 Grants and sponsorships</b>		
Health promotion and research grants	7,222,546	5,498,868
Arts sponsorships	3,014,598	3,712,373
Sport sponsorships	6,492,250	7,282,500
Racing sponsorships	263,000	0
Community Events	361,100	376,000
Support sponsorships	1,356,645	1,632,133
	<b>18,710,139</b>	<b>18,501,874</b>
<b>11 Other expenses</b>		
Other Staff costs (a)	23,486	26,807
Maintenance	11,667	21,149
Audit fees	42,500	41,600
	<b>77,653</b>	<b>89,556</b>
(a) Includes workers' compensation insurance and other employment on-costs. The on-costs liability associated with the recognition of annual and long service leave liability is included at note 22 'Provisions'. Superannuation contributions accrued as part of the provision for leave are employee benefits and are not included in employment on-costs.		
<b>12 Interest revenue</b>		
Bank Interest (a)	100,781	477,033
	<b>100,781</b>	<b>477,033</b>
(a) The <i>Western Australian Health Promotion Foundation Act 2016</i> that came into effect from 1 September 2016, does not contain provisions that allow interest earned on Healthway's account to be credited to that account.		
<b>13 Other revenue</b>		
Return of unexpended grants and sponsorships	51,246	56,188
Unused funds (a)	246,953	210,055
Other	11,563	16,417
	<b>309,762</b>	<b>282,660</b>
(a) This reflects prior year liabilities released following project completion.		
<b>14 Net gain /(loss) on disposal of non-current assets</b>		
Healthway had no disposal of non-current assets in 2016/17.		

## FINANCIAL Statements continued

	2017	2016
	\$	\$
<b>15 Income from State Government</b>		
Appropriation received during the year:		
Service appropriation (a)	23,037,000	22,492,000
Services received free of charge from other State government agencies during the financial period:		
State Solicitor's Office	13,690	1,329
Department of Finance	9,590	0
	<b>23,280</b>	<b>1,329</b>
	<b>23,060,280</b>	<b>22,493,329</b>
(a) Service appropriations fund the net cost of services delivered. The appropriation revenue comprises a cash component only.		
<b>16 Cash and cash equivalents</b>		
Cash and cash equivalents	12,825,220	9,977,671
Cash on Hand	283	292
	<b>12,825,503</b>	<b>9,977,963</b>
<b>17 Receivables</b>		
Current		
GST receivable	1,024,516	682,962
Interest receivable	0	86,795
Other Debtors	2,100	17,631
	<b>1,026,616</b>	<b>787,388</b>
The Authority does not hold any collateral or other credit enhancements as security for receivables.		
<b>18 Other current assets</b>		
Prepayments	6,318	54,071
	<b>6,318</b>	<b>54,071</b>
<b>19 Property, plant and equipment</b>		
<u>Equipment and Apparatus</u>		
At Cost	40,174	40,174
Accumulated depreciation	(32,689)	(30,362)
	<b>7,485</b>	<b>9,812</b>
<u>Computing Equipment and Software</u>		
At Cost	144,818	144,818
Accumulated depreciation	(144,818)	(143,279)
	<b>-</b>	<b>1,539</b>
	<b>7,485</b>	<b>11,351</b>



Reconciliations of the carrying amounts of property, plant, and equipment at the beginning and end of the reporting period are set out in the table below.

<b>2017</b>	<b>Equipment and Apparatus</b>	<b>Computing Equipment</b>	<b>Total</b>
	\$	\$	\$
Carrying amount at the start of the period	9,812	1,539	11,351
Additions	-	-	-
Depreciation	(2,327)	(1,539)	(3,866)
Carrying amount at the end of the period	<b>7,485</b>	<b>0</b>	<b>7,485</b>

There were no indications of impairment to property, plant and equipment at 30 June 2017.

<b>2016</b>	<b>Equipment and Apparatus</b>	<b>Computing Equipment</b>	<b>Total</b>
	\$	\$	\$
Carrying amount at the start of the period	1,592	11,148	12,740
Additions	10,692	-	10,692
Disposals			
At costs	15,936	-	15,936
Accumulated Depreciation	(15,936)	-	(15,936)
Depreciation	(2,472)	(9,609)	(12,081)
Carrying amount at the end of the period	<b>9,812</b>	<b>1,539</b>	<b>11,351</b>

	<b>2017</b>	<b>2016</b>
	\$	\$
<b>20 Intangible Assets</b>		
<b><u>Computers software</u></b>		
At cost	270,378	256,928
WIP	0	0
Accumulated amortisation	(180,641)	(152,116)
	<b>89,737</b>	<b>104,812</b>
Reconciliation		
<b><u>Computers software</u></b>		
Carrying amount at start of period	104,812	74,574
Additions	13,450	49,080
Amortisation expense	(28,525)	(18,842)
Carrying amount at end of period	<b>89,737</b>	<b>104,812</b>
WIP	-	-
Carrying amount at end of period	<b>89,737</b>	<b>104,812</b>

## FINANCIAL Statements continued

	2017	2016
	\$	\$
<b>21 Payables</b>		
Current		
Trade payables	287,977	167,948
Grants and sponsorships	7,078,860	4,597,247
Accrued salaries	8,208	0
Amount owing to the ATO	5,629	6,394
Other	661	17,518
	<b>7,381,335</b>	<b>4,789,107</b>
<b>22 Provisions</b>		
Current		
Employee benefits provision		
Annual Leave (a)	149,126	140,448
Long service leave (b)	184,567	129,219
Other provisions		
Employment on-costs ( c)	2,255	1,797
	<b>335,948</b>	<b>271,464</b>
Non-current		
Employee benefits provision		
Long service leave (b)	108,571	167,935
Other provisions		
Employment on-costs ( c)	734	1,120
	<b>109,305</b>	<b>169,055</b>
(a) Annual leave liability		
Annual leave liabilities have been classified as current as there is no unconditional right to defer settlement for at least 12 months after the end of the reporting period. Assessments indicate that actual settlement of the liabilities is expected to occur as follows:		
Within 12 months of the end of the reporting period	93,355	98,930
More than 12 months after the reporting period	55,771	41,518
	<b>149,126</b>	<b>140,448</b>
(b) Long service leave liability		
Long service leave liabilities have been classified as current where there is no unconditional right to defer settlement for at least 12 months after the end of the reporting period. Assessments indicate that actual settlement of the liabilities is expected to occur as follows:		
Within 12 months of the end of the reporting period	99,733	129,219
More than 12 months after the reporting period	193,405	167,935
	<b>293,138</b>	<b>297,154</b>

	2017	2016
	\$	\$

(c) Employment on-costs

The settlement of annual and long service leave liabilities gives rise to the payment of employment on-costs including workers' compensation insurance. The provision is the present value of expected future payments. The associated expense is disclosed in note 11 'Other expenses'.

**Movements in Other Provisions**

Movements in each class of provisions during the financial year, other than employee benefits, are set out below.

Employment on-cost provisions

Carrying amount at the start of period	2,917	2,460
Additional/(reversals of) provisions recognised	72	457
Carrying amount at end of period	<b>2,989</b>	<b>2,917</b>

**23 Equity**

Equity represents the residual interest in the net assets of the Authority. The Western Australian Government holds the equity interest in the Authority on behalf of the community.

**Accumulated surplus**

Balance at start of period	5,705,959	4,985,114
Result for the period	423,112	720,845
Balance at end of period	<b>6,129,071</b>	<b>5,705,959</b>

**24 Notes to the Statement of Cash Flows**

**Reconciliation of cash**

Cash at the end of the reporting period as shown in the Statement of Cash Flows is reconciled to the related items in the Statement of Financial Position as follows:

Cash and cash equivalents	12,825,220	9,977,671
Cash on hand	283	292
	<b>12,825,503</b>	<b>9,977,963</b>

## FINANCIAL Statements continued

	2017	2016
	\$	\$
Reconciliation of net cost of services to net cash flows provided by/(used in) operating activities		
Net cost of services	(22,637,168)	(21,772,484)
Non-cash items:		
Depreciation and Amortisation	32,391	30,923
Resources received free of charge	23,280	1,329
Gain on disposal	-	-
(Increase)/decrease in assets:		
Current receivables	102,325	(25,267)
Other current assets	47,753	391
Increase/(decrease) in liabilities:		
Current payables	2,592,228	(1,139,683)
Current provisions	64,484	49,735
Non-current provisions	(59,750)	(48,298)
Net GST receipts/(payments)	(102,062)	(136,030)
Change in GST in receivables/payables	(239,491)	99,476
Net cash used in operating activities	<b>(20,176,010)</b>	<b>(22,939,908)</b>

At the end of the reporting period, the Authority had fully drawn on all financing facilities, details of which are disclosed in the financial statements.

### 25 Commitments

#### (a) Grants expenditure commitments

Grant expenditure commitments relate to the Board's approval to fund applications which were received on or prior to 30 June 2017 and are contingent on the Authority's continued existence and future revenue being received. The balance is not recognised as a liability until the year payment is to be made. The amounts payable are as follows:

Within 1 year	10,678,234	11,296,331
Later than 1 year and not later than 5 years	2,453,158	2,226,870
	<b>13,131,392</b>	<b>13,523,201</b>

The commitments are GST inclusive.

#### (b) Non-cancellable operating lease commitments

Commitments for minimum lease payments are payable as follows:

Within 1 year	459,641	472,201
Later than 1 year and not later than 5 years	582,819	1,034,142
Later than 5 years	-	-
	<b>1,042,460</b>	<b>1,506,343</b>

The commitments are GST inclusive.



The Authority relocated premises in February 2010 and a new non-cancellable lease was established with rent payable monthly in advance. The current lease concludes 31 October 2019 with two, three year options. During 2016/17 a Deed of Assignment was executed that made the Minister for Works responsible for the lease.

## 26 Contingent liabilities and contingent assets

There were no known contingent liabilities and contingent assets at reporting date and at the date of signing the financial report.

## 27 Events occurring after the end of the reporting period

No events, matters or circumstances have arisen since the end of the reporting period which significantly affected or may significantly affect the operations of the Authority, the results of those operations, or the state of affairs of the Authority in future financial years.

## 28 Explanatory statement

All variances between estimates (original budget) and actual results for 2017, and between the actual results for 2017 and 2016 are shown below. Narratives are provided for key variations selected from observed major variances, which are generally greater than 5% and \$450,644

### Statement of Comprehensive Income

	Variance Note	Original Budget 2017	Actual 2017	Actual 2016	Variance between estimate and actual	Variance between actual results for 2017 and 2016
<b>COST OF SERVICES</b>		\$	\$	\$	\$	\$
<u>Expenses</u>						
Employee benefits expense		2,386,000	2,313,590	2,218,702	(72,410)	94,888
Supplies and services	A,1	1,328,000	1,413,396	1,193,973	85,396	219,423
Depreciation and amortisation expense		55,000	32,391	30,923	(22,609)	1,468
Accommodation expenses		535,000	500,542	497,149	(34,458)	3,393
Grants and sponsorships	B	20,144,000	18,710,139	18,501,874	(1,433,861)	208,265
Other expenses		74,000	77,653	89,556	3,653	(11,903)
<b>Total cost of services</b>		<b>24,522,000</b>	<b>23,047,711</b>	<b>22,532,177</b>	<b>(1,474,289)</b>	<b>515,534</b>

## FINANCIAL Statements continued

	Variance Note	Original Budget 2017	Actual 2017	Actual 2016	Variance between estimate and actual	Variance between actual results for 2017 and 2016
<b>Income</b>						
<b>Revenue</b>						
Interest revenue	C,2	450,000	100,781	477,033	(349,219)	(376,252)
Other revenue	D	50,000	309,762	282,660	259,762	27,102
<b>Total Revenue</b>		<b>500,000</b>	<b>410,543</b>	<b>759,693</b>	<b>(89,457)</b>	<b>(349,150)</b>
<b>Total income other than income from State Government</b>		<b>500,000</b>	<b>410,543</b>	<b>759,693</b>	<b>(89,457)</b>	<b>(349,150)</b>
<b>NET COST OF SERVICES</b>		<b>24,022,000</b>	<b>22,637,168</b>	<b>21,772,484</b>	<b>(1,384,832)</b>	<b>864,684</b>
<b>INCOME FROM STATE GOVERNMENT</b>						
Service appropriation	Note (a)	24,037,000	23,037,000	22,492,000	(1,000,000)	545,000
Services received free of charge		-	23,280	1,329	23,280	21,951
<b>Total income from State Government</b>		<b>24,037,000</b>	<b>23,060,280</b>	<b>22,493,329</b>	<b>(976,720)</b>	<b>566,951</b>
<b>SURPLUS/(DEFICIT) FOR THE PERIOD</b>		<b>15,000</b>	<b>423,112</b>	<b>720,845</b>	<b>408,112</b>	<b>(297,733)</b>
<b>TOTAL COMPREHENSIVE INCOME FOR THE PERIOD</b>		<b>15,000</b>	<b>423,112</b>	<b>720,845</b>	<b>408,112</b>	<b>(297,733)</b>

### Major Estimate and Actual (2017) Variance Narratives

- The variance mainly reflects an increase in Board fees as determined by the Minister for Health on the recommendation of the Public Sector Commissioner in accordance with Healthway's governing legislation.
- Projects approved by the Board but not contracted at 30 June 2017 were not recognised and instead are included in the commitment Note 25 (a).
- The *Western Australian Health Promotion Foundation Act 2016* that came into effect from 1 September 2016, does not contain provisions that allow interest earned on Healthway's account to be credited to that account.
- Other revenue of \$309,762 includes unused grant and sponsorship monies at the end of the projects term.

### Major Actual (2017) and Comparative (2016) Variance Narratives

- The variance mainly reflects an increase in Board fees as determined by the Minister under s13 of the *Western Australian Health Promotion Foundation Act 2016 (Act)* on the recommendation of the Public Sector Commissioner, and additional consultancy costs.
- The *Western Australian Health Promotion Foundation Act 2016* that came into effect from 1 September 2016, does not contain provisions that allow interest earned on Healthway's account to be credited to that account.

### Notes

- Under s43(3) of the Act, the Healthway Board was unable to make or announce funding decisions once the writ was issued for the Federal Election in 2016. Accordingly grant funds of approximately \$1m were carried over and included in the service appropriation in 2016/17.

## 29 Financial Instruments

### (a) Financial Risk Management Objectives and Policies

Financial instruments held by the Authority are cash and cash equivalents, receivables and payables. The Authority has limited exposure to financial risks. The Authority's overall risk management program focuses on managing the risks identified below.

#### Credit risk

Credit risk arises when there is the possibility of the Authority's receivables defaulting on their contractual obligations resulting in financial loss to the Authority.

The maximum exposure to credit risk at the end of the reporting period in relation to each class of recognised financial assets is the gross carrying amount of those assets inclusive of any allowance for impairment as shown in the table at Note 29(c) 'Financial Instruments Disclosures' and Note 17 'Receivables'.

Credit risk associated with the Authority's financial assets is minimal as interest receipt is the main receivable. At the end of the reporting period there were no significant credit risks.

#### Liquidity risk

Liquidity risk arises when the Authority is unable to meet its financial obligations as they fall due.

The Authority is exposed to liquidity risk through its trading in the normal course of business.

The Authority has appropriate procedures to manage cash flows including drawdowns of appropriations by monitoring forecast cash flows to ensure that sufficient funds are available to meet its commitments.

#### Market risk

The Authority's exposure to market risk for changes in interest rates relate primarily to cash investments. The Authority does not trade in foreign currency and is not materially exposed to other price risks.

### (b) Categories of Financial Instruments

The carrying amounts of each of the following categories of financial assets and financial liabilities at the end of the reporting period are:

	2017	2016
	\$	\$
<b>Financial Assets</b>		
Cash and cash equivalents	12,825,503	9,977,963
Receivables (a)	-	86,795
<b>Financial Liabilities</b>		
Payables and other liabilities (b)	7,375,706	4,782,713

(a) The amount of receivables excludes GST recoverable and other statutory receivables from the ATO.

(b) The amount of payables excludes amounts payable to the ATO.

## FINANCIAL Statements continued

### (c) Financial Instruments disclosures

#### Credit Risk

The following table details the Authority's maximum exposure to credit risk and the ageing analysis of financial assets. The Authority's maximum exposure to credit risk at the end of the reporting period is the carrying amount of financial assets as shown below. The table discloses the ageing of financial assets that are past due but not impaired and impaired financial assets. The table is based on information provided to senior management of the Authority.

The Authority does not hold any collateral as security or other credit enhancement relating to the financial assets it holds.

#### Aged analysis of financial assets

	Carrying Amount	Not past due and not impaired	Past due but not impaired					Impaired financial assets
			Up to 1 Month	1-3 Months	3 months to 1 year	1-5 years	More than 5 Years	
	\$	\$	\$	\$	\$	\$	\$	\$
2017								
Cash and cash equivalents	12,825,503	12,825,503						
Receivables (a)	-	-						
	<b>12,825,503</b>	<b>12,825,503</b>	-	-	-	-	-	-
2016								
Cash and cash equivalents	9,977,963	9,977,963						
Receivables (a)	86,795	86,795						
	<b>10,064,758</b>	<b>10,064,758</b>	-	-	-	-	-	-

(a) The amount of receivables excludes GST recoverable and other statutory receivables from the ATO.



### Liquidity risk and interest rate exposure

The following table details the Authority's interest rate exposure and the contractual maturity analysis of financial assets and financial liabilities. The maturity analysis section includes interest and principal cash flows. The interest rate exposure section analyses only the carrying amounts of each item.

### Interest rate exposure and maturity analysis of financial assets and liabilities

	Interest rate exposure					Nominal Amount	Maturity Dates				
	Weighted Average Effective Interest Rate	Carrying Amount	Fixed interest rate	Variable interest rate	Non-interest bearing		Up to 1 Month	1-3 Months	3 months to 1 year	1-5 years	More than 5 Years
		\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
2017	0.00% (c)										
<u>Financial Assets</u>											
Cash and cash equivalents		12,825,503		12,825,220	283	12,825,503	12,825,503				
Receivables (a)		-			-	-	-				
		<b>12,825,503</b>	<b>-</b>	<b>12,825,220</b>	<b>283</b>	<b>12,825,503</b>	<b>12,825,503</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<u>Financial Liabilities</u>											
Payables (b)		7,375,706			7,375,706	7,375,706	3,447,570	803,480	3,124,656		
		<b>7,375,706</b>	<b>-</b>	<b>-</b>	<b>7,375,706</b>	<b>7,375,706</b>	<b>3,447,570</b>	<b>803,480</b>	<b>3,124,656</b>	<b>-</b>	<b>-</b>
2016											
<u>Financial Assets</u>											
Cash and cash equivalents	2.394%	9,977,963		9,977,671	292	9,977,963	9,977,963				
Receivables (a)		86,795			86,795	86,795	86,795				
		<b>10,064,758</b>	<b>-</b>	<b>9,977,671</b>	<b>87,087</b>	<b>10,064,758</b>	<b>10,064,758</b>	<b>-</b>	<b>-</b>	<b>-</b>	<b>-</b>
<u>Financial Liabilities</u>											
Payables (b)		4,782,713			4,782,713	4,782,713	1,676,525	965,575	2,140,613	-	-
		<b>4,782,713</b>	<b>-</b>	<b>-</b>	<b>4,782,713</b>	<b>4,782,713</b>	<b>1,676,525</b>	<b>965,575</b>	<b>2,140,613</b>	<b>-</b>	<b>-</b>

(a) The amount of receivables excludes GST recoverable and other statutory receivables from the ATO.

(b) The amount of payables excludes amounts payable to the ATO.

(c) The *Western Australian Health Promotion Foundation Act 2016* that came into effect from 1 September 2016, does not contain provisions that allow interest earned on Healthway's account to be credited to that account.

## FINANCIAL Statements continued

### Interest rate sensitivity analysis

The following table represents a summary of the interest rate sensitivity of the Authority's financial assets and liabilities at the end of the reporting period on the surplus for the period and equity for a 1% change in interest rates. It is assumed that the change in interest rates is held constant throughout the reporting period.

	Carrying amount	-100 basis points		+100 basis points	
		Profit	Equity	Profit	Equity
	\$	\$	\$	\$	\$
<b>2017</b>					
<u>Financial Assets</u>					
Cash and cash equivalents	12,825,220	(128,252)	(128,252)	128,252	128,252
		<b>(128,252)</b>	<b>(128,252)</b>	<b>128,252</b>	<b>128,252</b>
<b>2016</b>					
<u>Financial Assets</u>					
Cash and cash equivalents	9,977,671	(99,777)	(99,777)	99,777	99,777
		<b>(99,777)</b>	<b>(99,777)</b>	<b>99,777</b>	<b>99,777</b>

### Fair Values

All financial assets and liabilities recognised in the Statement of Financial Position, whether they are carried at cost or fair value, are recognised at amounts that represent a reasonable approximation of fair value unless otherwise stated in the applicable notes.

2017  
\$

2016  
\$

### 30 Compensation of Key Management Personnel

The Authority has determined that key management personnel include the responsible Ministers, board members and senior officers of the Authority. However, the Authority is not obligated to compensate the responsible Ministers and therefore disclosures in relation to the responsible Ministers' compensation may be found in the Annual Report on State Finances.

#### Compensation of members of the accountable authority

Compensation Band (\$)		
\$0-\$10,000	0	3
\$10,001-\$20,000	0	2
\$20,001-\$30,000	6	0
\$30,001-\$40,000	1	0

#### Compensation of senior officers

Compensation Band (\$)		
\$150,001-\$160,000	0	1
\$160,001-\$170,000	1	0
\$170,001-\$180,000	1	0
\$180,001-\$190,000	0	1
\$200,001-\$210,000	1	1
\$300,001-\$310,000	1	0
\$320,001-\$330,000	0	1

Short term employee benefits	906,790	780,654
Post employment benefits	72,198	55,001
Other long term benefits	51,114	51,114
Termination benefits	0	0
<b>Total compensation of Key Management Personnel</b>	<b>1,030,102</b>	<b>886,769</b>

### 31 Remuneration of auditor

Remuneration payable to the Auditor General for the financial year is as follows:

Auditing of the accounts, financial statements and performance indicators.	43,000	42,500
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### 32 Related Party Transactions

Healthway is a wholly owned and controlled entity of the State of Western Australia. In conducting its activities Healthway is required to pay various taxes and levies based on the standard terms and conditions that apply to all tax and levy payers to the State and entities related to the State.

Related parties of Healthway include:

- 1) all Ministers and their close family members, and their controlled or jointly controlled entities;
- 2) all senior officers and their close family members, and their controlled or jointly controlled entities;
- 3) other departments and public sector entities including related bodies included in the whole of government consolidated financial statements;
- 4) associates and joint ventures that are included in the whole of government consolidated financial statements; and
- 5) the Government Employees Superannuation Board (GESB).

Significant transactions with government related entities

Significant transactions include:

- 1) Service Appropriation note 15
- 2) Services received free of charge note 15

Material transactions with other related parties

- 1) Superannuation payment note 6

Healthway has no other material related party transaction with Ministers or senior officers or their close family members or their controlled (or jointly controlled) entities for disclosures.

### 33 Related bodies

The Authority had no related bodies during the financial year.

### 34 Affiliated bodies

The Authority had no affiliated bodies during the financial year.

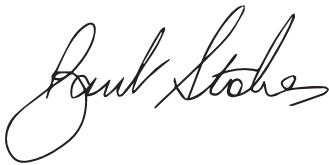
### 35 Supplementary financial information

**Write-offs, Losses through theft, defaults and other causes and Gifts of public property.**

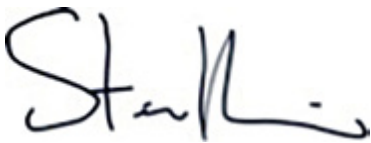
There were no write-offs, losses through theft, defaults and other causes or gifts of public property for 2016/17.

# CERTIFICATION OF Key Performance Indicators

We hereby certify that the key performance indicators are based on proper records, are relevant and appropriate for assisting users to assess the Western Australian Health Promotion Foundation's performance and fairly represent the performance of the Western Australian Health Promotion Foundation for the reporting period ended 30 June 2017.



Professor Bryant Stokes AM  
CHAIRPERSON



Mr Steve Harris  
BOARD MEMBER

11 August 2017

# KEY PERFORMANCE indicators 2016/17

## INTRODUCTION

The key performance indicators report on the performance of Healthway in achieving the desired outcome and delivering its service. Healthway reports on one key outcome and service. The key performance indicators comprise three effectiveness indicators and one efficiency indicator that link to the outcome and service.

Until 2016 Healthway had two efficiency indicators. In that year, this was reviewed with a finding that one of the two, an indicator that measured the *management of health promotion benefits*, was in fact a subset of the activities of the main efficiency indicator that measures the *average cost per \$100 of approved grants and sponsorship funding*. The Under Treasurer approved the aggregation of the efficiency indicators into a single indicator measuring the average cost of grant and sponsorship funding from 2016/17.

## GOVERNMENT GOAL

Results-based service delivery: Greater focus on achieving results in key service delivery areas for the benefit of all West Australians.

## KEY OUTCOME

To promote healthier lifestyles and environments.

## SERVICE

To promote and facilitate good health and activities which encourage healthy lifestyles in Western Australia.

## KEY EFFECTIVENESS INDICATORS

### Contractual Evaluation Measure

*KPI 1. Extent to which funded organisations have met the requirements and objectives agreed to with Healthway*

The contractual evaluation score (CES) has been reported through two separate scales that measure the aggregated level at which funded organisations met contractual obligations and provided value for money.

The CES applies a scale (from 1 to 5, with 1 representing projects falling well short of expected contract requirements) for each completed project to measure the extent to which funded organisations have delivered on agreed contractual obligations. These scores are then consolidated for an overall score for each program area as shown in Table 1.

Similarly, Table 2 reports on the results for the value for money measure of completed projects and applies a scale (from 1 to 5, with 1 representing low value for money) based on pre-determined strategic dimensions that include the reach of funded projects into agreed target priority groups and evidence of a focus on engaging people in healthy behaviour.



## KEY PERFORMANCE Indicators continued

**Table 1 – Meeting Contractual Requirements**

### Key to scores

Scale Items	Score
The project greatly exceeded the requirements of the contract.	5
The project exceeded the requirements of the contract.	4
The project was consistent with, or in the vicinity of the requirements of the contract.	3
The project fell short of the requirements of the contract.	2
The project fell well short of the requirements of the contract	1

### Meeting Contractual Requirements

Meeting Contractual Requirements	2016/17 Target	2016/17 Actual	2015/16 Actual	2014/15 Actual	2013/14 Actual
Health Promotion Projects	3.0	3.1	2.8	3.0	3.0
Arts projects	3.0	2.9	2.8	2.7	2.7
Community Events Projects	3.0	2.9	2.9	2.8	2.9
Sport and Racing Projects	3.0	3.1	3.0	3.0	2.9

The results across each of the programs indicate an improvement on previous years with the majority of funding recipients meeting the full requirements of their contract with Healthway or exceeding those requirements.

The Arts and Community Events programs scored slightly less than the 2016/17 target (but higher than previous years) mainly due to higher numbers of new applications for small sponsorships of \$5,000 or less, where there is potential for less understanding of requirements in regards to naming rights and strategies for achieving anticipated reach. Both health promotion projects and sport sponsorship area scored higher when compared with 2015/16 with targeted efforts made to support funded organisations meet contractual requirements.

**Table 2- Value for Money**

### Key to Scores

The project delivered...	Score
Very high value for money	5
high value for money	4
value for money	3
low value for money	2
Very low value for money	1

### Value for Money Table

Value for Money Score	2016/17 Target	2016/17 Actual	2015/16 Actual	2014/15 Actual	2013/14 Actual
Health Promotion Projects	3.0	3.0	2.8	3.0	3.0
Arts projects	3.0	3.0	2.8	2.7	2.8
Community Events Projects	3.0	2.9	2.8	2.8	3.1
Sport and Racing Projects	3.0	3.2	3.1	2.9	2.9

The Sport and Racing Projects have scored slightly above the 2016/17 target which reflects a) higher numbers of repeat sponsorships and therefore a better understanding of Healthway's requirements; and b) funded organisations that were more active in engaging participants with health messages.

The impact of a higher number of new applications in the Community Events programs, many being from small volunteer based, community or multicultural organisations which have limited experience in delivering sponsorship activities, has resulted in a score slightly below the 2016/17 target. A greater emphasis will be given in the coming year to supporting organisations prior to them submitting an application and during the initial contract phase, to improve their understanding and assist with the promotion of the health message.

## Sponsorship Monitor Survey

### *KPI 2. Extent to which sponsorship as a strategy contributes to health behaviour change*

	2016/17 target	2016/17 Actual	2014/15 Actual	2012/13 Actual	2011/12 Actual
% People attending Healthway sponsored events who were aware of the health message	70.0	65.7	65.1	72.0	75.6
% People attending a Healthway sponsored event who correctly understood the health message	55.0	56.7	56.3	57.5	59.2
% People who showed intention to act on health message	16.0	26.2	23.2	23.3	14.5

The Sponsorship Monitor Survey (“survey”) provides a comprehensive measure of the impact of health messages on audiences at Healthway-sponsored events, including health message awareness, understanding of the message and intention to act on the message promoted at the event. The survey is based on a set of complex instruments, methodology and analysis developed by the Health Promotion Evaluation Unit (HPEU) that has provided evidence that health sponsorship can lead to behaviour change. Due to the complexity of the survey it is undertaken every alternate year with the most recent survey undertaken in 2016/17. Following the implementation of changes to the sponsorship programs in 2010, it was necessary to amend the survey criteria for the type of projects that could be included in the sample, specifically to include some lower value sponsorships. As part of re-aligning the survey with the changes made to the sponsorship program two consecutive surveys were undertaken in 2010/11 and 2011/12 with smaller survey samples. Following this adjustment, the survey has returned to being undertaken every alternate year.

Thirty five major sport, arts and racing projects were surveyed in the 2016/17 Sponsorship Monitor. The population was considered to be people attending sponsored events. The HPEU collected surveys for 2,962 adults and young people aged over 10 years, randomly selected across these projects. This represented a 57% response rate. This ensured a confidence interval of within +/- 5% at the 95% confidence level.

In the 2016/17 Sponsorship Monitor, 35% of respondents completed interviewer-administered questionnaires and 65% completed self-administered surveys. The results show that 65.7% of people who attended a Healthway message-sponsored event were aware of the health message being promoted at the event in 2016/17. The target results for these surveys aim to maintain previous levels and new leveraging strategies may be put in place in sponsored projects to achieve incremental improvements on prior surveys.

The overall awareness levels in 2016/17 were broadly similar to those measured in 2014/15, but lower than those measured in the smaller Sponsorship Monitor conducted in 2012/13. Results from more than 20 years of monitoring audience awareness at Healthway-sponsored events show average awareness levels typically ranging between 70% and 75%, therefore the results measured in 2016/17 were below the expected range.

## KEY PERFORMANCE Indicators continued

However the HPEU report that the lower awareness in 2014/15 and in 2016/17 may be attributable to the higher proportion of self-administered questionnaires used in these surveys compared with earlier years. This method is less robust than interviewer-administered questionnaires but is more time-efficient for collecting data at events with limited time available during intervals and after the event. Awareness among respondents who completed interview questionnaires was 81% in 2016/17, compared with only 58% among those who responded via self-administered questionnaires.

An important step in encouraging people to adopt healthier lifestyles is to ensure that they correctly understand the health messages promoted at events. The Sponsorship Monitor asks patrons about their understanding of the health message being promoted at the surveyed events. Note that only people who are aware of the message can be asked if they understand its meaning. The levels of message comprehension or understanding measured in the 2016/17 Sponsorship Monitor were similar to earlier years, at 56.7% of all patrons surveyed (56.3% in 2014/15 and 57.5% in 2012/13).

As an indication of changing behaviours and habits, survey participants are asked about their intentions to act on the message. Again, only people who are aware of the message can be asked about their intentions. The proportion of the overall sample who indicated an intention to act on the message in the 2016/17 Sponsorship Monitor was higher than in the 2014/15 survey at 26.2% of all respondents surveyed, compared with 23.2% in 2014/15 and 23.3% in 2012/13. The higher proportion of respondents intending to act on the message reflects a trend in recent surveys and suggests that Healthway's approach to incorporating opportunities to engage with the health message at events and encourage behaviour change have been successful.

The Sponsorship Monitor Surveys provide evidence over many years that a consistently high percentage of people attending events are aware of and understand the health promotion message promoted at Healthway-sponsored events, and process the information to the extent that they form an intention to act on the messages promoted.

As stated earlier, studies have shown that sponsorship as a strategy is effective in raising awareness and comprehension of health messages which can also lead to a change of behaviour. Healthway's aim is to ensure that levels of awareness measured through the survey will be maintained within the range of 70% to 75% or higher which is considered to be an indication of effective performance in health sponsorship by health promotion specialists. Similarly measures in comprehension of the health messages and intention to change behaviour are considered to be an indication of effective performance if within the range of 50% to 65% and 12% to 20% or higher respectively<sup>1</sup>.

### Capacity Building

*KPI 3. Extent to which Healthway support has enabled capacity building activities in the community*

Healthway recognises capacity building as the development of sustainable skills, structures, resources and commitment to embrace behavioural change that continues beyond the term of a project or program.

<sup>1</sup> Lester L, Teal R, Maitland C, and Rosenberg M. Sponsorship Monitor Evaluation Results 2016/2017. Health Promotion Evaluation Unit, School of Human Sciences (Exercise and Sport Sciences), The University of Western Australia, Perth, 2017

Building sustained health promotion capacity of individuals, organisations and communities is a strategic priority for Healthway.

1. Healthway has identified four capacity building domains as follows:
2. Organisational commitment including policy changes;
3. Building partnerships and creating supportive environments;
4. Building health promotion skills and activities; and
5. Reaching new priority groups.

Extensive organisational surveys conducted independently for Healthway by HPEU over 25 years have applied the above domains in collecting data to measure the impact of Healthway support on funded organisations.

From 2010 the survey has been conducted on-line with improved follow-up measures that resulted in an increased response rate from 44% in 2011/12 to 69% in 2013/14, 73% in 2014/15, 72% in 2015/16 and 70% in 2016/17. Responses were received from 141 organisations in 2016/17, which reflects the number of projects that were completed during the year. The reported figures include 95% confidence intervals.

For the 2016/17 survey the targets aimed at attaining results within the range reported in earlier years in the table below. These are explained as follows:

- Note 1: The percentage of sponsored organisations implementing health policies in their venues and at events was in line with the target at 93% (+/- 5.5%) in 2016/17.
- Note 2: The percentage of organisations reporting building partnerships and creating supportive environments was higher in 2016/17 compared with the target and with previous years at 79% (+/- 7.5%). The higher figure in 2016/17 may reflect Healthway's continuing emphasis on partnerships and environmental change with sponsored organisations during the year.
- Note 3: The survey results show that in 2016/17 the percentage of organisations demonstrating a commitment to building health promotion capacity by acquiring new skills or training in new areas was in line with the previous year at 67% (+/- 8.1%) although lower than the target 70%. However this difference is within the 95% confidence intervals.
- Note 4: The measure for reaching new priority target groups in 2016/17 was slightly higher than the previous year at 75%, (+/- 7.7%) and higher than the target. This result indicates that Healthway-sponsored organisations have continued to extend their programs to proactively reach groups most at risk of poor health in the community.

The overall trend suggests that investment continues to be made in areas that are having a positive impact on health promotion capacity building and that Healthway funded organisations are maintaining a high level of commitment to health promotion and able to deliver on a range of activities that align with Healthway's stated capacity development objectives.

When benchmarked against the historical survey data collected over 20 years, appropriate targets for the 2017/18 year would be to maintain similar levels within the ranges measured over the last three surveys for each of the capacity building indicators in the table below.

## KEY PERFORMANCE Indicators continued

Notes	Year and Survey Type	2016/17 Target	2016/17 Online survey	2015/16 Online survey	2014/15 Online survey	2013/14 Online Survey
<b>Surveyed projects</b>			<b>141</b>	<b>132</b>	<b>151</b>	<b>218</b>
1	% organisations implementing health policies and demonstrating commitment to health promotion as a result of Healthway funding	93	93	94	93	93
2	% organisations building partnerships and creating supportive environments as a result of Healthway funding	70	79	76	67	64
3	% organisations committed to building and sustaining health promotion skills as a result of Healthway funding	70	67	67	71	69
4	% organisations reaching new priority groups as a result of Healthway funding	70	75	74	61	61

## KEY EFFICIENCY INDICATORS

Key efficiency indicators provide a measure of the cost of inputs required to achieve outcomes. In 2016, following a review of Healthway's two efficiency indicators, the Under Treasurer approved the aggregation of the indicators into a single indicator measuring the average cost per \$100 of approved grant and sponsorship funding from 2016/17. This reflects operational changes that resulted in the activities of the former indicator that measured *management of health promotion benefits* being recognised as a subset of the remaining indicator, as above.

### Grants and Sponsorships

In 2016/17 the actual average cost for every \$100 of approved funding of \$21.56 is slightly higher than the target of \$21.41. This measure comprises two key components being the total grant and sponsorships approved during the year over the total corporate costs for the agency including program evaluation costs.

As Healthway's governing legislation precluded the Healthway Board from making or announcing funding once the writ for the 2016 Federal election was issued, a number of funding proposals were carried over to 2016/17. Accordingly, the target for 2016/17 included an estimate of funding approvals from proposals carried forward from 2015/16 and this has impacted on the comparative results between the 2016/17 actual and target figures.

Efficiency Indicator	2016/17 Target	2016/17 Actual	2015/16 Actual	2014/15 Actual
	\$	\$	\$	
Average cost per \$100 of approved grant and sponsorship funding	21.41	21.56	22.87	23.03



# OTHER DISCLOSURES & LEGAL COMPLIANCE

## MINISTERIAL DIRECTIVES

No Ministerial directives were received for the reporting period of 2016/17.

## OTHER FINANCIAL DISCLOSURES

### Pricing Policies of Services Provided

The agency does not charge or recoup costs for its services.

### Major Capital Works

For the financial year of 2016/17, there were no major capital projects undertaken.

### Employment and Industrial Relations

**Healthway employed 17.9 full-time equivalents (FTEs) at 30 June, which is consistent with the previous year.** Healthway has continued to promote flexible work arrangements including enabling staff to work from home where operationally possible.

Healthway is committed to diversity in the workforce. At 30 June, women represented approximately 74% of the total workforce, including 66% of women in leadership and management tiers. The workforce includes staff from culturally diverse backgrounds.

### Employee Profile at 30 June 2017

Employee Profile (FTEs)	2016/17	2015/16
Full-time Permanent	11	12
Part-time Permanent	0.5	1.5
Full-time Fixed Term	5.0	4.0
Part-time Fixed Term	1.4	0.5
<b>Total FTEs</b>	<b>17.9</b>	<b>18.0</b>

### Workforce Planning and Staff Development

All staff have a training and professional development plan as part of their performance and development agreements. Healthway continued its focus on equal opportunity and diversity that included diversity training during the year.

External expertise was accessed through the year to support the development and retention of a healthy workplace culture. All recommendations are being implemented.

Recruitment practices and policies were reviewed during the year. Healthway is currently developing a new Strategic Plan and therefore a review of the staff structure is being undertaken to ensure it is aligned with the new strategic objectives. It is envisaged that permanent appointments will be made to all positions by the end of 2017.

There were no workers compensation claims in 2016/17.

## OTHER DISCLOSURES & Legal Compliance continued

### Industrial Relations

During the reporting period of 2016/17, there were no industrial relation issues and no services to the public were disrupted.

### GOVERNANCE DISCLOSURES

From 1 September 2016, the *Western Australian Health Promotion Foundation Act 2016* replaced the former *Tobacco Products Control Act 2006* as Healthway's governing legislation and a new Board was appointed from that date

The Board undertook a comprehensive induction program, with a strong focus on governance including presentations from the Public Sector Commissioner, the Crime and Corruption Commissioner, and the Auditor General. The Board was provided with comprehensive guidance documents including the Public Sector Commission's 'Principles of Good Governance for Board and Committees', 'Conduct Guide for Board and Committees' and 'Board Essentials', as well as adopting a new Charter and Code of Conduct.

### Contracts with Senior Officers

At the date of reporting, other than normal contracts of employment of service, no senior officer, or firms of which senior officers are members, or entities in which senior officers have substantial interests, had any interests in existing or proposed contracts with Healthway.

### Indemnity Insurance Premium

Healthway has continued to maintain a Directors' and Officers' Liability Insurance cover limited to \$5 million at a cost \$3,355 (inc gst) during 2016/17.

### Credit Card – Authorised Use

A number of Healthway staff hold a corporate credit card, the use of which is governed by approved policy. This is supported by procedures to monitor the use of these credit cards.

During the year there were no incidences of credit cards being used for personal expenditure.

### Board and Committee Remuneration

Healthway was governed by an Interim Board until the introduction of the *Western Australian Health Promotion Foundation Act 2016* (the Act) on 1 September 2016.

The Act provides for the Minister to determine the remuneration paid to a board or committee member on the recommendation of the Public Sector Commissioner. Premier's Circular 2010/02 - State Government Board and Committees provides the eligibility criteria for members to receive a fee.

Healthway has historically had three standing advisory committees, a research sub-committee and a brand advisory committee. The ongoing role of these committees will be reviewed in 2017/18 as part of Healthway's transition to the new Act and the establishment of a new strategic plan.

The table below reports the fee paid to each eligible Board and Committee member including those not receiving a fee during 2016/17.

Position	Name	Type of Remuneration	Period of Membership	Gross Remuneration
Presiding member	Prof Bryant Stokes	Board Fee	1 Jul 2016 to Jun 2017	\$39,414
Deputy Presiding member	Ms Fiona Kalaf	Board Fee	1 Sep 2016 to 30 Jun 2017	\$28,614
Board member	Ms Ricky Burges	Board Fee	1 Jul 2016 to Jun 2017	\$22,938
Board member	Dr Roslyn Carbon	Board Fee	1 Sep 2016 to 30 Jun 2017	\$21,460
Board member	Mr Nathan Giles	Board Fee	1 Sep 2016 to 30 Jun 2017	\$21,460
Board member	Mr Steven Harris	Board Fee	1 Sep 2016 to 30 Jun 2017	\$21,460
Board member	Adj Prof Terry Slevin	Board Fee	1 Sep 2016 to 30 Jun 2017	\$21,460
Board member	Mr Duncan Ord		1 Jul 2016 to 31 Aug 2016	\$0
Board member	Mr Ron Alexander		1 Jul 2016 to 31 Aug 2016	\$0
Board member	Ms Emma White		1 Jul 2016 to 31 Aug 2016	\$0
Committee member	Prof Steve Allsop		1 Jul 2016 to Jun 2017	\$0
Committee member	Assoc Prof Gina Ambrosini	Sitting Fee	1 Jul 2016 to Jun 2017	\$235
Committee member	Ms Carolyn Chard		1 Jul 2016 to Jun 2017	\$0
Committee member	Ms Gemma Crawford		1 Jul 2016 to Jun 2017	\$0
Committee member	Prof Rob Donovan		1 Jul 2016 to Jun 2017	\$0
Committee member	Prof Neil Drew		1 Jul 2016 to Jun 2017	\$0
Committee member	Ms Vanessa Elliott	Sitting Fee	1 Jul 2016 to Jun 2017	\$311
Committee member	Ms Narelle Finch		1 Jul 2016 to Jun 2017	\$0
Committee member	Prof Alison Garton	Sitting Fee	1 Jul 2016 to Jun 2017	\$235
Committee member	Mr Walter Gomes		1 Jul 2016 to Jun 2017	\$0
Committee member	Ms Suzie Haslehurst		1 Jul 2016 to Jun 2017	\$0
Committee member	Ms Kelly Kennington	Sitting Fee	1 Jul 2016 to Jun 2017	\$311
Committee member	Mr Gary Kirby		1 Jul 2016 to Jun 2017	\$0
Committee member	Assoc Prof Leanne Lester	Sitting Fee	1 Jul 2016 to Jun 2017	\$235
Committee member	Ms Jane Martin		1 Jul 2016 to Jun 2017	\$0
Committee member	Ms Louanne Munz	Sitting Fee	1 Jul 2016 to Jun 2017	\$311
Committee member	Ms Ilse O'Ferrall	Sitting Fee	1 Jul 2016 to Jun 2017	\$622
Committee member	Ms Leanne Pilkington		1 Jul 2016 to Jun 2017	\$0
Committee member	Dr Christina Pollard		1 Jul 2016 to Jun 2017	\$0
Committee member	Mrs Daisy Pope		1 Jul 2016 to Jun 2017	\$0
Committee member	Mr Steve Pratt	Sitting Fee	1 Jul 2016 to Jun 2017	\$759
Committee member	Professor Jane Scott	Sitting Fee	1 Jul 2016 to Jun 2017	\$235
Committee member	Ms Asha Singh		1 Jul 2016 to Jun 2017	\$0
Committee member	Ms Julia Stafford	Sitting Fee	1 Jul 2016 to Jun 2017	\$622
Committee member	Dr Melissa Stoneham	Sitting Fee	1 Jul 2016 to Jun 2017	\$759
Committee member	Mr Geoffrey Stooke	Sitting Fee	1 Jul 2016 to Jun 2017	\$466
Committee member	Mr Ross Tapper	Sitting Fee	1 Jul 2016 to Jun 2017	\$466
Committee member	Mr Luke Van der Beeke	Sitting Fee	1 Jul 2016 to Jun 2017	\$466
Committee member	Ms Noni Walker	Sitting Fee	1 Jul 2016 to Jun 2017	\$759
Committee member	Mr Dishan Weerasooriya		1 Jul 2016 to Jun 2017	\$0
Total Remuneration				\$183,601

## OTHER DISCLOSURES & Legal Compliance continued

### OTHER LEGAL COMPLIANCE

#### Disability Access Inclusion Plan Outcomes

Healthway is committed to achieving the seven outcomes outlined in our *Disability Access and Inclusion Plan 2014-2019* (DIAP) as shown below. Healthway recently awarded a contract for storage, distribution and retrieval of signage and products to Workpower, a registered Australian Disability Enterprise. This will foster further sustained employment opportunities for people with disabilities.

#### **Outcome 1: People with disabilities have the same opportunities as other people to access the services of, and any events organised by Healthway.**

Regular e-newsletters are sent to all subscribers, advising of news, events and activities. Access to previous eNewsletters is also available on Healthway's website.

Healthway's online funding application portal provides easier streamlined access for applicants and includes provision for those applicants requiring additional support. This platform was extended in 2016/17 to include all sponsorship application categories. It is planned to extend this to Health Promotion Grants during 2017/18.

Our funding agreements require funded organisations to comply with the *Disability Services Act 1993* and we survey Healthway funded organisations with 97.3% of respondents indicating that they are committed to the principles of the Disability Services Act, that the organisation provided access and promoted inclusion for people with disabilities.

Healthway also continues to provide funding to a number of disability-specific organisations or those seeking to increase their focus on people who have a disability. Healthway actively encourages applications from organisations for activities aimed to increase participation by people with disabilities.

#### **Outcome 2: People with disabilities have the same opportunities as other people to access the buildings and other facilities of Healthway.**

Healthway has occupied the same premises for the past 8 years and the facility has always been fully accessible with a ramp and electronic doors at the entrance.

#### **Outcome 3: People with disabilities receive information from Healthway in a format that will enable them to access the information as readily as other people are able to access it.**

Healthway's website complies with the Western Australian Government Website Accessibility Policy that includes access for persons with disabilities.

Online information on the website is published in a format that can be adapted for screen readers and viewed in alternative sizes.

Healthway holds forums in accessible venues and provides information in plain English that is available in alternative formats upon request.

**Outcome 4: People with disabilities receive the same level and quality of service from the staff of Healthway as other people receive from the staff of Healthway.**

In February 2017 Healthway held a Diversity Training Workshop for our staff at which Healthway's values to provide for fair and inclusive treatment of all people who interact with Healthway was explained and reaffirmed.

The induction program for new staff includes an overview and access to all Healthway policies and procedures, including the DAIP.

**Outcome 5: People with disabilities have the same opportunities as other people to make complaints to Healthway.**

Healthway's complaints and compliments processes are clearly outlined and accessible on Healthway's website. Flexible approaches are in place to support people with disabilities to make a complaint or record a compliment.

Our Complaints Handling Policy was reviewed and updated in 2016/17 and a training session was undertaken with staff as a refresher of their responsibilities.

**Outcome 6: People with disabilities have the same opportunities as other people to participate in any public consultation by Healthway**

People with disabilities have equal access to information to participate in public consultation undertaken by Healthway.

Healthway also extends invitations to relevant organisations working with people with disabilities to attend Healthway forums and information sessions. For example, as part of the current strategic planning process, Healthway undertook extensive community consultation that is inclusive of people with disabilities and/or organisations that understand issues that matter to people with disabilities. This included workshops and invitations to provide input through surveys and interviews.

**Outcome 7: People with a disability have the same opportunities as other people to obtain and maintain employment with Healthway.**

Healthway's Workforce and Diversity Plan 2012-2017 incorporates equity and diversity planning.

Healthway encourages and facilitates equal employment opportunities through its recruitment practices and policies.

Workplace and office modifications can be made on request to support people with disabilities to undertake their role and remain productive at work.

**Freedom of Information Statement**

Healthway publishes a freedom of information (FOI) statement that also outlines how to lodge an FOI request on its website located at [healthway.wa.gov.au](http://healthway.wa.gov.au).

For the reporting period of 2016/17, no freedom of information requests were received.



## OTHER DISCLOSURES & Legal Compliance continued

### Recordkeeping Plans

In line with the requirements of section 19 of the *State Records Act 2000* (the Act), Healthway maintains a Recordkeeping Plan (RKP) that describes how to identify and manage its state records.

During 2015/16 as part of an ongoing continuous improvement process, the information management environment was reviewed resulting in minor enhancements being implemented.

The following demonstrates Healthway's compliance with the requirements of the Act and State Records Commission Standard 2, Principle 6:

The efficiency and effectiveness of Healthway's recordkeeping systems have been evaluated or, alternatively, when such an evaluation is proposed.	A continuous improvement process and regular system checks ensure that the information management environment is continuously monitored and assessed. During 2016/17, process improvements were implemented, such as the integration of Healthway's grants database with the records management system.  The RKP will be next reviewed in 2017/18. This will involve a comprehensive re-assessment of the recordkeeping system that will also reflect the new strategic plan.
The nature and extent of the recordkeeping training program conducted by, or for, the organisation.	During the year, staff were provided with a number of in-house refresher records training sessions and were provided with quick reference guides. New staff were inducted in understanding the requirements of the Act and how to use the records system.  A mentoring program remains in place to support staff problem-solve any records issues and fulfil their responsibilities under the Act
The efficiency and effectiveness of the recordkeeping training program have been reviewed or, alternatively, when this is planned to be done.	The staff training program was reviewed in 2016/17 as part of a continuous improvement approach. It was identified that regular, short and specific training was most effective for staff and accordingly, training was provided over an extended period at fortnightly staff meetings.
Assurance that the organisation's induction program addresses employee roles and responsibilities in regard to their compliance with the organisation's recordkeeping plan.	The induction program is comprehensive and addresses recordkeeping responsibilities and compliance with the RKP and directs staff to current policies, procedures and quick reference guides. All new staff are inducted and are invited to provide feedback on the induction program. This feedback is applied to improving the induction program.

### Advertising

In accordance with section 175ZE of the *Electoral Act 1907*, Healthway is required to report its expenditure in relation to advertising, market research, polling, direct mail and media advertising. For the reporting period of 2016/17, Healthway only advertised for the recruitment of vacant positions.

Category of Expenditure	Total	Company
Advertising agencies	Nil	Nil
Media advertising organisations	\$10,313	Adcorp
Market research organisations	Nil	Nil
Polling organisations	Nil	Nil
Direct mail organisations	Nil	Nil

## **Compliance with Public Sector Standards and Ethical Codes**

For the reporting period, Healthway continued to comply with all Public Sector Standards in Human Resource Management and Codes of Ethics and Codes of Conduct.

Following the establishment of the new Board from 1 September 2016, under the *Western Australian Health Promotion Foundation Act 2016*, the Board induction program included a comprehensive introduction to public sector standards and ethical codes. The Board's Code of Conduct had been reviewed and updated, in line with the new Act, and adopted by the new Board.

In 2016/17 all Healthway's governance policies were reviewed and updated, and peer reviewed by the Public Sector Commissioner. Each fortnightly staff meeting, and weekly management/executive meeting, includes a standing item on governance.

During 2016/17 no claims were received for a breach of the Public Sector Standards.

## **GOVERNMENT POLICY REQUIREMENTS**

### **Occupational Safety and Health (OSH) and Injury Management**

Healthway maintained its strong focus on providing a safe and healthy working environment.

Staff are regularly consulted and provided with opportunities to participate in decisions that impact on their safety, health and wellbeing. OSH officers consult with teams formally and informally and OSH forms part of a standing agenda for each staff meeting. OSH officers undertake monthly workplace safety inspections and any identified issues are referred to the executive and managers.

Healthway regularly self-assesses its OSH systems and practices and has an established Injury Management System that describes the measures to be taken when a workplace injury occurs, to enable a rapid response and provide adequate support to staff and injured workers returning to work. During 2016/17 no time was lost from work as a result of work-related illness or injury.

### **Highlights**

During 2016/17 highlights included:

- Expansion of the Wellness Committee to include staff from each of team with regular meetings;
- A number of Health and Wellbeing Program activities to support healthy lifestyles were made available to staff such as tennis tuition, 'lunch and learn' forums, flu vaccinations, fruit basket, eyesight screening and testing subsidy and support for volunteering initiatives;
- Healthway's two trained first aid officers successfully completed a refresher course;
- The continued availability to staff and their families of an Employee Assistance Program;
- Availability of training courses, workshops and awareness sessions on various related topics;
- A general office clean-up to reduce clutter and maintain clear and tidy walkways and storage areas; and
- A trial of a sit/stand desk.

## OTHER DISCLOSURES & Legal Compliance continued

### Measures

Report of annual performance for 2016/17 is provided below.

Measure	Actual results			Results against target
	2014/15	2015/16	2016/17	Target
Number of fatalities	0	0	0	0
Lost time injury and/or disease incidence rate	0	0	0	0
Lost time injury and/or disease severity rate	0	0	0	0
Percentage of injured workers returned to work:	N/A	N/A	N/A	N/A
Percentage of managers trained in occupational safety, health and injury management responsibilities	100	80%	80%	Greater than or equal to 80%

### Substantive Equality

The principles of the State Government's Policy Framework on Substantive Equality continued to be implemented at Healthway and are reflected in its Workforce and Diversity Plan.

### Government Building Training Policy

For the reporting period of 2016/17, no contracts were awarded for a Government building, construction and maintenance.



City of Swan  
HyperFest 2017

## Financial Estimates 2017/18

Treasurer's Instruction 953 requires the annual financial estimates as approved by the Minister for Health for 2017/18 to be provided as follows:

	2017/18 \$	2016/17 \$
<b>COST OF SERVICES</b>		
<b>Expenses</b>		
Employee benefits expense	2,415,000	2,386,000
Supplies and services	1,227,000	1,290,000
Depreciation and amortisation expense	55,000	55,000
Accommodation expenses	520,000	535,000
Grants and sponsorships	19,458,000	20,144,000
Other expenses	107,000	112,000
<b>Total cost of services</b>	<b>23,782,000</b>	<b>24,522,000</b>
<b>Income</b>		
Revenue		
Interest revenue	-	450,000
Other revenue	50,000	50,000
Carryover committed funds	-	1,000,000
<b>Other Funding</b>		
Internal funding	133,000	-
<b>Total Revenue</b>	<b>183,000</b>	<b>1,500,000</b>
<b>Total income other than income from State Government</b>	<b>183,000</b>	<b>1,500,000</b>
<b>NET COST OF SERVICES</b>	<b>23,599,000</b>	<b>23,022,000</b>
<b>INCOME FROM STATE GOVERNMENT</b>		
Service appropriation	23,614,000	23,037,000
Services received free of charge	-	-
<b>Total income from State Government</b>	<b>23,614,000</b>	<b>23,037,000</b>
<b>SURPLUS/(DEFICIT) FOR THE PERIOD</b>	<b>15,000</b>	<b>15,000</b>
<b>TOTAL COMPREHENSIVE INCOME FOR THE PERIOD</b>	<b>15,000</b>	<b>15,000</b>

# FUNDING TABLES



# FUNDING Tables

## HEALTH PROMOTION GRANTS FUNDED IN 2016/17

Health Issue/Organisation	Project Title	Amount \$
<b>REDUCING HARM FROM TOBACCO</b>		
Australian Council on Smoking and Health	Tobacco Free WA by 2025	256,771
Cancer Council Western Australia	Make Smoking History Campaign 2016-2019	966,772
Puntukurnu Aboriginal Medical Service	You CAN quit	10,000

<b>REDUCING HARM FROM ALCOHOL AND DRUGS</b>		
Aboriginal Alcohol and Drug Service	Seasons to Grow	4,459
Mental Health Commission	Parents, Young People & Alcohol Campaign	678,177
Mental Health Commission	WA Safer Events for Young People	260,000
Mental Health Commission	Development and evaluation of online self-help tools for the Drug Aware website	80,000

<b>PREVENTING OVERWEIGHT AND OBESITY</b>		
Boypup Brook Community Resource Centre	HEAL Program	3,701
Cancer Council Western Australia	Crunch&Sip School Vegetable Project	191,248
Cancer Council Western Australia	The Palya Mayi Project	10,000
Curtin University	The Primary Prevention HealthPathways Lifestyle Project	59,266
Edith Cowan University Joondalup	Supporting Nutrition in Australian Childcare for Outside of School Hours Care	5,000
Foodbank WA	Superhero Foods in Aboriginal communities	112,137
National Heart Foundation of Aust (WA Division)	Healthy Built Food Environments: Planning for Improved Accessibility and Availability	88,500
North Metropolitan Health Service	Community Garden Project	5,000
Northam Local Drug Action Group	Holidays are no Excuse for Drugs Campaign	3,077
Tambellup Primary School	Health Promoting Schools Grant	2,500
University of WA	Gary Goanna and the Fairy Croc Father	62,887
University of WA	Uni-Active: Developing Healthy Kids	325,101
WA Country Health Service - Midwest - Geraldton	Carnarvon Children's Healthy Nutrition Project	25,107
WA Country Health Service - Wheatbelt - Northam	Australia's Healthy Weight Week - LiveLighterWheatbelt	3,500

<b>PROMOTING MENTAL HEALTH AND WELLBEING</b>		
Armadale Senior High School	R U OK Mental Health Expo	1,571
Busselton Senior High School	Health Promoting Schools Grant	2,360
Curtin University	Creating a Mentally Healthy WA: The Act-Belong-Commit Campaign Phase V 2017-2019	1,189,762
Palmerston Association	Identity Matters: Navigating self-care and relationships	5,000

## FUNDING Tables continued

Health Issue/Organisation	Project Title	Amount \$
<b>SKIN CANCER PREVENTION</b>		
Cancer Council Western Australia	SunSmart Campaign 2015-2017	223,845

<b>OTHER</b>		
Curtin University	Building health promotion capacity across regional and metropolitan WA	385,162
Curtin University	Capacity Building Scheme - 15th World Congress on Public Health	2,000
Curtin University	Promoting Public Health Advocacy through the Knowledge Transfer Program	473,343
Murdoch University	Science on the Swan Conference 2017	18,182
National Heart Foundation of Aust (WA Division)	Health & Medicine 2015-2017	216,170
Kidsafe Western Australia	The Safety in Schools Facilitators Guide	38,240
Western Australian AIDS Council	Personal Perspectives - Living with HIV Today	15,600

## HEALTH PROMOTION RESEARCH GRANTS FUNDED IN 2016/17

Health Issue/Organisation	Project Title	Amount \$
<b>REDUCING HARM FROM TOBACCO</b>		
Curtin University	Health Promotion Research Fellowship - Dr Julia Butt	59,732
Curtin University	Developing effective smoking cessation programs for the disadvantaged	36,931

<b>REDUCING HARM FROM ALCOHOL AND DRUGS</b>		
Australian Catholic University	Sips and Tastes: Increasing parental awareness of the effects of early alcohol initiation	108,575
Curtin University	Fighting, alcohol and offending: interventions targeting Aboriginal girls	119,817
Curtin University	Developing health promotion messages to encourage responsible drinking practices	104,745
University of WA	Health Promotion Research Training Scholarship - Renee Teal	38,372

<b>PREVENTING OVERWEIGHT AND OBESITY</b>		
Curtin University	Computer-tailoring to change overweight adults' diet and physical activity	149,894
Curtin University	Priority Driven Research Round - Aussie Fans in Training: A weight loss program in sports settings	245,953
Curtin University	Obesity Prevention Messages and Young People	26,490
Curtin University	Promoting walking, less sitting and better mental health in older adults	114,607
Curtin University	Smart Start: a program for healthy mobile technology use by young children	30,124

Health Issue/Organisation	Project Title	Amount \$
<b>PREVENTING OVERWEIGHT AND OBESITY</b>		
Curtin University	Health Promotion Research Training Scholarship - Claire Pulker	38,372
Edith Cowan University Joondalup	Health Promotion Research Training Scholarship - Margaret Miller	38,122
Edith Cowan University Joondalup	Transformational games: A way to engage adolescents in nutrition education	29,726
University of WA	Promoting healthy lifestyle behaviours in obese women postpartum	115,028
University of WA	Supportive childcare environments for physical activity in the early years	119,791
University of WA	Childcare centre interventions to increase children's physical activity	42,823

<b>PROMOTING MENTAL HEALTH AND WELLBEING</b>		
Curtin University	Building Bridges Project: Co-designing engagement with Aboriginal Youth	131,548
University of WA	Enhancing the mental health and wellbeing of children with impaired hearing	120,000

<b>OTHER</b>		
Curtin University	Priority Driven Research Round - A review of Healthway's Sponsorship Model	72,878

## SPONSORSHIP PROJECTS FUNDED IN 2016/17

Health Issue/Organisation	Project Title	Amount \$
<b>REDUCING HARM FROM TOBACCO</b>		
Albany Agricultural Society	Agricultural Show 2016	25,000
Albany City Kart Club	Western Australian Karting Championship 2017	7,500
Albany Soapbox Club	National Soapbox Championships 2017	2,000
Albany Speedway Club	Junior Development Program	4,000
ARLC WA LIMITED	NRL WA Annual Sponsorship	110,000
ART ON THE MOVE	Artists on the Move Program 2016-2017	38,000
Augusta Margaret River Hot Rod Club	Augusta Margaret River Speedway	5,000
Australian Arab Association	Multicultural Carnival and Festivals 2016-2017	65,000
Boab Festival at Derby	Moonrise Rock Festival and Mardi Gras 2017	22,500
Broome Junior/Senior Motocross Club	Broome Motocross 2 day Championships	2,000
Broome Senior High School	Kimberley Cup Sporting Carnival	4,000
Byford BMX Club	Super Series & Community Market	2,000
Canning Agricultural Horticultural and Recreational Society	Canning Show 2016	15,000
City of Bunbury	Christmas in the City 2016	10,000
City of Joondalup	Music in the Park Program 2017	10,000

## FUNDING Tables continued

Health Issue/Organisation	Project Title	Amount \$
<b>REDUCING HARM FROM TOBACCO</b>		
Cockburn Cougars Softball & Sporting Club	Growing our Club to support TeeBall and Junior Sport	1,000
Collie Racing Drivers Association	Collie Speedway and Junior Sedans	15,000
Dutch Australia Foundation	Descendants of the VOC 2016-2017	20,000
East Pilbara BMX Club	Super Series Northwest BMX Round	3,000
Esperance & Districts Agricultural Society	Esperance and Districts Agricultural Show 2016	15,000
Festival of Busselton	Festival of Busselton 2017	10,000
Football West Limited	Play Football!	275,000
Formula Vee Association of WA	Formula Vee Racing	3,000
Garnduwa Amboorny Wirnan Aboriginal Corporation	Active Communities Project 2016 - 2018	440,000
Golf Western Australia	The Game for Life - Junior Golf 2017	85,000
Hills BMX Club	BMX Sports Western Australia Super Series Round 7- 2017	2,000
Improved Production Racing Association of WA	Improved Production State Racing Championship 2017	5,000
Ironstone Adventure Riding Club	Capel 200 Dirt Bike Rally 2017	2,000
Kalamunda and Districts Agricultural Society	119th Kalamunda Annual Show 2017	14,000
Kellerberrin and Districts Agricultural Society	Kellerberrin and Districts Agricultural Show 2016	3,500
Krikke Boys Pty Ltd	Bunbury Speedway 2017-2019	40,000
Kununurra Agricultural Society	Kununurra Agricultural Show 2016-2017	12,000
Kununurra Motocross Club	Diamond Dash	3,000
Lacrosse WA	Annual Program 2017	70,000
Lightweight Motor Cycle Club	Arena Cross Series 2017	10,000
Malayalee Association of Western Australia	Volleyball Tournament	1,000
Motorcycling Western Australia	Girls Day Out	1,000
Motorcycling Western Australia	Minikhana, Motosafe and FairGo	27,000
Mowanjum Artists Spirit of the Wandjina Aboriginal Corporation	Mowanjum Festival 2017	22,500
Murray Auto Xtravaganza	MAX Pinjarra 2017	12,000
Netball WA	Major Sponsorship	300,000
Ngurra Kujungka	Ngurra Kujungka: Western Desert League	60,000
North Yunderup Community Association	Kingfisher Park Community Celebration 2017	1,500
Punjabi Cultural And Sports Club (WA)	PCSC League	1,000
Rockingham Districts BMX Club	Rockingham BMX Super Series 2016	2,000
Shinju Matsuri	Shinju Matsuri Festival 2017	40,000
Shire of East Pilbara	Outback Fusion Festival 2016	4,500
Shire of Meekatharra	Meeka Outback Festival 2016	5,000
Softball Western Australia	Junior Participation and Development Program 2016-2017	28,000
Southside BMX Club	Super Series Round 8	2,000
Speedway Motorcycle Club WA	Pinjar Park Motorcycle Speedway 2016-2017	15,000

Health Issue/Organisation	Project Title	Amount \$
<b>REDUCING HARM FROM TOBACCO</b>		
Squash Rackets Assoc of WA (T/A WA Squash)	Club Development Programs	35,000
Table Tennis Western Australian	Coaching and Development Program 2017	16,000
Targa West Pty Ltd	Targa West Event Series	90,000
Te Haupai Maori and Pacific Island Trust Assoc.	Perth Waitangi Day 2017	10,000
The Wagin Agricultural Society	Wagin Woolorama 2017-2018	25,000
Tom Price Motorcycle Club	Club Championships	2,000
Valley View Events	Valley View Air Display 2017	5,000
Vietnamese Community In Australia WA Chapter	Tet New Year 2017	10,000
Vintage Motocross Club of WA	Dandaloo classic and Mill Farm Scramble-Dan Ferguson Memorial	2,500
WA Basketball Federation (Basketball WA)	Development Program	295,500
Wanneroo Junior Motocross Club	Annual WJMC/Chidlow Interclub Series 2017	2,000
West Australian Car Club	Forest Rally and Australian Rally Championship	65,000
West Australian Car Club	RallyWA 2017	4,500
West Australian Saloon Car Association	Saloon Car WA State Championship 2017	5,000
Western Australian Hockey Association (T/A Hockey WA)	Hockey For Life	200,000
Williams Gateway Expo Inc	Expo (Community Fair) 2017	5,000
Wongan Hills Progress Association	Wongan Hills Harvest Festival 2016	2,000

<b>REDUCING HARM FROM ALCOHOL AND DRUGS</b>		
ABMUSIC Aboriginal Corporation	Abmusic Connect Program 2017	5,000
Albany Youth Support Association	Open Access Youth Arts Studio Program 2017-2018	42,000
Australian Baseball League Pty Ltd - Perth Heat	Perth Heat - Australian Baseball League	93,500
Baseball WA Limited	Development Programs 2016-2017	80,000
City of Bunbury	The SHIFT Festival 2017	15,000
City of Cockburn	Super Summer Skaters	8,000
City of Mandurah	Gnoonie Youth Football Cup 2016 - 2017	3,000
City of Swan	HyperFest and Hyper Miniseries 2017-2018	40,000
Country Arts WA	YCulture Regional 2016-2017	70,000
Denmark Senior High School	BATS Workshops 2017	3,000
Netball WA	Principal Partner of West Coast Fever	275,000
Propel Youth Arts WA	YCulture Metro 2017	55,000
Shinju Matsuri	Shinju Matsuri Festival 2016	35,000
Shire of Dandaragan	Spray the Grey Youth Festival 2017	3,000
Surfing Western Australia	Margaret River Pro 2016 and 2017	380,000
West Australian Music Industry Association (WAM)	WAM Festival 2017	50,000
Western Australian Cricket Association	Platinum Partnership	750,000



## FUNDING Tables continued

Health Issue/Organisation	Project Title	Amount \$
<b>REDUCING HARM FROM ALCOHOL AND DRUGS</b>		
Western Australian Rugby Union	Major Partner of RugbyWA and the Western Force	333,000
Western Australian Volleyball Association	Annual Sponsorship 2015-2016	120,000
Western Australian Volleyball Association	Bringing the Australian Volleyball League to Albany	5,000
Wildcats 2000 Pty Ltd	Perth Wildcats 2015-2016	540,000
YMCA of Perth Youth & Community Services	YMCA Youth Arts Hub 2016-2017	65,000
Youth Focus (Headspace Albany)	Kinjarling Cup	4,500

<b>PREVENTING OVERWEIGHT AND OBESITY</b>		
ABC Foundation Limited	Ranger 4 Life Programme 2017	5,000
Augusta River Festival	Augusta River Festival 2017-2018	12,000
Awesome Arts Australia Ltd	Creative Challenge Program 2017	80,000
Badminton Association of WA	Play Badminton to Stay Healthy and Active	25,000
Beverley Community Resource Centre	Beverley Triathlon 2017	2,500
Bruce Rock Community Resource Centre	Community Colour Run	3,750
Bunbury Agricultural Society	Bunbury Show-Horse & Country Music Event 2017	20,000
Bunbury Multicultural Group	South West Multicultural Festival 2017	14,000
Calisthenics Association of WA	Calisthenics Development Program	20,000
Canoeing Western Australia	Go Paddling 2015-2017	40,000
Children's Book Council of Australia (WA Branch)	Children's Book Week 2017	24,500
City of Busselton	Busselton Fringe Festival 2017-2019	10,000
City of Cockburn	Cockburn Cultural Fair 2017	8,000
City of Kwinana	Kwinana Festival Fair Day 2016	5,000
City of Mandurah	Mandurah Crab Fest 2017-2018	120,000
City of Wanneroo	Global Beats & Eats 2017	14,000
Coolbinia Bombers Junior Football Club	Coolbinia Starkick - All Abilities Football Program 2017	3,000
Country Music Club of Boyup Brook WA	Boyup Brook Country Music Festival 2017	35,000
Curling WA	Learn to Curl Program	2,000
Daawah Association of Western Australia	Wamef Family Fun Day 2017	2,500
Daawah Association of Western Australia	Wamef Family Fun Day 2016	2,500
Dancesport Australia Ltd WA Branch	WA Open Dancesport Spectacular 2017	4,000
Donnybrook Apple Festival	Donnybrook Apple Festival 2017	10,000
Dryandra Pony Club	Dryandra Tetrathlon 2017	3,000
Dynamic Flame Badminton Club	School and Community Clinics 2017	1,500
Edmund Rice Centre, Mirrabooka	Youth Engagement Programs	40,000
Exmouth Community Markets	Exmouth Community Markets 2017	4,000
Fair Game Australia Limited	Fair Game Midwest Project	20,000
Gingin District Community Resource Centre	Gingin British Car Day 2017	4,500
Gymnastics Western Australia	Gymnastics: Start Here - Go Anywhere	130,000

Health Issue/Organisation	Project Title	Amount \$
<b>PREVENTING OVERWEIGHT AND OBESITY</b>		
Harvey Mainstreet	Harvey Harvest Festival 2017	15,000
Kununurra Dragon Boat Club	Ord River Marathon 2017	2,000
Manjimup Cherry Harmony Festival	Manjimup Cherry Harmony Festival 2016	12,000
Masters Swimming Western Australia	Swim for Your Life and Swim in to Spring	28,000
Meerilinga Young Children's Foundation	Children and Family Centre Program 2016-2017	37,000
Meerilinga Young Children's Foundation	WA Children's Week 2016	40,000
Monkey Baa Theatre for Young People Ltd	Diary of a Wombat WA Tour 2017	2,500
Mullewa District Agricultural Society	Mullewa Gift 2017	4,000
Okewood Pty Limited	Glory in the Community Program / Women's Glory 2016-2018	170,000
Orienteering Association of Western Australia	WA Schools Orienteering Championships 2017	4,000
Polocrosse Association of WA	State Championships 2016	3,000
Pony Club Association of Western Australia	Annual Program of Events 2015-2017	40,000
Quairading Agricultural Society	Quairading Show 2017	4,000
Rotary Club of Willetton	Willetton Rotary Community Fair 2017	12,000
Royal Life Saving Society Australia WA Branch	Regional & Remote Aboriginal Communities Program 2015-2017	65,000
Saraswati Mahavidyalaya Institute	Swan Festival of Lights 2016	25,000
Serpentine Jarrahdale Community Resource Centre	SJ Community Fair 2017	15,000
Serpentine Jarrahdale Community Resource Centre	SJ Community Fair 2016	10,000
Shire of Katanning	Katanning Harmony Festival 2017	5,000
Shire of Murray	Pinjarra Festival 2017	15,000
Shire of Nannup	Nannup Family Fun Day 2017	3,000
Shire of Wyalkatchem	Wyalkatchem Fair 2017	2,000
So Change	Perth Basant Festival 2016-2017	50,000
Spare Parts Puppet Theatre	Regional Schools Touring Program 2017	75,000
Swan View and Districts Agricultural and Arts Society	Swan View Show 2017	5,000
The Australian Miniature Horse Society of WA	State Championship Show 2016	1,000
The Dardanup Bull and Barrel Festival	Dardanup Bull & Barrel Festival 2016	9,600
The Literature Centre	Primary School Literature Program 2017	55,000
The Western Australian Diving Association	Unearthing Future Champions - Diving WA Schools Program	5,000
Touch Football Australia	Annual Sponsorship	80,000
Town of Port Hedland	Have a Try Roadshow - Winter Sports	3,000
Vietnamese Soccer Club of WA	V League 2017	2,000
WA Basketball Federation (Basketball WA)	Perth Wheelcats and Western Stars	50,000
WA French Festival	Bonjour Perth Festival 2016-2017	30,000
Wagin Riding and Pony Club	Wagin Gymkhanarama 2016	2,000

## FUNDING Tables continued

Health Issue/Organisation	Project Title	Amount \$
<b>PREVENTING OVERWEIGHT AND OBESITY</b>		
Warren Arts Council	Manjimup Bluegrass and Old Time Music Weekend 2016	14,000
Western Australian Athletics Commission	Gallipoli Run Albany	4,000
Western Australian Athletics Commission	Annual Sponsorship	80,000
York Agricultural Society	York Agricultural Show 2016	2,000

<b>PROMOTING MENTAL HEALTH AND WELLBEING</b>		
Albany Mountain Bike Club	The Southern Mountain Bike (MTB) Festival 2016 & 2017	14,500
Albany Sinfonia	Beethoven the full four quarters 2017	4,000
Art Gallery of Western Australia	AGWA Exhibition Program 2017	85,000
Atlantis Productions	Heritage & The Sea 2016	2,400
Australian Dance Council WA Branch (Ausdance)	The Dance 100 Program 2017	50,000
Ballet Workshop	Prompt Corner and Perth City Ballet Program 2017	42,000
Barking Gecko Theatre Company	BGTC Community Program 2017	80,000
Bluegem Holdings Pty Ltd	Dwellingup 100 Mountain Bike Classic 2017-2018	24,000
Boddington Community Resource Centre	Healthy Active Arts 2017	27,000
Bridgetown Greenbushes Business and Tourism Association	Bridgetown Wonderful Winter Wonderland 2016	9,000
Bridgetown Primary School P & C Association	Dancing To The Beat Of Our Town 2016	2,500
Broome Men's Shed	Broome Dad's Event 2016	2,000
Bunbury Regional Theatre	Bunbury Summer Film Festival 2017	4,000
Canning Vale College	CVC Circus Troupe 2017	5,000
Catch Music	Community Program 2017-2018	41,800
Child and Adolescent Community Health	Kiya Wandjoo Wandjoo Nidja Aboriginal Participatory Art Project 2016	2,000
City of Albany	Community Art Events Program 2016-2018	95,000
City of Canning	City of Canning Season of Events 2017	50,000
City of Cockburn	This Is Me Photography Workshop and Exhibition 2017	5,000
City of Gosnells	Community Arts Events Season 2017	50,000
City of Karratha	Red Earth Arts Festival Junior 2016	10,000
City of Mandurah	Stretch Arts Festival & Wearable Art Mandurah 2017	50,000
City of Rockingham	School Banner Competition, Festival of New Talent and PhotoVoice 2017	22,000
Club Rock	The Come Out Swinging Albany Project 2016	3,000
Community Dance Events	The Sandpit 2017	5,000
Contemporary Dance Company of Western Australia Ltd (Co:3)	Co3 Youth, Education and Engagement Programs 2017	80,000
Country Arts WA	Shows on the Go and Sand Tracks Programs 2017	110,000
Curtin University	Karratha and Onslow PhotoVoice Project 2017	18,100
Curtin University	Schools PhotoVoice Competition 2017	8,300
DADAA Limited	DADAA Program 2017	50,000

Health Issue/Organisation	Project Title	Amount \$
<b>PROMOTING MENTAL HEALTH AND WELLBEING</b>		
Denmark Arts Council	Annual Program 2017-2018	35,200
Disco Cantito Association	CirQuest Show and Have a Go! 2017	2,500
Dunsborough and Districts Progress Association	The South West Harmony Festival 2017	4,000
Ellenbrook Cultural Foundation	Ellenbrook Arts Community Program 2017	27,000
Enable Southwest	Rotary Sail into Life Bunbury	7,500
Esperance Community Arts	Pathways to the Arts 2017-2018	37,000
Festival of the Wind	Festival of the Wind 2017	15,000
FolkWorld	Fairbridge Quest 2016-2017	12,000
Friends of the Porongurup Range	Art in the Park 2017	3,500
Furqan Islamic Association	Perth Eid Festival 2017	5,000
Gnowangerup Bowling Club	Gnowangerup Bowls Classic Events 2016	1,500
Holyoake Australian Institute for Alcohol and Drug Addiction Resolutions	Deadly Music Family Night 2016	2,500
International Art Space Pty Ltd	Spaced 3: Education and Community Access Program 2017-2018	15,000
Kojonup Pastoral and Agricultural Society	Kojonup Agricultural Show 2016	4,000
Koorda and Districts Agricultural Society	Koorda Agricultural Society's Community Show 2016	3,500
Lathlain Primary School Parents and Citizens' Association	Lathlain 60th Anniversary Grand Fete 2016	3,000
Lions Club of Katanning	Concert in the Park 2017	4,000
Lions Club of Rockingham	Rockingham Community Fair 2016	5,000
Malayalee Association of Western Australia	MAWA Australian Dreams 2017	5,000
Mandurah Performing Arts	MPAC Get in the Swim Public Program 2017	90,000
Mens Resource Centre	Up The Creek With A Paddle	2,000
Mosman Park Arts Foundation	Street Art Youth Project 2017	10,000
Musica Viva Australia	Musica Viva In Schools Programs 2017	80,000
North Midlands Project	Community Strengthening Program 2017	35,000
Northam's Avon Descent Association	Avon Support Unit	25,000
One Big Voice Festival	One Big Voice Festival 2016-2017	20,000
OptionB Ningaloo Pty Ltd	Ningalens Festival 2017	4,500
Organisation of African Community of Western Australia	Jambo Africa 2017	5,000
Permaculture Association of WA	Permaculture Festival 2016	5,000
Perth Triathlon Club	Parathlete Triathlon Training Course	2,500
Quairading Golf Club	Celebrating 50 Years of Junior Golf in Quairading 2017	1,000
Quinninup Community Association	Quinninup Annual Market Day 2017	4,000
Rapid Ascent Pty Ltd	Augusta Adventure Race Festival	90,000
Riding for the Disabled Association WA	Annual Program 2015-2017	40,000
Sailability WA	Sailability Supported Sailing Programs	30,000
Sculpture by the Sea	Sculpture by the Sea 2017	75,000
Secret Harbour Residents Association	Secret Harbour Spring Market Fair 2016	5,000
Shire of Capel	Captivate Capel 2017	5,000

## FUNDING Tables continued

Health Issue/Organisation	Project Title	Amount \$
<b>PROMOTING MENTAL HEALTH AND WELLBEING</b>		
Shire of Cranbrook	Cranbrook Show 2017	3,000
Shire of East Pilbara	Community Sporting Events in the East Pilbara 2017	15,000
Shire of Katanning	Bloom Festival 2016	5,000
Shire of Kondinin	Skateboard and Scooter Coaching Workshop	1,000
Shire of Mingenew	Mingenew Community Day 2016	3,000
Silver Threads Band	Making Music is Fun Program 2017	24,000
So Change	Multicultural Music Festival 2017	5,000
Southern Edge Arts	Youth Performing Arts 2017	65,000
Southern Forest Arts	Southern Forest Arts Festival 2016	3,500
Spirit of the Streets Choir	Pass the Song Along 2017	4,950
Stirling Street Arts Centre	Stirling Street Arts Centre Program 2017	12,900
Tambellup Agricultural Society	Tambellup Community Show 2016	4,000
The Makers Community Development	YOH Fest 2015-2017	115,000
Theatre Kimberley	Theatre Kimberley Youth Program 2017	40,000
Toodyay Festivals	Toodyay Moondyne Festival 2017	10,000
Tura New Music Ltd	Regional Program 2016-2018	90,000
Undalup Association	The Undalup Birak Festival 2017	25,000
Undalup Association	Undalup Makuru NAIDOC Festival 2017	5,000
Variety WA	Carols by Candlelight for Variety 2016	10,000
WA Bush Poets & Yarnspinners Association	Toodyay Bush Poetry Festival 2017	2,000
WA Circus School	Circus WA Programs 2016-2017	40,000
WA Disabled Sports Association	Annual Sponsorship 2015-2016	235,000
WA Youth Jazz Orchestra Association	WA Youth Jazz Orchestra Education Program 2017	25,000
WA Youth Theatre Company	Training Program and Major Production 2017	25,000
West Australian Aboriginal Dance Company	Good Little Soldier 2017	20,000
West Australian Ballet	West Australian Ballet Access Program 2017	70,000
West Australian Symphony Orchestra	WASO Community Outreach Program 2017	70,000
Western Australia Multicultural Association	Multicultural Youth Talent Quest 2017	2,000
Western Australian Schools Choral Festival Assoc	Children Sing Festival 2017	4,000
Woodridge Community Association	Woodridge Spring Fair 2016	2,000
Yongergnow	Celebrating Yongergnow 10 Years On 2017	2,000
York Friendship Club	York Medieval Fayre 2016	3,000
York Society (The)	Art & Craft Awards and Photographic Awards 2016	3,000
Zig Zag Community Arts	Zig Zag Community Arts Festival 2016	11,000

<b>SKIN CANCER PREVENTION</b>		
Ardath Tennis Club	Colin Smith Memorial Day - Opening Day 2016	500
Bluegem Holdings Pty Ltd	Triathlon Series 2015-2018	60,000
Bluegem Holdings Pty Ltd	Women's Triathlon	22,000
Busselton Allsports	Busselton Jetty Swim	32,000



Health Issue/Organisation	Project Title	Amount \$
<b>SKIN CANCER PREVENTION</b>		
Busselton Jetty Environment and Conservation Association	Festival of Paddle 2017	2,000
Busselton Runners Club	Busselton Half Marathon & Fun Run 2017	3,000
Denmark Surf Life Saving Club	Southern Ocean Classic Mile Swim	3,000
Green Skills	Albany Kite Fiesta 2017	4,100
Kalgoorlie Amateur Swimming and Life Saving Club	WA Country Pennants Swimming Championships	9,000
Narrogin Primary School Parents and Citizens Association	Narrogin Triathlon	3,000
Recfishwest	Fishing Clinics Program 2016-2018	100,000
Rowing Association of WA (T/A Rowing WA)	Open Day 2016	4,000
Rowing Association of WA (T/A Rowing WA)	Annual Sponsorship	30,000
Stadium Triathlon Club	Karri Valley Triathlon	4,000
Surf Life Saving Western Australia	Surf Sports Season 2015-2016	130,000
Surfing Western Australia	Annual Sponsorship	143,500
Synchro WA	Get in Sync	20,000
Tennis West	Play Tennis Project	150,000
Water Polo WA	Flippa Ball Program, Junior Competition and Referee Program	40,000
Western Australian Swimming Association (Swimming WA)	Swimming WA Programs 2016-2017	65,000
Western Australian Triathlon Association	Busselton Festival of Triathlon & Clubs and Regional Program 2016-2018	239,000
<b>OTHER</b>		
Murray Districts Aboriginal Association	Mungah Festival 2017	4,500
Yirra Yaakin Aboriginal Corporation	Education & Community Engagement Program 2017	75,000

# HEALTHWAY

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