
ANNUAL REPORT 2020 - 2021

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OUR VISION

**Leading integrated health and
wellbeing solutions**

Reinvesting into the community

OUR VALUES

To do no harm

To continuously improve

OUR BOARD



Prof Nigel Stocks, Ms Sorana Dinmore, Ms Kate Ireland, Dr Mark Crawford.

Dr Claire Riebeling, Prof Keith Evans, Dr Michal Wozniak

BOARD MEMBERS



PROF KEITH EVANS
CHAIR

Held senior strategic and operational executive leadership positions in Aust and New Zealand over the last 30 years.



DR MARK CRAWFORD
GP BOARD MEMBER

Opened a General Practice in 1990. Served on the Boards of Stirling Hospital and Piccadilly Community Hall.



SORANA DINMORE
NON-GP BOARD MEMBER

Over 20 years' experience in the public and private sector, particularly interested in organisational change, governance, legal and technological advances to shape innovation.



KATE IRELAND
NON-GP BOARD MEMBER

Extensive governance experience in the health, community, disability, housing and aged care sectors.



DR CLAIRE RIEBELING
GP BOARD MEMBER

Completed GP training in the Hills and continues to work locally.



PROF NIGEL STOCKS
GP BOARD MEMBER

Head of General Practice at the University of Adelaide. Experience as Chair or Board Member of several health related organisations and committees. GP in Aldgate since 2001.



DR MICHAL WOZNIAK
GP BOARD MEMBER

Over 20 years' GP experience. Served on Boards of Simulation Australasia, General Practice SA and Sturt Fleurieu General Practice Education and Training.

BOARD MEMBERS

BOARD MEETINGS - JULY 2020 TO JUNE 2021

11 MEETINGS AND AN ANNUAL GENERAL MEETING HELD

BOARD MEMBER	POSITION	MEETINGS ATTENDED	QUALIFICATIONS
PROF KEITH EVANS	Chair	11	BA (Psychology), Adv Dip Psychotherapeutic Tech, Reg Psychiatric Nurse (RMN), Reg General Nurse (SRAN), Graduate - NZ College of Management
DR MARK CRAWFORD	GP Board Member	11	MBBS, FRACGP, DRACOG
MS SORANA DINMORE	Non-GP Board Member	10	BIntlStudies LLB, GDLP, GAICD, MBA Fin
DR SHEREE HUNT	GP Board Member (Retired at AGM)	4	BAppSC (Physiotherapy), Grad Dip Adv Manip Therapy, M App Sc (Physiotherapy), M Bioethics, BMBS (Flinders), FRACGP
MS KATE IRELAND	Non-GP Board Member	11	BEc, Dip MP, GAICD
DR CLAIRE RIEBELING	GP Board Member	10	BMBS, FRACGP
DR MICHAEL WOZNAK	GP Board Member	8	MBBS, FRACGP
PROF NIGEL STOCKS	GP Board Member	11	MD, BSc, MBBS, DipPH, FAFPHM

FINANCIAL SUB COMMITTEE	GOVERNANCE AND PLANNING SUB COMMITTEE	SUPER CLINIC TRUST
MS KATE IRELAND CHAIR	MS SORANA DINMORE CHAIR	MS KATE IRELAND CHAIR
MS SORANA DINMORE	DR MICHAEL WOZNAK	MS SORANA DINMORE
DR MARK CRAWFORD	DR SHEREE HUNT	DR MARK CRAWFORD
MS PENNY HEINRICH	MS KATE IRELAND	MS PENNY HEINRICH
MR KEVIN WISDOM-HILL	MR KEVIN WISDOM-HILL	MR KEVIN WISDOM-HILL

CHAIR REPORT



PROF KEITH EVANS

FORWARD STEPS

2020/21 has seen a continuation of the steady growth experienced in the previous year and resulting in strong financial performance. This is particularly pleasing given the obvious challenges that have beset our region and the nation over the past 12 months.

The Summit Health Centre has continued to provide an outstanding service in attracting new providers to the Hills to the extent that we are now looking at creating a second Centre to manage demand (see the CEO's report for more information).

We officially had our 25th anniversary last November however it was disappointing that the COVID-19 environment meant we were unable to celebrate it collectively in style; our staff have worked hard to make Summit Health what it is today and the opportunity to celebrate that achievement would have been a welcome distraction and an overdue bit of recognition of all that has been achieved.

We appreciate the support of the membership in enabling the changes to our Constitution at last year's AGM – it is important that we ensure our structure and rules of operation reflect current thinking and best practice and we are confident that we are positioned well for the future.

It is disappointing that COVID-19 prevented us from getting to meet more of the membership over the year; we value your input and knowledge about our community. As ever, the Board members

and I – along with the management team – are always willing to meet and discuss ideas and issues with you.

I would like to particularly acknowledge the support and commitment of our Board to me in my role. Thanks must also go to CEO, Kevin Wisdom-Hill, and the management team for their leadership over the year, and to all the staff for their commitment and flexibility in ensuring Summit Health continues to support our community.

As we look forward, we continue our commitment to:



- supporting accessible services for the community,
- stronger financial resilience across the organisation, and
- stronger reinvestment into general practice.

CEO & MEDICAL DIRECTOR REPORT

KEVIN WISDOM-HILL



DR EMMA MANIFOLD



OVERVIEW

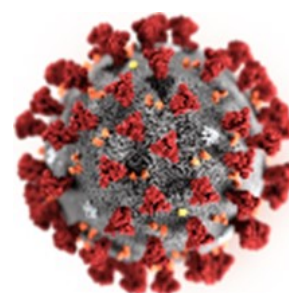
We have come out of the year in a strong position – we have seen growth in all our key activities and even been able to maintain a level of member engagement despite the COVID-19 challenges. Our key achievements over the 12 months include:

- Summit Health (quietly) celebrated its 25th birthday (a big party had been planned but didn't happen for obvious reasons).
- Ongoing contribution in support of the mental health after-effects of the 2020 bush-fires via dedicated services at Lobethal and Parndana.
- Grown our counselling services by 16.5% to 7,430 and commenced planning for a further expansion of our counselling services (see page 24)
- Surviving COVID-19 with relatively low impact.
- Summit Health Centre has effectively reached capacity and continues to attract new services to the region in support of our community.
- For the past 9 months we have undertaken significant development work towards planning of the construction of an innovative new health centre in the region to further support the health and wellbeing needs of our community and build on the success of the Summit Health Centre (more on that below!)

- Emma and I were able to visit some practices this year. We had constructive conversations around the services we are delivering and the challenges in getting rural GP workforce!
- CPD events were continued within the COVID-19 constraints and we look forward to continuing them next year (see page 20).

COVID-19

The constantly changing COVID-19 demands on general practice in relation to supporting the community has been challenging, distracting and draining. The never-ending media coverage and regulation changes has kept COVID-19 front and centre in many people's minds and, yes, it has been a catalyst for some important innovation e.g. general practice telehealth consults and demonstrating that society can better manage the flu season for those most vulnerable. On the downside, there is greater workforce burn-out, increased mental health fatigue and the ongoing frustration of vaccine denialists; it's pretty clear society needs an agreed pathway that moves the pandemic out of the headlines and into the mainstream of the health care system so we can all move on.



HIGHLIGHTS OF THE YEAR

The **Summit Health Centre** continues to provide a purpose designed facility for specialist and allied health services to locate and grow their businesses, providing unique flexibility and an extensive support network. It is effectively full now and so plans have commenced plans for the construction of a second Centre in the new Aston Hills development. The Centre will be a bit smaller than our current facility but enable more services to expand into the Hills. We are looking to undertake this development in partnership with Community Bridging Services Inc. and to incorporate significant capacity to support people with a disability in accessing quality primary care services. If all goes well we hope it will open in late 2022 or early 2023. We will keep the membership informed as things progress.

Health Provider Registry has had a significant boost to its capacity and future relevance with a 5 year funding commitment from SA Health that will see improved functionality and relevance across the SA health system. (see page 38)

GPcare and EDcare continued to see more patients with both services remaining open throughout the pandemic period. We are grateful to the doctors and staff that have had to work under challenging conditions and timelines to make this happen.

Country SA PHN has continued its support to service development in the region with a range of opportunistic additional grants enabling us to:

- offer more flexible counselling services
- undertake improved cultural awareness and engagement
- work to extend our video-consult trial for aged care across most of country South Australia's RACFs

The **Financial Year** ended strongly for us with a significant boost to our cash reserves. More details on our financial performance can be found in the Finance Committee's Report on page 14.

CHALLENGES

A major task for the Summit Health Board and management team is working to ensure that we continue to advocate for general practice as the gate-keeper to the health system. That hasn't been easy with all eyes on COVID-19 and an expectation (at least Federally) that general practice will continue to flex (as it is continually asked to do) to meet the latest guidelines.

The merger between ModMed and GPEx finally took place after a lot of dialogue and clarification. We were actively involved in the process that surrounded this somewhat challenging situation. Summit Health voted against the final merger – not because we were against the principle of the merger but because we felt there was a better way to achieve the outcome. We continue to be a member of the new entity and look forward to working with it to secure a strong workforce for our community and in anticipation of the takeover by RACGP / ACRRM of the GP training program next year.

The excellent results outlined in this report would not be possible without the hard work and commitment of our highly valued staff and contractors, together with ongoing patronage from our tenants and the funding support from:

- **Country SA PHN** for their support across a range of programs – but particularly mental health
- **Barossa Hills Fleurieu Local Health Network (BHFLHN)** and
- **Our banking partner Commonwealth Bank.**

Our collective thanks for the support of the Board and our Management Team; Penny Heinrich (General Manager), Jo Teakle (Medical Services Manager) and Bruce Stocks (Mental Health Unit Manager) without whose support none of this would be possible.

FINANCE REPORT



KATE IRELAND

This is my first year as Chair of the Finance Committee having recently swapped roles with Sorana Dinmore who now chairs our Governance and Planning Committee. It is pleasing to be able to report on another strong year that has seen growing service delivery also result in a stronger bottom-line (building on the success of the past couple of years).



This year's outcome is particularly pleasing given the significant challenges we, and our community, continue to face with COVID-19 and which impact on almost all that we do.

Our finances are overseen on behalf of the Board by the Finance Committee whose membership is:

- Dr Mark Crawford, Board Member
- Dr Nigel Stocks, Board Member
- Kate Ireland, Board Member
- Sorana Dinmore, Board Member
- Kevin Wisdom-Hill, CEO and
- Penny Heinrich, General Manager

I would like to thank all members for their support and contribution and also to our banking partner, Commonwealth Bank, who are a pro-active contributor to our organisation.

A summary of the last five year's results are outlined on the next page .



As always, we continue to reinvest the vast majority of our funds back into health service delivery and member services and our plans for the development of another health centre (covered elsewhere) are further evidence of this.

The financial cash summary below is sourced from our full audited financials which are included in the Annual Report available on our website. We also welcomed new auditors this year with Nexia Edwards Marshall replacing our previous auditors Ascensio. I'd like to acknowledge and thank Ascensio which provided great service to Summit Health over many years. The change was not undertaken lightly however best practice guidelines recommend that all organisations should change their auditors periodically to ensure that fresh eyes are brought to bear on the operations of the organisation. We have therefore made the change and look forward to working with Nexia Edwards Marshall in the coming years.

It's particularly pleasing to report that our new Auditors have provided an unqualified set of financials and have iterated Ascensio's observation on how well-managed our funds are.

As a reminder, the financials do not include the Summit Health Centre asset as it is held in a separate Trust of which Summit Health is the sole beneficiary.

	2021	2020	2019	2018	2017
INCOME	\$ 10,307,627	\$ 8,955,804	\$ 7,443,759	\$ 5,982,335	\$ 4,608,407
EXPENDITURE	\$ 9,319,350	\$ 8,316,140	\$ 7,210,333	\$ 5,902,283	\$ 4,452,383
SURPLUS	\$ 988,277	\$ 639,663	\$ 233,427	\$ 80,052	\$ 156,024
OPENING RETAINED EARNINGS	\$1,120,737	\$ 481,074	\$ 247,647	\$ 167,594	\$ 11,570
CLOSING SURPLUS	\$2,109,014	\$ 1,120,737	\$ 481,074	\$ 247,647	\$ 167,594

MEMBERS

Norhayati Adam	Sonja Gey Van Pittius	Sally-Anne Parsons
Jane Alderman	Cassie Gibbs	Veronica Paull
James Allan	Jenieta Hartley	Caroline Phegan
Hugh Allen	Peter Hartley	Andrew Pols
Katrina Allen	Lasath Hattotuwa	Lindy Poole
Briony Andrew	Erich Heinzle	Linda Porteous
John Arthurson	Graham Hughes	Jane Ramsey
Faisal Bachok	Sheree Hunt	Russell Richardson
Roger Bannister	George Isaac	Claire Riebeling
Jyothi Bhumireddy	Azlan Ismail	Adrian Rose
Ioulia Bobkova	Philip Johns	Robert Rushton-Smith
Sinclair Bode	Grace Kang	John Russell
Matthew Bourke	Jonas Kasauskas	Nurazlin Sabtu
David Brookes	Mark Keen	Chinpo Sam
Jarrold Brumby	Yen Koh	Peter Sargeant
Cara Bryant	Mark Lang	Chris Say
Trevor Burchall	Richard Lewis	Cynthia Say
Justin Choong	Nicole Lewis	Ken Sieben
Mark Crawford	Ahmet Lokaj	Catherine Skinner
Skye Curlis	Margaret Low	Katya Speight
Thomas Davey	Sarah Lucy	Nigel Stocks
Cameron Day	Emma Manifold	Peter Stuart
Adrian De Savi	Stephen McCappin	Kim Sun
Sally Downes	Megan McLaughlin	Andrew Sykes
Daniel Dwyer	Peter Michelmore	Geoffrey Symons
Daniel Edge	Rebecca Mitchell	Babak Taghavi Ardebili
Boris Eskandari Marandi	Lucie Monet	Chaka Tang
Kassandra Fairhall	Kate Nielsen	Ian Tattersall

Susan Taylor	Christopher Walker	Rohan Williams
Sean Taylor	Don Wallis	Richard Wilson
Lien Tee	Michael Wassef	Michelle Winn
Nina Tonkin	Richard Weate	Nicola Wisdom
Angela Travis	Karen Williams	Michal Wozniak

ASSOCIATE MEMBERS

Kaylene Adam	Naomi Crosby	Niluka Hattotuwa
Ujiwal Adhikary	Tracy Cross	Lucy Haynes
Sahban Alshehabi	Debra Dowling	Gina Highet
Kelly Amuso	Michelle Davies	Krystal Hogan
Kelly Arnold	Tania de Ron	Karen Hogben
Hayley Baird	Natasha Derosi	Annie Hopkins
Janette Baker	Jorin Derks	Tony Huang
Pamela Baldock	Balvinder Dhillon	Erika Jacobs
Courtney Balmer	Vikki Drougas	Samantha James
Claire Baron	Angela Dunn	Emma James
Stephen Batistich	Shelley Elder	Sally Jarrett
Sandra Batistich	Annie Elliott	Susan Jenkins
Susan Bishop	Tim Everett	Katrina Jenkins-Baker
Naomi Blake	Sue Farrow	Leanne Keough
Mini Blythman	Deanne Feijen	Angela Kidman
Julianna Boylan	Marilyn Finlay	Chiu-Tung Ko
Julianne Bridges	Helen Fordred	Janeen Lallard
Aimee Bruno	Rose Foskett	Riaan Landman
Amy Bryans	Graham Fraenkel	Karyn Ledder
Carol Buchanan	Francine Gapper	Eden Leech
Kylie Buck	Bridget Gardner	Vicki Linden
Bronwyn Byfield	Grant Gartrell	Kaye Lines
Leah Carroll	Jeanne Gilson	Tracy Magor-Weyland
Tania Cecotti	Sarah Godden	Deliah Mahne
Jinglin Chen	Penelope Graham	Josie Mann
Susan Cichon	Alexandra Gvieg	Hooman Mansoori
Emma Cobcroft	Jane Griessl	Heather Mason
Miriam Cooper	Helen Harding	Christine May
Paula Cotton	Karen Harding	Richard McClelland

Sally McGregor	Jessica Rees	Gunja Subedi
Kathryn McMurtrie	Ellen Reeves	Laura Tanner
Kassandra Melville	Louise Rismondo	Natalie Tavener
Melanie Maynard	Dominic Rinaldi	Lisa Taylor
Karel Michielsen	Elizabeth Slattery	Jo Teakle
Lyn Molinaro	Diana Salzbourn	Tanya Tilivi
Ben Moore	Rochelle Sanders	Emma Thompson
Barbara Morris	Kim Saunders	Kaye Vaughton
Rosalie Moss	Valerie Schubert	Iris Vega
Laura Mucci	Chloe Shelton	Geraldine Verma
Sharon Murphy	Joyleen Sherrah	Maurice Veronese
Catherine Murray	Jessica Signore	Lucie Walters
Shriram Nath	Tracey Simmonds	Ronda Wauchope
Gena Notley	Jacquie Simpson	Helen van Kastecken
Nicholas Nourse	Nimit Singhal	Tania Webster
Mary Orr	Claire Smith	Jill Weidenhofer
Alison Palmer	Amy Sniedze	Sharon Welch
Julie Paul	Hilary Spacey	Marlene Westley
Sarah Payne	Andrea Sparrow	Lucy Wheatley
Rachael Pearce	Leah Spencer	Margaret Wheatley
Diana Pearson	Julie Starke	Louise Wilkins-Hargreaves
Jane Peters	Lynlee Stevenson	Sally Wilson
Susan Petraccaro	Vanessa Stewart	Xiaojun Liang
Marlene Pratt	Joshua Stewart	Wendy Ziersch
Deb Puiatti	Tanya Stichel	Alexis Zobel
Madhu Rao	Georgina Stoll	

MEMBER SERVICES



CATHY AKTANAROWICZ
General Programs Team Leader

SERVICE OVERVIEW

Delivering services to meet the needs of members and our community continues to be a key focus for the Summit Health team, despite being hampered by COVID-19 postponements of scheduled learning opportunities.

Activities including educational events, newsletter communications and local radio sponsorship have enabled a range of specialised health topics to be delivered.

RADIO

Summit Health provides sponsorship of Hills Radio that enables regular health segments for the Hills community. Aiming to feature health professionals exploring wellness and how to stay healthy, a wide range of topics have been covered this year and all are available via our webpage. <https://www.summithealth.org.au/hills-radio-program/>

- Managing Diabetes
- Mental Health
- COVID-19 Vaccination
- Face masks and accessing medications during COVID-19
- Legal Services Commission services and Bushfire Assistance programs
- Fatherhood



EDUCATION AND EVENTS

Everything Foot & Ankle

Presented by Tim Bass and Dr Peter Stavrou in August to GPs, the diagnosis and management of foot and ankle problems – simple to complex was covered.



Intellectual Disability Awareness & Inclusion Workshop

Through the Connect-Able Intellectual Disability (ID) Project, an Intellectual Disability Awareness & Inclusion Workshop was facilitated by the South Australian Council on Intellectual Disability (SACID) in April, with the aim of providing education and training around better understanding people with an intellectual disability and complex needs.

The workshop was attended by 14 people, generating an avid awareness of the need to provide high quality care and support to people with an intellectual disability, and ignited a keen interest around the sharing of resources, links and contact details gained throughout the ID project, with many embracing the opportunity to network across the broad group of attendees.

The overwhelming success of the workshop supported the facilitation of a further SACID workshop, which was attended by 25 people at Hahndorf in June 2021. Both workshops attracted attendees from diverse health disciplines and service settings, and included GPs, Nurses, Allied Health Professionals, Counsellors, local and Pharmacy Society Australia (PSA) Pharmacists, Mount Barker and Adelaide Hills Councils, Intellectual Disability School Educators, and a range of Intellectual Disability Organisations.



Wound Care

Practice Nurses had the opportunity to attend a session on wound care in May - 32 nurses participated in this popular session which had attendance limited by COVID-19 restrictions.

“Thankyou. It was wonderful to be able to attend a face to face session and catch up with colleagues”



DATIS — Medicines & Weight (Drug & Therapeutic Information Service)

DATIS delivered a session around Medicines and Weight to 23 attendees ranging from GPs, Practice staff, pharmacists and students.

CPR Training

CPR for Clinical Staff training sessions were offered in August with additional sessions offered to Non Clinical Staff.

MENTAL HEALTH SERVICE



BRUCE STOCKS

SUMMIT MENTAL HEALTH UNIT MANAGER

SERVICE OVERVIEW

2020-21 has been another busy year for the Summit Health Mental Health Service. Across the Adelaide Hills, Fleurieu Peninsula, and Kangaroo Island, our mental health clinicians have cared for the needs of 1,797 individual service users, and provided 7,430 counselling sessions, as well as other psycho social supports and linkages.

Over the year we have been working towards the establishment of Summit Health CONNECTcare. CONNECTcare is another platform for the provision of both free government funded allied health programs alongside those where the user pays a fee for services. This enables those who can afford a service to pay for that service, whilst those who are financially and socially disadvantaged to receive a similar but free service. The end result is that the whole community has accessible services as they are needed. Fees paid by those who can afford to pay are channeled back into the provision of further services made available to everyone. CONNECTcare will combine the resources available from the Commonwealth government through the Country SA PHN, with self-funded and other rebate options to make more services available in our communities. We hope to start this service in late 2021.

This year our clinicians engaged in professional development focused around the use of Acceptance and Commitment Therapy (ACT). ACT is a contemporary psychological therapy that encourages people to use their values and an emotionally accepting stance to make choices and take action to deal with their matters of concern.

Throughout the year we have continued to be engaged in Bushfire Recovery Counselling and Therapy. Country SA PHN has funded the service so that we have been able to have clinical support for people recovering from the bushfires, in both the Adelaide Hills and Kangaroo Island.



A big thank you to all of our staff and contractors who have worked extremely hard to provide an outstanding service at Mt Barker, Lobethal and Stirling in the Adelaide Hills, at Victor Harbor, Yankalilla, Goolwa and Strathalbyn in the Fleurieu Peninsula, and at Kingscote Kangaroo Island.

"Thank you so much for your help. I've been going through a really tough time and your support meant a lot to me."

Mental Health Service Client (MHS Client)

TOTAL NUMBERS

1,797

**Individual
CLIENTS**

7,430

**Number of
SESSIONS**



"I am so grateful for all the strategies and tools my counsellor taught me in our sessions. I will keep them with me for life. I have a long way to go, but I feel as though I can approach these challenges with curiosity now, as opposed to fear"

MHS Client

"Friendly and respectful assistance from caring and professional counsellor"

MHS Client

"I was impressed with my counsellor that was provided and appreciate the help that was very much needed at the time"

MHS Client

SERVICE DELIVERIES: CLIENT SESSIONS

There has been an increase of 16.5% more client sessions from 2019/20.

16.5%
INCREASE
IN
SESSIONS

	2020/2021
PSYCHOLOGICAL THERAPIES SERVICE	4,110
SHARED CARE PROGRAM	2,707
CLINICAL CARE & COORDINATION SERVICE	275
BUSHFIRE RECOVERY	338
TOTAL	7,430

"I am extremely grateful that this service was available and for the skill and empathy of the practitioner I saw. Thank you"

MHS Client

SERVICE DELIVERIES: CLIENTS PER PROGRAM

	2020/2021
PSYCHOLOGICAL THERAPIES SERVICE	1,026
SHARED CARE PROGRAM	591
CLINICAL CARE & COORDINATION SERVICE	87
BUSHFIRE RECOVERY	93
TOTAL	1,797

"I was validated and given positive feedback and realistic suggestions for change"

MHS Client

GPCARE GENERAL PRACTICE

JO TEAKLE

MEDICAL SERVICES MANAGER



KIM SAUNDERS

GPCARE SERVICES MANAGER



OVERVIEW

GPcare General Practice is nearing completion of another successful and extraordinary year of operation since commencing in November 2014 with the opening of the Summit Health Centre.



Dr David Mills accepted the role of GPcare Lead GP in March 2021; this is a key GP Leadership role within GPcare to advocate for both GPs and Practice Managers around change management and business growth; and to assist with further developing a strong, positive practice culture moving forward.



The continuing impact of COVID-19 meant telehealth continued to be offered for eligible patients. GPcare was able to move its respiratory assessment area from outside (last year) to a dedicated indoor space.



GPcare was approved as a provider of COVID-19 vaccination in March 2021. Vaccination clinics offering the AstraZeneca COVID-19 vaccine were implemented in April 2021 with Dr Graham Hughes as clinical lead and vaccine clinic GP.

GPcare is supported by an experienced and dedicated core group of GPs; including GP Registrars from GPEx and sessional GPs, equating to 6.1 clinical FTE and a dedicated and experienced team of nursing and reception staff.

We welcomed the following GPs:

- Dr Tracey Landon joined GPcare in March 2021, Tracey is a GP Obstetrician who has recently been working at a community controlled Aboriginal Health Centre in Whyalla as a General Practitioner.
- GP Registrar Dr Madhu Rao achieved fellowship with the RACGP in September 2020 and has continued on with GPcare.
- Dr Graham Hughes returned in late 2020 in a locum capacity then took the role as the vaccine clinical lead in the COVID-19 vaccination clinics which commenced in April 2021.

Dr Cassie Gibbs has embraced the role as GP Supervisor for our 5th year medical students and continues to supervise our GP Registrars. Unfortunately we farewelled Dr Anna Vnuk and Dr Babak Taghavi Ardebili during 2020/2021. We thank them for their contribution to GPcare.

GPcare continues to support medical workforce development and are hosting two 5th year medical students (Catherine Jenkins and Erin Widdison from the University of Adelaide), undertaking their rural placement in Mt Barker during 2021.

Our 6-8 week placements for 3rd year nursing students from Flinders University continue to provide a valuable General Practice experience for our future nursing workforce.

In August Jo Teakle left Summit Health to take on a new role in a new direction. During her years with Summit Health Jo played a major role in helping establish the Centre and GPcare and had a big impact; we are grateful for her contribution and wish her well for the future.

GPCARE GENERAL PRACTITIONERS

- | | |
|--------------------|-----------------------|
| • Dr Angela Travis | • Dr Graham Hughes |
| • Dr Cassie Gibbs | • Dr John Arthurson |
| • Dr Cath Love | • Dr Katya Speight |
| • Dr Chris Say | • Dr Madhu Rao |
| • Dr Dan Dwyer | • Dr Megan McLaughlin |
| • Dr Daniel Edge | • Dr Naif Saigol |
| • Dr David Mills | • Dr Tracey Landon |
| • Dr Emma Manifold | |

GPCARE REGISTRARS

- Dr Chloe Shelton
- Dr Jack Fuller

HEALTH PROMOTION ACTIVITIES

- Crazy Socks Day – Mental Health of Doctors and health practitioners
- Jean for Genes Day – Raises funds for genetic diseases in children
- Red Nose Day – Raises awareness around SIDS
- Be Medicine Wise – Promotes the best and safest way to use medicines
- Wear Red this Red Feb – Initiative by Heart Research Australia
- Teal Ribbon Day – raises money for ovarian cancer
- Epilepsy Awareness Day
- Go Blue for Autism Day
- Patient Experience Week – Acknowledges the efforts of those who interact with patients everyday





JORIN DERKS
EDcare CLINICAL MANAGER

CHALLENGES

EDcare has seen another successful year, providing a quality 24 hour emergency service to our region and its growing community with a total of 19,971 patients seen by medical staff, a huge 23% increase over the last financial year.

EDcare has faced many challenges over the year, including the COVID-19 Pandemic, the ever-increasing acuity, workable space in the ED, and the announcement of the end of the EDcare contract in March 2022 in preparation for the new ED service out of the new building!



Highlights have included increased educational opportunities for Medical and Nursing staff and South Australian Ambulance Service (SAAS); commencement of a South Adelaide Local Health Network (SALHN) Intern in the Emergency Department, and Jorin Derks and the EDcare team winning "Healthcare Hero" in the HELP awards.



Jorin Derks





EDcare team



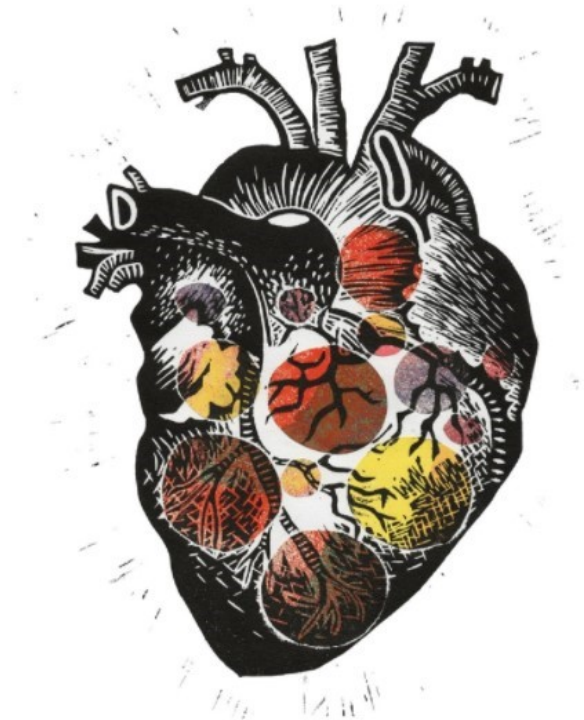
EDcare also released its “**EDcare, Handbook for Emergency Practice**” written by EDcare Clinical Director, Dr Peter Stuart and targeted at the EDcare clinicians to better support them in the challenging role.

EDcare, Handbook for Emergency Practice is available via [amazon.com.au](https://www.amazon.com.au)

EDcare

Handbook for Emergency Practice

First edition : April 2021





19,971 Patients Seen

COVID-19 PANDEMIC



EDcare has faced ongoing and significant challenges in relation to the COVID-19 Pandemic with a substantial increase in respiratory patients presenting to the department that were unable to be reviewed by their local GP. Restricted work space and no access to negative pressure facilities has made assessment of these patients challenging at times.

EDUCATION

EDcare Emergency Education sessions are facilitated by EDcare Clinical Director, Dr Peter Stuart; and are available at no cost for all EDcare doctors to attend and have continued throughout the year as the COVID-19 pandemic restrictions have allowed. These sessions have been immensely popular. They involve pre-learning, face-to-face learning and simulation.

This year's topics have included:

- Emergency Orthopaedics
- Bedside ultrasound
- ENT Emergencies
- Lung Emergencies
- Team based Resus
- Burns Management
- Airway management
- Acute Respiratory failure

Monthly Mortality & Morbidity (M&Ms) have also proved to be very popular with EDcare GPs, BHFLHN ED nurses and SAAS. Each month (restrictions permitting) we have explored several interesting cases as well as undertaking the SALHN intern audit.



Airway Management 2021



Lung Emergencies 2021

THE FUTURE

In February 2021, EDcare management met with BHFLHN executive and as part of the hospital transition to the new ED and its salaried model were informed that the contract would not be extended past the end of contract date, March 2022. The coming year will be spent in ensuring the EDcare doctors will be able to apply for their new roles as Medical Officers in the new Mt Barker Hospital ED, due for completion approximately Nov 2022.

EDCARE

- Dr Peter Stuart - EDcare Clinical Director
- Dr Lien Tee - EDcare Clinical Lead
- Jorin Derks - EDcare Clinical Manager

GENERAL PROGRAMS



CATHY AKTANAROWICZ
General Programs Team Leader

GENERAL PROGRAMS (GPSA)

The GPSA program area has demonstrated significant growth across the 2020-21 year, bringing more services to our community. Country SA PHN have provided increased project funding including the enhanced Telehealth support for 69 Country Aged Care Facilities, and several short term projects: Immunisation Champion Nurse, and 'Connect-Able', which has focussed on improving pathways for persons with an Intellectual Disability.

AFTER HOURS INNOVATION

The Aged Care sector has been in the spotlight across the past year. The positive work in the Hills Residential Aged Care Facilities (RACF) After Hours Innovation project led to an offer from CSAPHN to extend the initiative into the 69 facilities across rural SA. Through the upload and distribution of Ipads into country RACFs the opportunity to build on telehealth and medication management initiatives is being explored.

IMMUNISATION CHAMPION NURSE

A short term project to identify local champion nurses and build networks and information across Barossa Hills Fleurieu lead to an innovative model where 3 practices were identified to work on the initiative. Each practice agreed to be a local contact and work together to improve immunisation rates and share strategies. Local newspaper articles highlighted benefits of immunisation and promotion of the SA Immunisation hub.

WELCOMING ENVIRONMENTS

We welcomed funding support to commission a piece of artwork that honours the Peramangk Country of the Mount Lofty Ranges. The CSAPHN provided funding to commission the work of local artist, David Booth who worked with the Summit Health team to create a piece of Artwork that reflects Peramangk Country and health, also enabling replica prints for sharing across local practices.

David Booth launched the artwork with a presentation that provided his story and the story of the artwork.

The implementation of this activity was supported as part of the overall strategy at Summit Health and a number of staff attended Aboriginal Cultural Sensitivity & Respect Training workshop supported by CSAPHN and GPEX.



CONNECT-ABLE

The significant progress made by the Connect-Able Intellectual Disability (ID) project as at the project end date of 30 June 2021, together with consideration of the Health Budget 2020-2021 resulted in CSAPHN supporting the continuation of this important work around Intellectual Disability for a further six months, until 31 December 2021. The extension of the project was welcomed, with opportunities for a wider-spread transfer of knowledge, education/training, and the sharing of tools and outcomes across a greater number of healthcare services, further sustaining and building on communication pathways, and improving systems in which to support the healthcare needs for people with intellectual disability.



MOVE n CARE

The Heart Foundation Active Innovation grants attracted greater than 300 applications nationally, and only 20 were chosen to pitch for a project. Summit Health was one of the 10 organisations that were successful in gaining a grant. The project was to support carers of clients with Parkinson's Disease, however we realise that this is a greater issue for carers broadly and their need to stay fit to be a carer.

The group have participated in a range of activities to better understand what may work for them to maintain health and wellness especially to continue their support as a carer.



2021 Proud Supporter
Heart
Foundation

INTEGRATED WELLNESS SERVICE ON KI

IWS has continued on Kangaroo Island and successfully built referrals in the year, including bringing in allied health support from Podiatry, adding to Physio, Dietetics and Exercise Physiology. Several community sessions were successfully coordinated in the period, including Falls Prevention, Diabetes and Women's Health. In the next period the program will be expanded into Yankalilla.



INTEGRATED **WELLBEING**
SERVICE

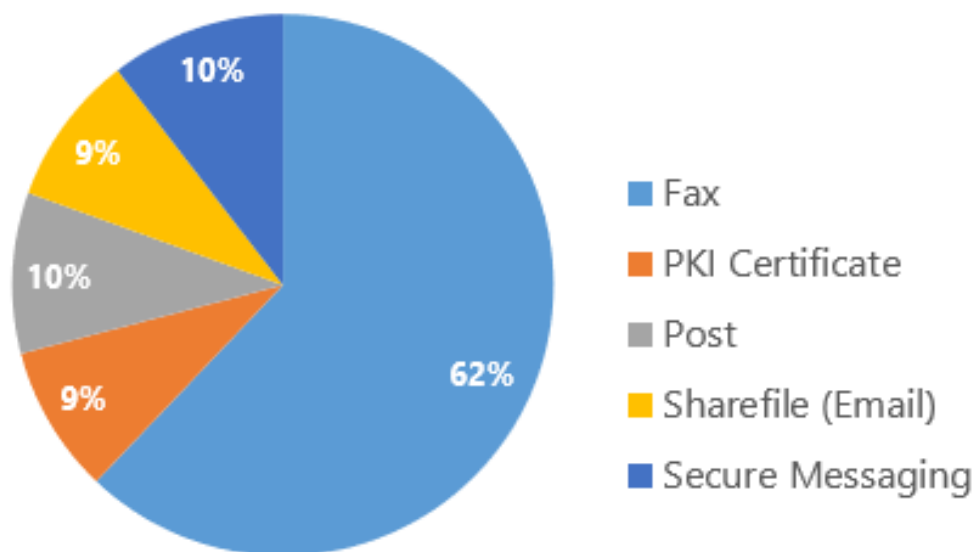
HEALTH PROVIDER REGISTRY

The Health Provider Registry (HPRy) enables a vital connection with health providers, general practices and health services across South Australia.

Summit Health maintain the HPRy database which support the transfer of patient information such as discharge summaries and specialist referrals. The data base contains 6,843 practitioners and 2,501 practice types.

In the final quarter of 2020-21 SA Health began the cutover to secure messaging as the preferred and safest way to transfer patient information and Summit Health has been supportive of this shift to secure messaging reducing the number of practices using fax to communicate patient discharge summaries and notifications. Communication preferences are moving positively in the direction of electronic transmission and a larger portion of practices are now changing over to secure email and messaging.

Communication Preferences



6843 TOTAL Practitioners

2501 TOTAL Practice Types

3706 General Practitioners

SUMMIT HEALTH CENTRE



SALLY JARRETT

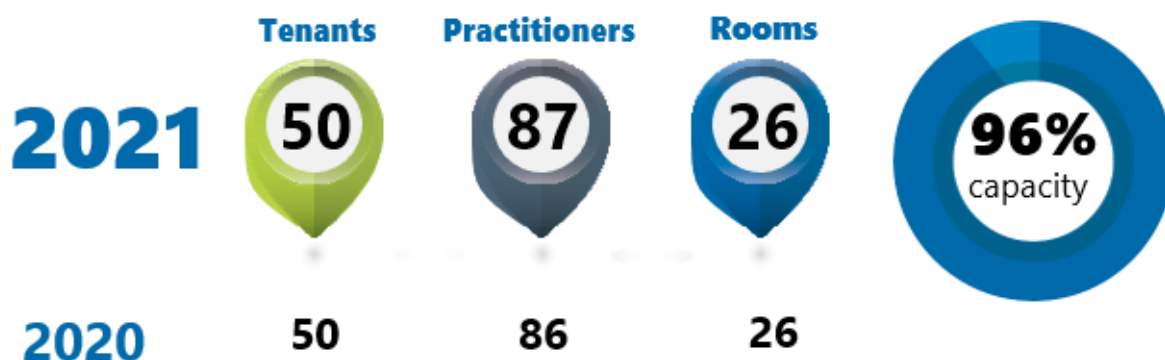
Facility Manager and Student Coordinator

OVERVIEW

Continued growth in tenancy demand despite the COVID-19 challenges has seen the Centre effectively at capacity. We have commenced some minor internal rebuilding to create more tenancy space and the organisation is working on a longer term solution given the continued growth of our population which is expected to continue for another 10 years! With over 130,000 people coming through the door over the past 12 months, the Centre can truly claim to be improving the community's access to a broader range of health services.

In June 2021 Sally Jarrett left the role of Facility Manager to take on a senior management role at Bridge Clinic, Murray Bridge. We thank her for her work with us and wish her all the best with the new role.

TENANTS



COVID-19 IMPACT



We have maintained a strong emphasis on maintaining our COVID-19-safe practices with many tenants stating they feel particularly safe in our facility.

ENVIRONMENTAL BENEFITS

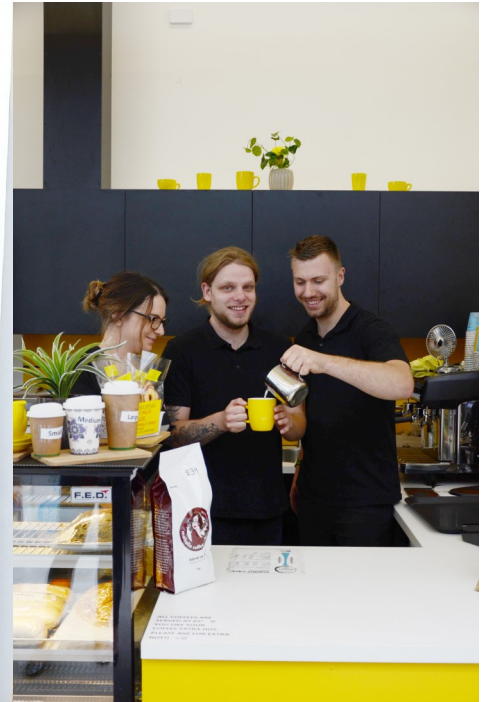
Summit Health has continued to plant more seedlings during the year and our solar panels and batteries continue to provide environmental benefits, with the equivalent of over 5,000 trees planted and 200,000kg of CO2 emissions saved. In addition, the café recycles its used cups for use by the Duck Flat volunteers (great seedling pots!) and the Centre Team recycle our waste-paper, cardboard and plastic. Every little bit helps.



**There's a health centre
there somewhere!**

SUMMIT CAFÉ

Summit Café is the social enterprise development undertaken in collaboration with Community Bridging Services Inc. Now in its second year, the café continues to grow its customer base and is now using local ingredients from the Duck Flat community garden in its produce - further evidence of our commitment to re-investing in our community.



FUNDRAISING EVENTS - Total Funds Raised \$14,701

- Biggest morning tea - Raised \$3,745 for Cancer Council SA
- Jeans for Genes Day - Raised \$46 for Children's Medical Research Institute
- Marilyn Jetty Swim – Raised \$7,298 for Cancer Council SA
- Pink Ribbon Breakfast – Raised \$3,292 for the National Breast Cancer Foundation Australia
- Staff Soup days - Raised \$320 for 'Hungry No More' Hot Meal Program (\$590 total)



Cancer Council SA
Australia's Biggest Morning Tea 2020



Australia's Biggest Morning Tea

Donation of \$3,745 made to the
Cancer Council of South Australia



Marilyn Jetty Swim - Cancer Council SA

CENTRE HEALTH PROMOTION ACTIVITIES

- Breastscreen awareness
- Healthy New Year Promotion
- Hopper Ant Display
- Lifeblood – Australian Red Cross
- Mental Health Week
- National Diabetes Week
- National Stroke Week
- R U OK day
- Stroke week
- World Mental Health Day



R U OK? Day



Healthy New Year 2021



Stroke Week

FINANCIAL REPORT

SUMMIT HEALTH INCORPORATED
Financial Report
FOR THE YEAR ENDED 30 JUNE 2021

ABN 33 453 119 459

FINANCIAL REPORT

SUMMIT HEALTH INCORPORATED FINANCIAL REPORT FOR THE YEAR ENDED 30 JUNE 2021 Table of Contents

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FINANCIAL REPORT

SUMMIT HEALTH INCORPORATED FINANCIAL REPORT FOR THE YEAR ENDED 30 JUNE 2021 Board Report

The Board or Directors present their report on the Association for the financial year ended 30 June 2021.

Directors

The names of the Board Members in office at any time during or since the end of the year are:

Prof Keith Evans	Chair
Ms Sorana Dinmore	Governance and Planning Sub Committee Chair
Ms Kate Ireland	Finance Sub Committee Chair
Dr Michael Wozniak	General Member
Dr Sheree Hunt	General Member (until 20 October 2020)
Dr Mark Crawford	General Member
Dr Claire Riebeling	General Member
Prof Nigel Stocks	General Member

Ex officio

Mr Kevin Wisdom-Hill	CEO
----------------------	-----

Board Members have been in office since the start of the financial year to the date of this report unless otherwise stated.

Review of Operations

The surplus for the Association for the financial year amounted to \$988,277 (2020: \$639,664).

Principal Activities

The principal activities of the Association during the course of the year were maintaining and improving the standard of health care in the Adelaide Hills region through enhanced General Practice Care.

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

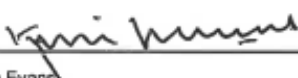
Events Subsequent to the End of the Reporting Period

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

Auditor's independence declaration

A copy of the auditor's independence declaration as required under section 60-40 of the *Australian Charities and Not-For-Profit Commission Act 2012* has been included.

This Board Report is signed in accordance with a resolution of the Board of Directors:



Prof Keith Evans
Board Chair



Sorana Dinmore
Board Member

Dated this 6 day of September 2021.

FINANCIAL REPORT

SUMMIT HEALTH INCORPORATED

Statement of Profit or Loss and Other Comprehensive Income for the year ended 30 June 2021

	Note	2021 \$	2020 \$
Revenue			
Project Income	2	4,926,745	4,261,657
Patient Fees		3,615,826	3,217,986
Management Fees		381,424	292,341
Interest Received		117	1,249
JobKeeper Subsidy		502,500	391,500
ATO Cash Flow Boost		37,500	62,500
Other Income		843,515	728,572
Total Income		10,307,627	8,955,805
Expenses			
Advertising and Promotion		9,986	12,839
Clinical Supplies		84,856	81,822
Consultants and Contractors		3,841,722	3,391,236
Depreciation		8,831	8,669
Donations		100	200
Insurance		26,352	23,504
Interest		50	605
Legal Fees		11,280	11,858
Management Costs		98,275	157,183
Meeting Expenses		21,645	17,822
Motor Vehicle Expenses		7,875	5,225
Office Equipment/Furniture		3,511	16,615
Printing & Stationery		19,640	21,089
Program Expenses		221,332	179,624
Rent & Outgoings		474,874	450,472
Salaries, Wages & Superannuation		4,025,295	3,581,971
Staff Amenities		7,308	35,831
Staff Training		33,588	73,058
Telephone		25,461	16,440
Travel		10,567	17,301
Workcover		15,593	14,268
Other Expenses		371,209	212,510
Total expenses		9,319,350	8,316,140
Surplus for the year		988,277	639,664
Other comprehensive income		-	-
Total other comprehensive income		-	-
Total comprehensive income for the year		988,277	639,664

The accompanying notes form part of these financial statements.

FINANCIAL REPORT

SUMMIT HEALTH INCORPORATED

Statement of Financial Position as at 30 June 2021

	Note	2021 \$	2020 \$
ASSETS			
CURRENT ASSETS			
Cash and Cash Equivalents	3	1,305,337	1,011,688
Trade and Other Receivables	4	311,157	693,659
Other Assets	5	73,858	69,381
TOTAL CURRENT ASSETS		1,690,352	1,774,728
NON-CURRENT ASSETS			
Financial Assets	6	2,625,000	1,200,000
Plant and Equipment	7	39,327	16,418
TOTAL NON-CURRENT ASSETS		2,664,327	1,216,418
TOTAL ASSETS		4,354,679	2,991,346
LIABILITIES			
CURRENT LIABILITIES			
Trade & Other Payables	8	804,028	660,305
Contract Liabilities	9	695,552	499,056
Financial Liabilities	10	-	15,865
Employee Provisions	11	363,009	341,169
TOTAL CURRENT LIABILITIES		1,862,589	1,516,395
NON-CURRENT LIABILITIES			
Employee Provisions	11	71,023	42,161
TOTAL NON-CURRENT LIABILITIES		71,023	42,161
TOTAL LIABILITIES		1,933,612	1,558,556
NET ASSETS		2,421,067	1,432,790
EQUITY			
Accumulated Surplus		2,421,067	1,432,790
TOTAL EQUITY		2,421,067	1,432,790

The accompanying notes form part of these financial statements.

FINANCIAL REPORT

SUMMIT HEALTH INCORPORATED

Statement of Changes in Equity for the year ended 30 June 2021

	Accumulated Surplus	Total
	\$	\$
Balance at 1 July 2019	793,126	793,126
Net Surplus for the Year	639,664	639,664
Balance at 30 June 2020	<u>1,432,790</u>	<u>1,432,790</u>
Balance at 1 July 2020	1,432,790	1,432,790
Net Surplus for the Year	988,277	988,277
Balance at 30 June 2021	<u>2,421,067</u>	<u>2,421,067</u>

The accompanying notes form part of these financial statements.

FINANCIAL REPORT

SUMMIT HEALTH INCORPORATED

Statement of Cash Flows for the year ended 30 June 2021

	Note	2021 \$	2020 \$
CASH FLOWS FROM OPERATING ACTIVITIES			
Revenue from Operating Activities		10,878,949	8,727,178
Interest Received		117	1,249
Payments to Suppliers and Employees		(9,120,522)	(8,008,613)
Interest Paid		(50)	(605)
Net Cash Provided by Operating Activities	12	<u>1,758,495</u>	<u>719,209</u>
CASH FLOWS FROM INVESTING ACTIVITIES			
Proceeds from Sale of Plant & Equipment		23,456	-
Purchase of Plant & Equipment		(47,436)	-
Loan payments to The Mt Barker GP Super Clinic Trust		(1,425,000)	(950,000)
Net Cash Used in Investing Activities		<u>(1,448,980)</u>	<u>(950,000)</u>
CASH FLOWS FROM FINANCING ACTIVITIES			
Repayment of Borrowings		(15,865)	(10,385)
Net Cash Provided by Financing Activities		<u>(15,865)</u>	<u>(10,385)</u>
Net Increase in Cash Held		293,649	(241,176)
Cash and Cash Equivalents at Beginning of Financial Year		1,011,688	1,252,864
Cash and Cash Equivalents at End of Financial Year	3	<u>1,305,337</u>	<u>1,011,688</u>

The accompanying notes form part of these financial statements.

FINANCIAL REPORT

SUMMIT HEALTH INCORPORATED

Notes to the Financial Statements for the year ended 30 June 2021

Note 1: Summary of Significant Accounting Policies

The principal accounting policies adopted in the preparation of the financial statements are set out below. These policies have been consistently applied to all the years presented, unless otherwise stated

Basis of Preparation

The Board has determined that the Association is not a reporting entity as its users may request the financial information they need. These special purpose financial statements that have been prepared for the purposes of complying with the *Australian Charities and Not-for-profits Commission Act 2012*. The Board have determined that the accounting policies adopted are appropriate to meet the needs of the members of the Association.

These financial statements do not comply with all the recognition and measurement requirements in Australian Accounting Standards.

The recognition and measurement requirements that have not been complied with, and the accounting policies which have not been assessed for compliance with the recognition and measurement requirements, are those specified in:

- AASB 16 Leases, as the Association recognises lease payments as a rental expense on a straight-line basis over the lease-term.
- Note 15 Related Entities, as the Association has not assessed whether it has relationships with other entities which, for financial reporting purposes, might be considered subsidiaries, associates or joint ventures in accordance with AASB 10 Consolidated Financial Statements or AASB 128 Investments in Associates and Joint Ventures, as it is not required by the *Australian Charities and Not-for-profits Commission Act 2012* to do so;
- Note 1(a) Patient Fees, as the Association has not assessed compliance with AASB 15 Revenue from Contracts with Customers and AASB 1058 Income of Not-for-profit Entities.

The financial statements have been prepared in accordance with the disclosure requirements of AASB 101 'Presentation of Financial Statements', AASB 107 'Statement of Cash Flows', AASB 108 'Accounting Policies, Changes in Accounting Estimates and Errors', AASB 1048 'Interpretation of Standards' and AASB 1054 'Australian Additional Disclosures', as appropriate for not-for-profit oriented entities.

Accounting Policies

a) Revenue Recognition

The Association recognises revenue as follows:

Revenue from contracts with customers

Revenue is recognised at an amount that reflects the consideration to which the Association is expected to be entitled in exchange for transferring goods or services to a customer. For each contract with a customer, the Association: identifies the contract with a customer; identifies the performance obligations in the contract; determines the transaction price which takes into account estimates of variable consideration and the time value of money; allocates the transaction price to the separate performance obligations on the basis of the relative stand-alone selling price of each distinct good or service to be delivered; and recognises revenue when or as each performance obligation is satisfied in a manner that depicts the transfer to the customer of the goods or services promised.

Project Revenue

Grant (project) revenue is recognised in profit or loss when the incorporated association satisfies the performance obligations stated within the funding agreements.

If conditions are attached to the grant which must be satisfied before the Association is eligible to retain the contribution, the grant will be recognised in the statement of financial position as a liability until those conditions are satisfied.

Patient Fees

Patient fees are recognised as revenue when the services are delivered to the patient by the practitioner. In accordance with the contractual arrangements between the Association and the practitioners, the patient fees are collected by the Association and paid to the practitioners after deducting the Association's service fee for access to facilities and services performed including provision of non-professional staff, plant, equipment and administration services.

Interest

Interest revenue is recognised as interest accrues using the effective interest method. This is a method of calculating the amortised cost of a financial asset and allocating the interest income over the relevant period using the effective interest rate, which is the rate that exactly discounts estimated future cash receipts through the expected life of the financial asset to the net carrying amount of the financial asset.

Other revenue

Other revenue is recognised when it is received or when the right to receive payment is established.

FINANCIAL REPORT

SUMMIT HEALTH INCORPORATED

Notes to the Financial Statements for the year ended 30 June 2021

Note 1: Summary of Significant Accounting Policies (Cont.)

b) Cash and Cash Equivalents

Cash and cash equivalents includes cash on hand, deposits held at call with financial institutions, other short-term, highly liquid investments with original maturities of three months or less that are readily convertible to known amounts of cash and which are subject to an insignificant risk of changes in value.

c) Trade and Other Receivables

Other receivables are recognised at amortised cost, less any allowance for expected credit losses.

d) Property, Plant & Equipment

Plant and equipment is stated at historical cost less accumulated depreciation and impairment. Historical cost includes expenditure that is directly attributable to the acquisition of the items.

Depreciation is calculated on a straight-line basis to write off the net cost of each item of property, plant and equipment over their expected useful lives as follows:

Plant & Equipment	8 years
Motor Vehicles	5 years

The residual values, useful lives and depreciation methods are reviewed, and adjusted if appropriate, at each reporting date.

An item of property, plant and equipment is derecognised upon disposal or when there is no future economic benefit to the Association. Gains and losses between the carrying amount and the disposal proceeds are taken to profit or loss.

e) Trade and other payables

These amounts represent liabilities for goods and services provided to the Association prior to the end of the financial year and which are unpaid. Due to their short-term nature they are measured at amortised cost and are not discounted. The amounts are unsecured and are usually paid within 30 days of recognition.

f) Contract Liabilities

Contract liabilities (income in advance) represent the Association's obligation to transfer goods or services to a customer and are recognised when a customer pays consideration, or when the Association recognises a receivable to reflect its unconditional right to consideration (whichever is earlier) before the Association has transferred the goods or services to the customer.

g) Employee Benefits

Short-term Employee Benefits

Liabilities for wages and salaries, including non-monetary benefits, annual leave and long service leave expected to be settled wholly within 12 months of the reporting date are measured at the amounts expected to be paid when the liabilities are settled.

Other Long-Term Employee Benefits

The liability for annual leave and long service leave not expected to be settled within 12 months of the reporting date are measured at the present value of expected future payments to be made in respect of services provided by employees up to the reporting date using the projected unit credit method. Consideration is given to expected future wage and salary levels, experience of employee departures and periods of service. Expected future payments are discounted using market yields at the reporting date on national government bonds with terms to maturity and currency that match, as closely as possible, the estimated future cash outflows.

h) Goods and Services Tax (GST)

Revenues, expenses and assets are recognised net of the amount of GST, except where the amount of GST incurred is not recoverable from the Australian Taxation Office (ATO).

Receivables and payables are stated inclusive of the amount of GST receivable or payable. The net amount of GST recoverable from, or payable to, the ATO is included with other receivables or payables in the statement of financial position.

i) Comparative Figures

When required by Accounting Standards, comparative figures have been adjusted to conform to changes in presentation for the current financial year.

FINANCIAL REPORT

SUMMIT HEALTH INCORPORATED

Notes to the Financial Statements for the year ended 30 June 2021

Note 2: Project Income	Note	2021 \$	2020 \$
Primary Health Network Funding		1,775,290	1,559,942
BHFLFN Funding		2,898,649	2,437,880
HPRy Funding		190,413	181,977
Other Project Income		62,393	81,858
		<u>4,926,745</u>	<u>4,261,657</u>
Note 3: Cash and Cash Equivalents			
Cash at Bank		1,304,406	1,011,139
Cash on Hand		931	549
		<u>1,305,337</u>	<u>1,011,688</u>
Note 4: Trade & Other Receivables			
Trade Receivables		311,157	448,740
Accrued Income		-	232,619
ATO Cash Flow Boost		-	12,500
		<u>311,157</u>	<u>693,859</u>
Note 5: Other Assets			
Prepayments		73,858	69,381
		<u>73,858</u>	<u>69,381</u>
Note 6: Financial Assets			
NON-CURRENT			
Loan - The Mt Barker GP Super Clinic Trust - Unsecured	15	2,625,000	1,200,000
		<u>2,625,000</u>	<u>1,200,000</u>
Note 7: Plant & Equipment			
Plant & Equipment		3,400	-
Less: Accumulated Depreciation		(35)	-
		<u>3,365</u>	<u>-</u>
Motor Vehicles		44,035	43,346
Less: Accumulated Depreciation		(8,073)	(26,928)
		<u>35,962</u>	<u>16,418</u>
TOTAL PLANT AND EQUIPMENT		<u>39,327</u>	<u>16,418</u>

FINANCIAL REPORT

SUMMIT HEALTH INCORPORATED

Notes to the Financial Statements for the year ended 30 June 2021

Note 8: Trade & Other Payables	2021	2020
	\$	\$
CURRENT		
Trade Payables	528,380	467,574
Accrued Expenses	149,020	89,310
Other Payables	125,828	103,415
	<u>804,028</u>	<u>660,305</u>
Note 9: Contract Liabilities		
Income In Advance	695,552	499,056
	<u>695,552</u>	<u>499,056</u>
Note 10: Financial Liabilities		
Current		
Hire Purchase Liability	-	15,865
	<u>-</u>	<u>15,865</u>
Note 11: Employee Provisions		
Current		
Annual Leave	206,678	204,471
Other Leave	5,552	2,856
Long Service Leave	150,779	133,842
	<u>363,009</u>	<u>341,169</u>
Non-Current		
Long Service Leave	71,023	42,161
	<u>71,023</u>	<u>42,161</u>
	<u>434,032</u>	<u>383,330</u>
Note 12: Cash Flow Information		
Reconciliation of Cash Flow from Operations with Net Surplus		
Net Surplus	988,277	639,664
Depreciation	8,831	8,669
Gain from Sale of Non-Current Assets	(7,759)	-
Changes in assets and liabilities:		
(Increase) / Decrease in Trade & Other Receivables	382,702	(369,326)
(Increase) / Decrease in Other Assets	(4,477)	(8,888)
Increase / (Decrease) in Trade & Other Payables	143,723	318,211
Increase / (Decrease) in Other Liabilities	196,496	141,948
Increase / (Decrease) in Employee Provisions	50,702	(11,070)
	<u>1,758,495</u>	<u>719,209</u>

Note 13: Contingent Liabilities

The Association had no contingent liabilities as at 30 June 2021 (2020: nil).

Note 14: Commitments

The Association had no commitments for expenditure as at 30 June 2021 (2020:nil).

FINANCIAL REPORT

SUMMIT HEALTH INCORPORATED

Notes to the Financial Statements for the year ended 30 June 2021

Note 15: Related Entities

The Association is the trustee of The Mt Barker GP Super Clinic Trust. The financial results of The Mt Barker GP Super Clinic Trust have not been consolidated and do not form part of the Association's financial statements.

Note 16: Events After the Reporting Period

No matter or circumstance has arisen since 30 June 2021 that has significantly affected, or may significantly affect the Association's operations, the results of those operations, or the Association's state of affairs in future financial years (2020: nil).

Note 17: Association Details

The registered office and principal place of business of the Association is:

SUMMIT HEALTH INCORPORATED
85 Wellington Road
MOUNT BARKER 5251

FINANCIAL REPORT

SUMMIT HEALTH INCORPORATED

Statement by the Members of the Board

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

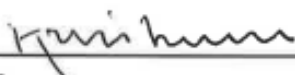
The directors of the Association declare that:

1. The financial statements and notes, as set out on pages 3 to 12, are in accordance with the *Australian Charities and Not-for-profits Commission Act 2012* and:

a) comply with Australian Accounting Standards to the extent described in Note 1 to the financial statements; and

b) give a true and fair view of the Association's financial position as at 30 June 2021 and of its performance for the year ended on that date in accordance with the accounting policies described in Note 1 to the financial statements.

2. In the Directors' opinion there are reasonable grounds to believe that the Association will be able to pay its debts as and when they become due and payable.



Prof Keith Evans
Board Chair



Sorana Dinmore
Board Member

Dated this 6 day of September 2021.

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THANK YOU

OUR THANKS TO OUR WORKFORCE

The Board and Management would like to take this opportunity to thank all staff and contractors who have contributed to making Summit Health the successful organisation that it is.

We recognise and acknowledge the enthusiasm, hard work and dedication that was shown by everyone.

OUR THANKS TO OUR KEY FUNDING PARTNERS





SUMMIT

HEALTH

85 Wellington Rd, MOUNT BARKER 5251

ABN 33 453 119 459

P 08 8406 7700 | **F** 08 8406 7777

E admin@summithealth.org.au | **W** summithealth.org.au