

## **Chapter 2**

### **Annual Reports of Commonwealth Authorities, Companies and Agencies**

2.1 For the financial year 2013–14, the following annual reports were referred to the committee for examination and report during the period 1 November 2014 to 30 April 2015:

#### **Social Services Portfolio**

- Australian Institute of Family Studies; and
- Social Security Appeals Tribunal.

#### **Health Portfolio**

- Administrator of the National Health Funding Pool;
- Australian Health Practitioner Regulation Agency;
- Australian Institute of Health and Welfare;
- Australian National Preventive Health Agency (ANPHA);
- Australian Organ and Tissue Donation and Transplantation Authority;
- Australian Sports Anti-Doping Authority (ASADA);
- Cancer Australia;
- Food Standards Australia New Zealand (FSANZ);
- General Practice Education and Training Limited (GPET); and
- Health Workforce Australia
- National Blood Authority (NBA);
- National Health and Medical Research Council (NHMRC);
- National Health Funding Body (NHFB);
- National Mental Health Commission;
- Private Health Insurance Ombudsman (PHIO); and
- Professional Services Review (PSR);

2.2 The committee has chosen to examine the following reports in more detail:

#### **Health Portfolio**

##### ***Australian Institute of Health and Welfare***

2.3 The Australian Institute of Health and Welfare (AIHW) met the reporting requirements of the *Commonwealth Authorities and Companies Act 1997*. The AIHW were able to meet seven of their eight performance targets, and achieved 14 of the 15

performance targets and deliverables. The target that was not achieved was outlined with a comprehensive discussion of the shortcomings and steps for the future.<sup>1</sup>

2.4 Adequate information was provided across the reporting requirements, with AIHW providing an appendix outlining their performance against these requirements.<sup>2</sup> AIHW achieved a surplus of \$56,000, which is down from the previous year.<sup>3</sup>

2.5 The report is well structured and it is clearly written. However, moving the organisational chart closer to the beginning of chapter two in the report would have provided a clearer overview at the start.

### ***Cancer Australia***

2.6 Cancer Australia met all of its key performance indicators.<sup>4</sup> Cancer Australia organised the first Cancer Australia National Aboriginal and Torres Strait Islanders Cancer Forum, which saw over 150 health workers meet to discuss ways of reducing the impact of cancer in Aboriginal and Torres Strait Islanders communities.<sup>5</sup> Cancer Australia also achieved many awareness and control measures, ranging from leadership in cancer control to priority research and community access to information.<sup>6</sup>

2.7 The activities and projects that were undertaken by Cancer Australia are clearly outlined and sufficient detail and discussion is given in regards to how these have achieved performance targets. Cancer Australia also provided a concise overview of the Cancer Australia Advisory Groups which help support and achieve strategic goals.<sup>7</sup>

2.8 The committee commends Cancer Australia on producing a high quality report. Future reports could be improved with a more substantial discussion and analysis of the financial performance and the inclusion of information on workforce planning, staff retention and turnover.

### ***Food Standards Australia***

2.9 Food Standards Australia produced a high quality report that reflects the performance standards they achieved. Food Standards Australia met or exceeded three of their four key performance indicators and performed well against the fourth.<sup>8</sup>

2.10 Food Standards Australia met the reporting requirements of the *Commonwealth Authorities and Companies Act 1997*. Their Annual report is

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1 Australian Institute of Health and Welfare, *Annual Report 2013-14*, p. 6

2 Australian Institute of Health and Welfare, *Annual Report 2013-14*, pp 211-213

3 Australian Institute of Health and Welfare, *Annual Report 2013-14*, p. 33

4 Cancer Australia, *Annual Report 2013-14*, pp 25-26

5 Cancer Australia, *Annual Report 2013-14*, p. 27

6 Cancer Australia, *Annual Report 2013-14*, pp 28-30

7 Cancer Australia, *Annual Report 2013-14*, pp 109-110

8 Food Standards Australia, *Annual Report 2013-14*, p. 22

presented in a clear and easy to follow format. Food Standards Australia was also able to adhere to their strategic imperatives throughout the reporting period. This allowed for the progression towards meeting the aims of the Government through program 1.1.<sup>9</sup> This also allowed a gain in comprehensive income of approximately \$600,000.<sup>10</sup>

2.11 The outlook for the 2014-15 reporting period will be focused on finding cost-effective ways of meeting obligations. The committee notes that the report could be improved through a more comprehensive discussion of the workforce planning for the future, as well as a more substantive discussion on the overall financial performance over the period.

### ***Health Workforce Australia***

2.12 Health Workforce Australia (HWA) produced their final annual report that covers the period 1 July 2013 to 7 October 2014. HWA met the reporting requirements of the *Commonwealth Authorities and Companies Act 1997*. HWA outlines their performance against the reporting requirements in an easy to follow index.<sup>11</sup> HWA also performed well against their key domains, with sufficient information provided on how these were achieved. HWA released seven reports as part of Australia's Health Workforce series. These reports provide a spotlight on a variety of Australia's health workforce, ranging from Dietitians to Podiatrists and present data from a range of sources, which help to shape an understanding of a particular profession or sector in the health workforce.<sup>12</sup>

2.13 HWA outlines comprehensively their ongoing and completed projects and reports.<sup>13</sup> These have allowed HWA to increase their overall closing balance.<sup>14</sup> HWA also provides extensive detail on their financial statements and a comprehensive outline of the HWA board members. Various important developments were also undertaken by HWA for Aboriginal and Torres Strait islander peoples, which have supported Aboriginal and Torres Strait islander Health workers.<sup>15</sup>

2.14 The committee notes that the report could be improved with a more thorough discussion of their performance against the key domains, particularly the performance by their projects in achieving these.

### ***National Blood Authority***

2.15 The committee notes that the National Blood Authority (NBA) produced a high quality annual report and the performance of the authority for the year is also to be commended. The NBA met or exceeded seven out of eight key performance

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9 Food Standards Australia, *Annual Report 2013-14*, p. 20

10 Food Standards Australia, *Annual Report 2013-14*, p. 125

11 Health Workforce Australia, *Annual Report 2013-14*, pp 31-33

12 Health Workforce Australia, *Annual Report 2013-14*, pp 9-10

13 Health Workforce Australia, *Annual Report 2013-14*, pp 9-20

14 Health Workforce Australia, *Annual Report 2013-14*, p. 40

15 Health Workforce Australia, *Annual Report 2013-14*, pp 18-20

indicators and partially met the eighth.<sup>16</sup> The structure of the report is clear and easy to follow, with logical and detailed information on reporting requirements.

2.16 The NBA achieved a record saving in the supply of blood budget of \$138 million (approximately 12.5 per cent). This was largely achieved through improved supply performance and efficiency and appropriate use of fresh products resulting in a corresponding reduction in demand.<sup>17</sup> The report also contains detailed information and discussions on each of their key performance indicators, covering all aspects required to achieve these.

2.17 The outlook for 2014–15 for the NBA includes focussing on the merger with the Australian Organ and Tissue Donation and Transplantation Authority, where administrative activities will be consolidated as well as 'a range of national coordination and contracting activities'.<sup>18</sup>

2.18 The NBA should be commended on the volume and detail of information provided in the report. All reporting requirements were met and substantial information is provided on operations.

### ***National Mental Health Commission***

2.19 In January 2014 the NMHC was tasked with undertaking a national review of mental health services and programs by the Minister for Health, The Hon. Peter Dutton, MP. The report was due by 30 November 2014. The NMHC engaged with a wide range of stakeholders and received 1800 submissions during the process. The Commission took a population approach to the review, with a focus on the principles of a contributing life, as outlined in the NMHC's *A Contributing Life: the 2012 National Report Card*.

2.20 The committee notes that the annual report for the National Mental Health Commission (NMHC) may not meet several mandatory requirements. In most incidences there is some mention of the requirement either in the report or in the index but more information would assist the committee in examination of future annual reports. The committee suggest that more information be included in the following areas:

- 11(2) trend information;
- 11(7) agency resource statement in the required format;
- 12(4) external scrutiny reporting;
- 12(7) statistics on staffing;
- 12(8) enterprise or collective agreements, Individual Flexibility Agreements, determinations, common law contracts and Alternative Work Arrangements; and

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16 National Blood Authority, *Annual Report 2013–14*, pp 18–19

17 National Blood Authority, *Annual Report 2013–14*, p. 8

18 National Blood Authority, *Annual Report 2013–14*, p. 11

- 12(13)-(22) a summary statement of consultancy contracts and a directive to the AusTender website.

It was also observed that in the instances where the NMHC did not have anything of detail to report on a particular requirement under the FMA Act, that the only reference to this requirement was in the index. The report would be improved by a statement within the body of the report that refers to the requirement in such cases. For example, the inclusion of a short statement indicating that the NMHC did not administer any grant programs for the financial year. This would provide a better insight into the work of the agency.

**Senator Zed Seselja**

**Chair**

