

Financial Statements

Financial Year ended 30 June 2025

Board member's, accountable officer's, and chief finance & accounting officer's declaration

The attached financial statements for Beechworth Health Service have been prepared in accordance with Direction 5.2 of the Standing Directions of the Minister for Finance under the *Financial Management Act 1994*, applicable Financial Reporting Directions, Australian Accounting Standards including Interpretations, and other mandatory professional reporting requirements.

We further state that, in our opinion, the information set out in the comprehensive operating statement, balance sheet, statement of changes in equity, cash flow statement and accompanying notes, presents fairly the financial transactions during the year ended 30 June 2025 and the financial position of Beechworth Health Service at 30 June 2025.

At the time of signing, we are not aware of any circumstance which would render any particulars included in the financial statements to be misleading or inaccurate.

We authorise the attached financial statements for issue on 28th of August, 2025.

Board member



Dr Isabel Paton

Chair

Beechworth

28th of August, 2025

Accountable Officer



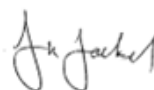
Ms Sharon Walsh

Chief Executive Officer

Beechworth

28th of August, 2025

Chief Finance & Accounting Officer



Mr Steven Jackel

Chief Finance and Accounting Officer

Beechworth

28th of August, 2025

Comprehensive Operating Statement
Beechworth Health Service
For the Financial Year Ended 30 June 2025

		2025	2024
	Note	\$'000	\$'000
Revenue and income from transactions			
Revenue from contracts with customers	2.1	11,565	11,277
Other sources of income	2.1	9,786	9,835
Non-operating activities		796	665
Total revenue and income from transactions		22,147	21,777
Expenses from transactions			
Employee expenses	3.1	(15,647)	(14,692)
Depreciation	4.1(a)	(2,747)	(1,599)
Other operating expenses	3.1	(4,844)	(5,039)
Total expenses from transactions		(23,238)	(21,330)
Net result from transactions - net operating balance		(1,091)	447
Other economic flows included in net result			
Net gain/(loss) on sale of non-financial assets		(1)	-
Net gain/(loss) on financial instruments		(96)	-
Other gain/(loss) from other economic flows		4	58
Total other economic flows included in net result		(93)	58
Net result		(1,184)	505
Other economic flows - other comprehensive income			
Items that will not be reclassified to net result			
Changes in property, plant and equipment revaluation surplus		-	13,355
Total other comprehensive income		-	13,355
Comprehensive result		(1,184)	13,860

This Statement should be read in conjunction with the accompanying notes.

Balance Sheet
Beechworth Health Service
As at 30 June 2025

		2025	2024
	Note	\$'000	\$'000
Financial assets			
Cash and cash equivalents	6.1	12,316	12,825
Receivables	5.1	1,965	1,653
Contract assets		-	72
Total financial assets		14,281	14,550
Non-financial assets			
Prepayments		184	224
Inventories		178	166
Property, plant and equipment	4.1	38,634	38,897
Intangible assets		-	1
Total non-financial assets		38,996	39,288
Total assets		53,277	53,838
Liabilities			
Payables	5.2	1,937	2,259
Contract liabilities		75	-
Borrowings		87	56
Employee benefits	3.1(b)	3,591	3,279
Other liabilities	5.3	9,467	8,940
Total liabilities		15,157	14,534
Net assets		38,120	39,304
Equity			
Reserves		36,061	36,061
Contributed capital		8,311	8,311
Accumulated surplus/(deficit)		(6,252)	(5,068)
Total equity		38,120	39,304

This Statement should be read in conjunction with the accompanying notes.

Cash Flow Statement
Beechworth Health Service
For the Financial Year Ended 30 June 2025

Note	2025 \$'000	2024 \$'000
Cash flows from operating activities		
Operating grants from State Government	7,041	8,022
Operating grants from Commonwealth Government	7,879	7,560
Capital grants from State Government	1,053	942
Commercial activity revenue received	1,334	1,325
GST received from ATO	486	499
Interest and investment income received	796	665
Other receipts	2,995	2,858
Total receipts	21,584	21,871
Payments to employees	(15,431)	(13,968)
Payments to suppliers and consumables	(2,255)	(2,690)
GST paid to ATO	(468)	(582)
Other payments	(2,100)	(2,842)
Total payments	(20,254)	(20,082)
Net cash flows from/(used in) operating activities	1,330	1,789
Cash flows from investing activities		
Purchase of non-financial assets	(2,430)	(1,271)
Net cash flows from/(used in) investing activities	(2,430)	(1,271)
Cash flows from financing activities		
Repayment of borrowings and principal portion of lease liabilities	(24)	(26)
Repayment of accommodation deposits	(3,777)	(3,719)
Receipt of accommodation deposits	4,392	3,355
Net cash flows from/(used in) financing activities	591	(390)
Net increase/(decrease) in cash and cash equivalents held	(509)	128
Cash and cash equivalents at beginning of year	12,825	12,697
Cash and cash equivalents at end of year	12,316	12,825

This Statement should be read in conjunction with the accompanying notes.

Statement of Changes in Equity
Beechworth Health Service
For the Financial Year Ended 30 June 2025

	Property, Plant and Equipment Revaluation Surplus \$'000	Contributed Capital \$'000	Accumulated Surplus/(Deficit) \$'000	Total \$'000
Balance at 1 July 2023	22,706	8,311	(5,573)	25,444
Net result for the year	-	-	505	505
Other comprehensive income for the year	13,355	-	-	13,355
Balance at 30 June 2024	36,061	8,311	(5,068)	39,304
Net result for the year	-	-	(1,184)	(1,184)
Balance at 30 June 2025	36,061	8,311	(6,252)	38,120

This Statement should be read in conjunction with the accompanying notes.

Notes to the Financial Statements
Beechworth Health Service
For the Financial Year Ended 30 June 2025

Structure

- 1.1 Basis of preparation**
- 1.2 Material accounting estimates and judgements**
- 1.3 Reporting entity**
- 1.4 Economic dependency**

Note 1 About this Report

These financial statements represent the financial statements of Beechworth Health Service for the year ended 30 June 2025.

Beechworth Health Service is a not-for-profit entity established as a public agency under the *Health Services Act 1988 (Vic)*. A description of the nature of its operations and its principal activities is included in the Report of Operations, which does not form part of these financial statements.

This section explains the basis of preparing the financial statements.

Note 1.1 Basis of preparation

These financial statements are general purpose financial statements which have been prepared in accordance with AASB 1060 *General Purpose Financial Statements – Simplified Disclosures for For-Profit and Not-for-Profit Tier 2 Entities* (AASB 1060) and Financial Reporting Direction 101 *Application of Tiers of Australian Accounting Standards* (FRD 101).

Beechworth Health Service is a Tier 2 entity in accordance with FRD 101. These financial statements are the first general purpose financial statements prepared in accordance with Australian Accounting Standards – Simplified Disclosures. Beechworth Health Service's prior year financial statements were general purpose financial statements prepared in accordance with Australian Accounting Standards (Tier 1). As Beechworth Health Service is not a 'significant entity' as defined in FRD 101, it was required to change from Tier 1 to Tier 2 reporting effective from 1 July 2024.

These general purpose financial statements have been prepared in accordance with the *Financial Management Act 1994* and applicable Australian Accounting Standards (AASs), which include interpretations, issued by the Australian Accounting Standards Board (AASB).

Where appropriate, those AASs paragraphs applicable to not-for-profit entities have been applied. Accounting policies selected and applied in these financial statements ensure the resulting financial information satisfies the concepts of relevance and reliability, thereby ensuring that the substance of the underlying transactions or other events is reported.

The accrual basis of accounting has been applied in preparing these financial statements, whereby assets, liabilities, equity, income and expenses are recognised in the reporting period to which they relate, regardless of when cash is received or paid.

Notes to the Financial Statements

Beechworth Health Service

For the Financial Year Ended 30 June 2025

Consistent with the requirements of AASB 1004 *Contributions*, contributions by owners (that is, contributed capital and its repayment) are treated as equity transactions and, therefore, do not form part of the income and expenses of Beechworth Health Service.

The financial statements have been prepared on a going concern basis (refer to Note 1.4 Economic Dependency).

The financial statements are presented in Australian dollars.

The amounts presented in the financial statements have been rounded to the nearest thousand dollars. Minor discrepancies in tables between totals and sum of components are due to rounding.

The annual financial statements were authorised for issue by the Board of Beechworth Health Service on the 28th of August, 2025.

Note 1.2 Material accounting estimates and judgements

Management makes estimates and judgements when preparing the financial statements.

These estimates and judgements are based on historical knowledge and the best available current information and assume any reasonable expectation of future events. Actual results may differ.

Revisions to estimates are recognised in the period in which the estimate is revised and also in future periods that are affected by the revision.

The material accounting judgements and estimates used, and any changes thereto, are disclosed within the relevant accounting policy.

Note 1.3 Reporting Entity

The financial statements include all the controlled activities of Beechworth Health Service.

Beechworth Health Service's principal address is:

52 Sydney Road
Beechworth, Victoria, 3747

Note 1.4 Economic dependency

Beechworth Health Service is a public health service governed and managed in accordance with the *Health Services Act 1988* and its results form part of the Victorian General Government consolidated financial position. Beechworth Health Service provides essential services and is predominantly dependent on the continued financial support of the State Government, particularly the Department of Health, and the Commonwealth funding via the National Health Reform Agreement (NHRA). The State of Victoria plans to continue Beechworth Health Services operations and on that basis, the financial statements have been prepared on a going concern basis.

Notes to the Financial Statements
Beechworth Health Service
For the Financial Year Ended 30 June 2025

Note 2 Funding delivery of our services

Beechworth Health Service's overall objective is to provide quality health service that support and enhance the wellbeing of all Victorians. Beechworth Health Service is predominantly funded by grant funding for the provision of outputs. Beechworth Health Service also receives income from the supply of services.

Structure

2.1 Revenue and income from transactions

Note 2.1 Revenue and income from transactions

		2025	2024
	Note	\$'000	\$'000
Revenue from contracts with customers	2.1(a)	11,565	11,277
Other sources of income	2.1(b)	10,582	10,500
Total revenue and income from transactions		22,147	21,777

Note 2.1(a) Revenue from contracts with customers

	2025	2024
	\$'000	\$'000
Government grants (State) - Operating	19	150
Government grants (Commonwealth) - Operating	7,866	7,544
Patient and resident fees	2,346	2,289
Commercial activities	1,334	1,294
Total revenue from contracts with customers	11,565	11,277

How we recognise revenue from contracts with customers

Government grants

Revenue from government operating grants that are enforceable and contain sufficiently specific performance obligations are accounted for as revenue from contracts with customers under AASB 15.

In contracts with customers, the 'customer' is the funding body, who is the party that promises funding in exchange for Beechworth Health Service's goods or services. Beechworth Health Services funding bodies often direct that goods or services are to be provided to third party beneficiaries, including individuals or the community at large. In such instances, the customer remains the funding body that has funded the program or activity, however the delivery of goods or services to third party beneficiaries is a characteristic of the promised good or service being transferred to the funding body.

This policy applies to each of Beechworth Health Service's revenue streams, with information detailed below relating to Beechworth Health Service's material revenue streams:

Notes to the Financial Statements
Beechworth Health Service
For the Financial Year Ended 30 June 2025

Government grant	Performance obligation
Activity Based Funding (ABF) paid as National Weighted Activity Unit (NWAU)	<p>NWAU is a measure of health service activity expressed as a common unit against which the national efficient price (NEP) is paid.</p> <p>The performance obligations for NWAU are the number and mix of admissions, emergency department presentations and outpatient episodes, and is weighted for clinical complexity.</p> <p>Revenue is recognised at a point in time, which is when a patient is discharged.</p>
Commonwealth Residential Aged Care Grants	<p>Funding is provided for the provision of care for aged care residents within facilities at Beechworth Health Service.</p> <p>The performance obligations include provision of residential accommodation and care from nursing staff and personal care workers.</p> <p>Revenue is recognised over time when the service is provided within the residential aged care facility.</p>

Patient and resident fees

Patient and resident fees are charges incurred by patients for services they receive. Patient and resident fees are recognised under AASB 15 at a point in time when the performance obligation, the provision of services, is satisfied, except where the patient and resident fees relate to accommodation charges. Accommodation charges are calculated daily and are recognised over time, to reflect the period accommodation is provided.

Notes to the Financial Statements
Beechworth Health Service
For the Financial Year Ended 30 June 2025

Note 2.1(b) Other sources of income

Note	2025 \$'000	2024 \$'000
Government grants (State) - Operating	7,552	8,424
Government grants (Commonwealth) - Operating	13	16
Government grants (State) - Capital	1,053	590
Other capital purpose income	205	125
Assets received free of charge or for nominal consideration	34	89
Other income from operating activities	929	591
Interest Income	796	665
Total other sources of income	10,582	10,500

How we recognise other sources of income

Government grants

Beechworth Health Service recognises income of not-for-profit entities under AASB 1058 where it has been earned under arrangements that are either not enforceable or linked to sufficiently specific performance obligations.

Income from grants without any sufficiently specific performance obligations or that are not enforceable, is recognised when Beechworth Health Service has an unconditional right to receive cash which usually coincides with receipt of cash. On initial recognition of the asset, Beechworth Health Service recognises any related contributions by owners, increases in liabilities, decreases in assets or revenue (related amounts) in accordance with other Australian Accounting Standards. Related amounts may take the form of:

- contributions by owners, in accordance with AASB 1004 *Contributions*
- revenue or contract liability arising from a contract with a customer, in accordance with AASB 15
- a lease liability in accordance with AASB 16 *Leases*
- a financial instrument, in accordance with AASB 9 *Financial Instruments*
- a provision, in accordance with AASB 137 *Provisions, Contingent Liabilities and Contingent Assets*.

Capital grants

Where Beechworth Health Service receives a capital grant it recognises a liability, equal to the financial asset received less amounts recognised under other Australian Accounting Standards.

Income is recognised in accordance with AASB 1058 progressively as the asset is constructed which aligns with Beechworth Health Service's obligation to construct the asset. The progressive percentage of costs incurred is used to recognise income, as this most accurately reflects the stage of completion.

Notes to the Financial Statements
Beechworth Health Service
For the Financial Year Ended 30 June 2025

Note 3 The cost of delivering our services

This section provides an account of the expenses incurred by the health service in delivering services and outputs. In Section 2, the funds that enable the provision of services were disclosed and in this note the costs associated with the provision of services are disclosed.

Structure

3.1 Expenses incurred in the delivery of services

Note 3.1 Expenses incurred in the delivery of services

	2025	2024
Note	\$'000	\$'000
Employee expenses	15,647	14,692
Other operating expenses	4,844	5,039
Total expenses incurred in the delivery of services	20,491	19,731

Note 3.1(a) Employee expenses

	2025	2024
	\$'000	\$'000
Salaries and wages	13,658	12,659
Defined contribution superannuation expense	1,432	1,287
Agency expenses	276	544
Fee for service medical officer expenses	281	202
Total employee expenses	15,647	14,692

How we recognise employee expenses

Employee expenses include salaries and wages, fringe benefits tax, leave entitlements, termination payments, WorkCover payments and agency expenses.

The amount recognised in relation to superannuation is employer contributions for members of defined contribution superannuation plans that are paid or payable during the reporting period.

Notes to the Financial Statements
Beechworth Health Service
For the Financial Year Ended 30 June 2025

Note 3.1(b) Employee related provisions

	2025	2024
	\$'000	\$'000
Current provisions for employee benefits		
Accrued days off	33	29
Annual leave	1,542	1,338
Long service leave	1,223	1,235
Provision for on-costs	427	393
Total current provisions for employee benefits	3,225	2,995
Non-current provisions for employee benefits		
Long service leave	319	248
Provision for on-costs	47	36
Total non-current provisions for employee benefits	366	284
Total provisions for employee benefits	3,591	3,279

How we recognise employee-related provisions

Employee related provisions are accrued for employees in respect of accrued days off, annual leave and long service leave, for services rendered to the reporting date.

No provision has been made for sick leave as all sick leave is non-vesting and it is not considered probable that the average sick leave taken in the future will be greater than the benefits accrued in the future. As sick leave is non-vesting, an expense is recognised in the Statement of Comprehensive Income as sick leave is taken.

Annual leave and accrued days off

Liabilities for annual leave and accrued days off are recognised in the provision for employee benefits as current liabilities because Beechworth Health Service does not have an unconditional right to defer settlement of these liabilities.

Depending on the expectation of the timing of settlement, liabilities for annual leave and accrued days off are measured at:

- nominal value – if Beechworth Health Service expects to wholly settle within 12 months or
- present value – if Beechworth Health Service does not expect to wholly settle within 12 months.

Notes to the Financial Statements
Beechworth Health Service
For the Financial Year Ended 30 June 2025

Long service leave

The liability for long service leave (LSL) is recognised in the provision for employee benefits.

Unconditional LSL is disclosed in the notes to the financial statements as a current liability even where the Beechworth Health Service does not expect to settle the liability within 12 months because it will not have the unconditional right to defer the settlement of the entitlement should an employee take leave within 12 months. An unconditional right arises after a qualifying period.

The components of this current LSL liability are measured at:

- nominal value – if Beechworth Health Service expects to wholly settle within 12 months or
- present value – if Beechworth Health Service does not expect to wholly settle within 12 months.

Conditional LSL is measured at present value and is disclosed as a non-current liability. There is a conditional right to defer the settlement of the entitlement until the employee has completed the requisite years of service.

Provisions

Employment on-costs such as payroll tax, workers compensation and superannuation are not employee benefits. They are disclosed separately as a component of the provision for employee benefits when the employment to which they relate has occurred.

Notes to the Financial Statements
Beechworth Health Service
For the Financial Year Ended 30 June 2025

Note 3.1(c) Other expenses

	2025	2024
	\$'000	\$'000
Other operating expenses		
Drug supplies	88	138
Medical and surgical supplies (including Prostheses)	349	314
Diagnostic and radiology supplies	199	9
Other supplies and consumables	1,253	1,061
Fuel, light, power and water	278	290
Repairs, maintenance and replacements	364	608
Maintenance contracts	120	120
Medical indemnity insurance	161	146
Information technology and communication	1,383	920
Grant funded program overhead expenses	17	659
Administration expenses	632	774
Total other operating expenses	4,844	5,039

How we recognise other operating expenses

Expense recognition

Expenses are recognised as they are incurred and reported in the financial year to which they relate.

Supplies and consumables

Supplies and consumable costs are recognised as an expense in the reporting period in which they are incurred. The carrying amounts of any inventories held for distribution are expensed when distributed.

Other operating expenses

Other operating expenses generally represent the day-to-day running costs incurred in normal operations.

The DH also makes certain payments on behalf of Beechworth Health Service. These amounts have been brought to account in determining the operating result for the year, by recording them as revenue and recording a corresponding expense.

Notes to the Financial Statements
Beechworth Health Service
For the Financial Year Ended 30 June 2025

Note 4 Key assets to support service delivery

Beechworth Health Service controls infrastructure and other investments that are utilised in fulfilling its objectives and conducting its activities. They represent the key resources that have been entrusted to Beechworth Health Service to be utilised for delivery of services.

Structure

4.1 Property, plant and equipment

4.2 Depreciation and amortisation

Note 4.1 Property, plant and equipment

	Gross carrying amount		Accumulated depreciation		Net carrying amount	
	2025 \$'000	2024 \$'000	2025 \$'000	2024 \$'000	2025 \$'000	2024 \$'000
Land at fair value - Freehold	2,575	2,575	-	-	2,575	2,575
Buildings at fair value	34,412	34,412	(2,477)	-	31,935	34,412
Works in progress at cost	2,671	416	-	-	2,671	416
Plant, equipment and vehicles at fair value	4,438	4,210	(2,985)	(2,716)	1,453	1,494
Total property, plant and equipment	44,096	41,613	(5,462)	(2,716)	38,634	38,897

How we recognise property, plant and equipment

Items of property, plant and equipment are initially measured at cost, and are subsequently measured at fair value less accumulated depreciation and impairment. Where an asset is acquired for no or nominal cost, being far below the fair value of the asset, the deemed cost is its fair value at the date of acquisition. Assets transferred as part of an amalgamation/machinery of government change are transferred at their carrying amounts.

The cost of constructed non-financial physical assets includes the cost of all materials used in construction, direct labour on the project and an appropriate proportion of variable and fixed overheads.

Notes to the Financial Statements
Beechworth Health Service
For the Financial Year Ended 30 June 2025

Note 4.1(a) Reconciliation of the carrying amounts of each class of asset

	Land \$'000	Buildings \$'000	Works in progress \$'000	Plant, equipment and vehicles \$'000	Total \$'000
Balance at 1 July 2024	2,575	34,412	416	1,494	38,897
Additions	-	-	2,255	229	2,484
Depreciation	-	(2,477)	-	(270)	(2,747)
Balance at 30 June 2025	2,575	31,935	2,671	1,453	38,634

Fair value assessments have been performed for all classes of assets in this purpose group and the decision was made that the movements were not material (less than or equal to 10%). As such, an independent revaluation was not required per FRD 103. In accordance with FRD 103, Beechworth Health Service has elected to apply the practical expedient in FRD 103 Non-Financial Physical Assets and has therefore not applied the amendments to AASB 13 Fair Value Measurement. The amendments to AASB 13 will be applied at the next scheduled independent revaluation, which is planned to be undertaken in 2029, in accordance with Beechworth Health Service's revaluation cycle.

Notes to the Financial Statements
Beechworth Health Service
For the Financial Year Ended 30 June 2025

Note 4.1(b) Right-of-use assets included in property, plant and equipment

The following tables are right-of-use assets included in the property, plant and equipment balance, presented by subsets of buildings and plant and equipment.

	Gross carrying amount		Accumulated depreciation		Net carrying amount	
	2025 \$'000	2024 \$'000	2025 \$'000	2024 \$'000	2025 \$'000	2024 \$'000
Plant, equipment and vehicles at fair value	79	27	(17)	(14)	62	13
Total right-of-use assets	79	27	(17)	(14)	62	13

	Plant, equipment and vehicles		Total
	\$'000	\$'000	
Balance at 1 July 2024	13	13	13
Additions	52		52
Depreciation	(3)		(3)
Balance at 30 June 2025	62	62	62

How we recognise right-of-use assets

Initial recognition

When Beechworth Health Service enters a contract, which provides the health services with the right to control the use of an identified asset for a period of time in exchange for payment, this contract is considered a lease.

Unless the lease is considered a short-term lease or a lease of a low-value asset the contract gives rise to a right-of-use asset and corresponding lease liability.

Notes to the Financial Statements

Beechworth Health Service

For the Financial Year Ended 30 June 2025

The right-of-use asset is initially measured at cost and comprises the initial measurement of the corresponding lease liability, adjusted for:

- any lease payments made at or before the commencement date
- any initial direct costs incurred and
- an estimate of costs to dismantle and remove the underlying asset or to restore the underlying asset or the site on which it is located, less any lease incentive received.

Subsequent measurement

Right-of-use assets are subsequently measured at fair value, with the exception of right-of-use assets arising from leases with significantly below-market terms and conditions, which are subsequently measured at cost, less accumulated depreciation and accumulated impairment losses where applicable.

Beechworth Health Service has applied the exemption permitted under FRD 104 Leases, consistent with the optional relief in AASB 16.Aus25.1. Under this exemption, Beechworth Health Service is not required to apply fair value measurement requirements to right-of-use assets arising from leases with significantly below-market terms and conditions, where those leases are entered into principally to enable the entity to further its objectives.

Right-of-use assets are also adjusted for certain remeasurements of the lease liability (for example, when a variable lease payment based on an index or rate becomes effective).

Further information regarding fair value measurement is disclosed in Note 7.3.

4.1(c) Impairment of property, plant and equipment

The recoverable amount of the primarily non-financial physical assets of Beechworth Health Service, 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*, with the consequence that AASB 136 *Impairment of Assets* does not apply to such assets that are regularly revalued.

Notes to the Financial Statements
Beechworth Health Service
For the Financial Year Ended 30 June 2025

Note 4.2 Depreciation and amortisation

How we recognise depreciation

All buildings, plant and equipment and other non-financial physical assets that have finite useful lives are depreciated. Depreciation is generally calculated on a straight-line basis at rates that allocate the asset's value, less any estimated residual value over its estimated useful life.

Right-of-use assets are depreciated over the lease term or useful life of the underlying asset, whichever is the shortest. Where a lease transfers ownership of the underlying asset or the cost of the right-of-use asset reflects that the health service anticipates exercising a purchase option, the specific right-of-use asset is depreciated over the useful life of the underlying asset.

How we recognise amortisation

Amortisation is the systematic allocation of the depreciable amount of an asset over its useful life.

Useful lives of non-current assets

The following table indicates the expected useful lives of non-current assets on which the depreciation and amortisation charges are based.

	2025	2024
Buildings	7 - 31 years	7 - 36 years
Plant, equipment and vehicles (including leased assets)	3 - 20 years	3 - 13 years

Notes to the Financial Statements
Beechworth Health Service
For the Financial Year Ended 30 June 2025

Note 5 Other assets and liabilities

This section sets out those assets and liabilities that arose from Beechworth Health Service's operations.

Structure

5.1 Receivables

5.2 Payables

5.3 Other liabilities

Note 5.1 Receivables

Note	2025 \$'000	2024 \$'000
Current receivables		
Contractual		
Inter hospital debtors	522	269
Trade receivables	273	164
Patient fees	477	278
Allowance for impairment losses	(126)	(32)
Accrued revenue	113	164
Amounts receivable from governments and agencies	14	18
Total contractual receivables	1,273	861
Statutory		
GST receivable	172	190
Total statutory receivables	172	190
Total current receivables	1,445	1,051
Non-current receivables		
Contractual		
Long service leave - Department of Health	520	602
Total contractual receivables	520	602
Total non-current receivables	520	602
Total receivables	1,965	1,653
<i>(i) Financial assets classified as receivables</i>		
Total receivables	1,965	1,653
GST receivable	(172)	(190)
Total financial assets classified as receivables	7.1 1,793	1,463

Notes to the Financial Statements
Beechworth Health Service
For the Financial Year Ended 30 June 2025

How we recognise receivables

Receivables consist of:

- **Contractual receivables**, including debtors that relate to goods and services. These receivables are classified as financial instruments and are categorised as 'financial assets at amortised cost'. They are initially recognised at fair value plus any directly attributable transaction costs. The health service holds contractual receivables with the objective to collect the contractual cash flows and therefore they are subsequently measured at amortised cost using the effective interest method, less any impairment.
- **Statutory receivables**, including Goods and Services Tax (GST) input tax credits that are recoverable. Statutory receivables do not arise from contracts and are recognised and measured similarly to contractual receivables (except for impairment) but are not classified as financial instruments for disclosure purposes. The health service applies AASB 9 for initial measurement of the statutory receivables and as a result, statutory receivables are initially recognised at fair value plus any directly attributable transaction cost.

Notes to the Financial Statements
Beechworth Health Service
For the Financial Year Ended 30 June 2025

Note 5.2 Payables

	2025	2024
Note	\$'000	\$'000
Current payables		
Contractual		
Trade creditors	1,122	485
Accrued salaries and wages	569	637
Accrued expenses	107	133
Deferred capital grant income	-	763
Inter hospital creditors	24	104
Amounts payable to governments and agencies	65	55
Total contractual payables	1,887	2,177
Statutory		
GST Payable	50	82
Total statutory payables	50	82
Total current payables	1,937	2,259
Total payables	1,937	2,259
<i>(i) Financial liabilities classified as payables</i>		
Total payables	1,937	2,259
Deferred grant income	-	(763)
GST payable	(50)	(82)
Total financial liabilities classified as payables	1,887	1,414

How we recognise payables

Payables consist of:

- **Contractual payables**, including payables that relate to the purchase of goods and services. These payables are classified as financial instruments and measured at amortised cost. Accounts payable and salaries and wages payable represent liabilities for goods and services provided to the Beechworth Health Service prior to the end of the financial year that are unpaid.
- **Statutory payables**, including Goods and Services Tax (GST) payable are recognised and measured similarly to contractual payables but are not classified as financial instruments and not included in the category of financial liabilities at amortised cost, because they do not arise from contracts.

The normal credit terms for accounts payable are usually Net 60 days.

Notes to the Financial Statements
Beechworth Health Service
For the Financial Year Ended 30 June 2025

Note 5.3(a) Movement in deferred capital grant income

	2025	2024
	\$'000	\$'000
Opening balance of deferred capital grant income	763	411
Grant consideration for capital works received during the year	-	942
Deferred capital grant income recognised as income due to completion of capital works	(763)	(590)
Closing balance of deferred capital grant income	-	763

How we recognise deferred capital grant income

Capital grant income is recognised progressively as the asset is constructed, since this is the time when Beechworth Health Service satisfies its obligations. The progressive percentage of costs incurred is used to recognise income because this most closely reflects the percentage of completion of the building works. As a result, Beechworth Health Service has deferred recognition of a portion of the grant consideration received as a liability for the outstanding obligations.

Notes to the Financial Statements
Beechworth Health Service
For the Financial Year Ended 30 June 2025

Note 5.3 Other liabilities

Note	2025 \$'000	2024 \$'000
Current monies held in trust		
Patient monies	165	163
Refundable accommodation deposits	9,302	8,687
Other monies	-	90
Total current monies held in trust	9,467	8,940
Total other liabilities	9,467	8,940
* Represented by:		
- Cash assets	6.1 9,467	8,940
	9,467	8,940

How we recognise other liabilities

Refundable Accommodation Deposit (RAD)/Accommodation Bond liabilities

RADs/accommodation bonds are non-interest-bearing deposits made by some aged care residents to Beechworth Health Service upon admission. These deposits are liabilities which fall due and payable when the resident leaves the home.

RAD/accommodation bond liabilities are recorded at an amount equal to the proceeds received, net of retention and any other amounts deducted from the RAD/accommodation bond in accordance with the *Aged Care Act 1997*.

Notes to the Financial Statements
Beechworth Health Service
For the Financial Year Ended 30 June 2025

Note 6 How we finance our operations

This section provides information on the sources of finance utilised by Beechworth Health Service during its operations, along with interest expenses (the cost of borrowings) and other information related to financing activities of Beechworth Health Service.

This section includes disclosures of balances that are financial instruments (such as borrowings and cash balances). Note 7.1 provides additional, specific financial instrument disclosures.

Structure

6.1 Cash and cash equivalents

6.2 Commitments for expenditure

Note 6.1 Cash and Cash Equivalents

	2025	2024
Note	\$'000	\$'000
Cash on hand (excluding monies held in trust)	1	1
Cash at bank (excluding monies held in trust)	2,848	3,884
Total cash held for operations	2,849	3,885
Cash on hand (monies held in trust)	1	1
Cash at bank (monies held in trust)	9,466	8,939
Total cash held as monies in trust	9,467	8,940
Total cash and cash equivalents	12,316	12,825

7.1

Notes to the Financial Statements
Beechworth Health Service
For the Financial Year Ended 30 June 2025

Note 6.3 Commitments for expenditure

	Less than 1			
	year	1-5 Years	Over 5 years	Total
	\$'000	\$'000	\$'000	\$'000
30 June 2025				
Capital expenditure commitments	1,414	-	-	1,414
Operating expenditure commitments	638	-	-	638
Total commitments (inclusive of GST)	2,052	-	-	2,052
Less GST recoverable				(186)
Total commitments (exclusive of GST)				1,866
	Less than 1			
	year	1-5 Years	Over 5 years	Total
	\$'000	\$'000	\$'000	\$'000
30 June 2024				
Capital expenditure commitments	953	-	-	953
Operating expenditure commitments	459	-	-	459
Total commitments (inclusive of GST)	1,412	-	-	1,412
Less GST recoverable				(128)
Total commitments (exclusive of GST)				1,284

How we disclose our commitments

Our commitments relate to expenditure and short term and low value leases.

Expenditure commitments

Commitments for future expenditure include operating and capital commitments arising from contracts. These commitments are disclosed at their nominal value and are inclusive of the GST payable. In addition, where it is considered appropriate and provides additional relevant information to users, the net present values of significant projects are stated. These future expenditures cease to be disclosed as commitments once the related liabilities are recognised on the balance sheet.

Notes to the Financial Statements

Beechworth Health Service

For the Financial Year Ended 30 June 2025

Note 7 Financial instruments, contingencies and valuation judgements

Beechworth Health Service is exposed to risk from its activities and outside factors. In addition, it is often necessary to make judgements and estimates associated with recognition and measurement of items in the financial statements. This section sets out financial instrument specific information (including exposures to financial risks) as well as those items that are contingent in nature or require a higher level of judgement to be applied, which for the health service is related mainly to fair value determination.

Structure

7.1 Financial instruments

7.2 Contingent assets and contingent liabilities

7.3 Fair value determination

Notes to the Financial Statements
Beechworth Health Service
For the Financial Year Ended 30 June 2025

Note 7.1 Financial instruments

Financial instruments arise out of contractual agreements that give rise to a financial asset of one entity and a financial liability or equity instrument of another entity. Due to the nature of Beechworth Health Service's activities, certain financial assets and financial liabilities arise under statute rather than a contract (for example, taxes, fines and penalties). Such financial assets and financial liabilities do not meet the definition of financial instruments in AASB 132 Financial Instruments: Presentation.

			Total interest		
	Carrying amount	Net	income/	Fee income/	Impairment
30 June 2025	\$'000	gain/(loss)	(expense)	(expense)	loss
	\$'000	\$'000	\$'000	\$'000	\$'000
Financial assets at amortised cost					
Cash and cash equivalents	12,316	-	796	-	-
Receivables	1,793	-	-	-	-
Total financial assetsⁱ	14,109	-	796	-	-
Financial liabilities at amortised cost					
Payables	1,887	-	-	-	-
Borrowings	87	-	(2)	-	-
Other financial liabilities - Refundable Accommodation Deposits	9,302	-	-	-	-
Other financial liabilities - patient monies held in trust	165	-	-	-	-
Total financial liabilitiesⁱ	11,441	-	(2)	-	-

ⁱ The carrying amount excludes statutory receivables (i.e. GST receivable) and statutory payables (i.e. GST payable).

Notes to the Financial Statements
Beechworth Health Service
For the Financial Year Ended 30 June 2025

		Total interest			
	Carrying amount	Net	income/	Fee income/	Impairment
30 June 2024	\$'000	gain/(loss)	(expense)	(expense)	loss
Financial assets at amortised cost	\$'000	\$'000	\$'000	\$'000	\$'000
Cash and cash equivalents	12,825	-	665	-	-
Receivables	1,463	-	-	-	-
Total financial assetsⁱ	14,288	-	665	-	-
Financial liabilities at amortised cost					
Payables	1,414	-	-	-	-
Borrowings	56	-	-	-	-
Other financial liabilities - Refundable Accommodation Deposits	8,687	-	-	-	-
Other financial liabilities - patient monies held in trust	163	-	-	-	-
Total financial liabilitiesⁱ	10,320	-	-	-	-

ⁱ The carrying amount excludes statutory receivables (i.e. GST receivable) and statutory payables (i.e. GST payable).

Notes to the Financial Statements
Beechworth Health Service
For the Financial Year Ended 30 June 2025

How we categorise financial instruments

Financial assets at amortised cost

Financial assets are measured at amortised cost if both of the following criteria are met and the assets are not designated as fair value through net result:

- the assets are held by Beechworth Health Service solely to collect the contractual cash flows, and
- the assets' contractual terms give rise to cash flows that are solely payments of principal and interest on the principal amount outstanding on specific dates.

These assets are initially recognised at fair value plus any directly attributable transaction costs and are subsequently measured at amortised cost using the effective interest method less any impairment.

Beechworth Health Service recognises the following assets in this category:

- cash and deposits and
- receivables (excluding statutory receivables).

Categories of financial liabilities

Financial liabilities at amortised cost

Financial liabilities are measured at amortised cost using the effective interest method, where they are not held at fair value through net result.

The effective interest method is a method of calculating the amortised cost of a debt instrument and of allocating interest expense in net result over the relevant period. The effective interest is the internal rate of return of the financial asset or liability. That is, it is the rate that exactly discounts the estimated future cash flows through the expected life of the instrument to the net carrying amount at initial recognition.

Beechworth Health Service recognises the following liabilities in this category:

- payables (excluding statutory payables and contract liabilities)
- borrowings and
- other liabilities (including monies held in trust).

Notes to the Financial Statements
Beechworth Health Service
For the Financial Year Ended 30 June 2025

Derecognition of financial assets

A financial asset (or, where applicable, a part of a financial asset or part of a group of similar financial assets) is derecognised when:

- the rights to receive cash flows from the asset have expired, or
- Beechworth Health Service retains the right to receive cash flows from the asset, but has assumed an obligation to pay them in full without material delay to a third party under a 'pass through' arrangement or
- Beechworth Health Service has transferred its rights to receive cash flows from the asset and either:
 - has transferred substantially all the risks and rewards of the asset, or
 - has neither transferred nor retained substantially all the risks and rewards of the asset but has transferred control of the asset.

Where Beechworth Health Service has neither transferred nor retained substantially all the risks and rewards or transferred control, the asset is recognised to the extent of Beechworth Health Service's continuing involvement in the asset.

Derecognition of financial liabilities

A financial liability is derecognised when the obligation under the liability is discharged, cancelled or expires.

When an existing financial liability is replaced by another from the same lender on substantially different terms, or the terms of an existing liability are substantially modified, such an exchange or modification is treated as a derecognition of the original liability and the recognition of a new liability. The difference in the respective carrying amounts is recognised as an 'other economic flow' in the comprehensive operating statement.

Reclassification of financial instruments

A financial asset is required to be reclassified between amortised cost, fair value through net result and fair value through other comprehensive income when, and only when, Beechworth Health Service's business model for managing its financial assets has changed such that its previous model would no longer apply.

A financial liability reclassification is not permitted.

Notes to the Financial Statements
Beechworth Health Service
For the Financial Year Ended 30 June 2025

Note 7.2 Contingent assets and contingent liabilities

At balance date, the Board are not aware of any contingent assets or liabilities.

How we measure and disclose contingent assets and contingent liabilities

Contingent assets and contingent liabilities are not recognised in the balance sheet but are disclosed and, if quantifiable, are measured at nominal value.

Contingent assets and liabilities are presented inclusive of GST receivable or payable respectively.

Contingent assets

Contingent assets are possible assets that arise from past events, whose existence will be confirmed only by the occurrence or non-occurrence of one or more uncertain future events not wholly within the control of the health service.

These are classified as either quantifiable, where the potential economic benefit is known, or non-quantifiable.

Contingent liabilities

Contingent liabilities are:

- possible obligations that arise from past events, whose existence will be confirmed only by the occurrence or non-occurrence of one or more uncertain future events not wholly within the control of the health service, or
- present obligations that arise from past events but are not recognised because:
 - It is not probable that an outflow of resources embodying economic benefits will be required to settle the obligations or
 - the amount of the obligations cannot be measured with sufficient reliability.

Contingent liabilities are also classified as either quantifiable or non-quantifiable.

Notes to the Financial Statements

Beechworth Health Service

For the Financial Year Ended 30 June 2025

Note 7.3 Fair value determination

How we measure fair value

Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date.

The following assets and liabilities are carried at fair value:

- Property, plant and equipment and
- Right-of-use assets.

In addition, the fair value of other assets and liabilities that are carried at amortised cost, also need to be determined for disclosure.

Valuation hierarchy

In determining fair values, a number of inputs are used. To increase consistency and comparability in the financial statements, these inputs are categorised into three levels, also known as the fair value hierarchy. The levels are as follows:

- Level 1 – quoted (unadjusted) market prices in active markets for identical assets or liabilities
- Level 2 – valuation techniques for which the lowest level input that is significant to the fair value measurement is directly or indirectly observable, and
- Level 3 – valuation techniques for which the lowest level input that is significant to the fair value measurement is unobservable.

Beechworth Health Service determines whether transfers have occurred between levels in the hierarchy by reassessing categorisation (based on the lowest level input that is significant to the fair value measurement as a whole) at the end of each reporting period. There have been no transfers between levels during the period.

Beechworth Health Service monitors changes in the fair value of each asset and liability through relevant data sources to determine whether revaluation is required. The Valuer-General Victoria (VGV) is Beechworth Health Service's independent valuation agency for property, plant and equipment.

Fair value determination: non-financial physical assets

AASB 2010-10 Amendments to Australian Accounting Standards – Fair Value Measurement of Non-Financial Assets of Not-for-Profit Public Sector Entities amended AASB 13 *Fair Value Measurement* by adding Appendix F *Australian Implementation Guidance for Not-for-Profit Public Sector Entities*. Appendix F explains and illustrates the application of the principals in AASB 13 on developing unobservable inputs and the application of the cost approach. These clarifications are mandatorily applicable annual reporting periods beginning on or after 1 January 2024. FRD 103 permits Victorian public sector entities to apply Appendix F of AASB 13 in their next scheduled formal asset revaluation or interim revaluation process (whichever is earlier).

Notes to the Financial Statements
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The last scheduled full independent valuation of all of Beechworth Health Service's non-financial physical assets was performed by VGV on 30 June 2024. The annual fair value assessment for 30 June 2025 using VGV indices does not identify material changes in value. In accordance with FRD 103, Beechworth Health Service will reflect Appendix F in its next scheduled formal revaluation on 30 June 2029 or interim revaluation process (whichever is earlier). All annual fair value assessments thereafter will continue compliance with Appendix F.

For all assets measured at fair value, Beechworth Health Service considers the current use as its highest and best use.

Non-specialised land and non-specialised buildings

Non-specialised land, non-specialised buildings are valued using the market approach. Under this valuation method, the assets are compared to recent comparable sales or sales of comparable assets which are considered to have nominal or no added improvement value. From this analysis, an appropriate rate per square metre has been applied to the asset.

Specialised buildings

For Beechworth Health Service, the current replacement cost method is used for the majority of specialised buildings, adjusting for the associated depreciation.

Notes to the Financial Statements
Beechworth Health Service
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Vehicles

Vehicles are valued using the current replacement cost method. Beechworth Health Service acquires new vehicles and at times disposes of them before completion of their economic life. The process of acquisition, use and disposal in the market is managed by experienced fleet managers in Beechworth Health Services who set relevant depreciation rates during use to reflect the utilisation of the vehicles.

Furniture, fittings, plant and equipment

Furniture, fittings, plant and equipment (including medical equipment, computers and communication equipment) are held at fair value. When plant and equipment is specialised in use, such that it is rarely sold, fair value is determined using the current replacement cost method.

Significant assumptions

Asset class	Valuation technique	Significant assumption	Range (weighted average) ⁽ⁱ⁾
Specialised buildings	Current replacement cost approach	Cost per square metre Useful life	\$300 - \$4,740/m ² 7 - 31 years
Vehicles	Current replacement cost approach	Cost per unit Useful life	\$10,000 - \$89,000 8 years
Plant, equipment, furniture and fittings	Current replacement cost approach	Cost per unit Useful life	\$1,000 - \$178,000 3 - 20 years

⁽ⁱ⁾ Illustrations on the valuation techniques and significant assumptions and unobservable inputs are and indicator and should not be directly used without consultation with the health services independent valuer.

Note 8 Other disclosures

This section includes additional material disclosures required by accounting standards or otherwise, for the understanding of this financial report.

Structure

8.1 Responsible persons disclosures

8.2 Remuneration of executives

8.3 Related parties

8.4 Remuneration of auditors

8.5 Events occurring after the balance date

8.6 Joint arrangements

Notes to the Financial Statements
Beechworth Health Service
For the Financial Year Ended 30 June 2025

Note 8.1 Responsible persons disclosures

In accordance with the Ministerial Directions issued by the Minister for Finance under the *Financial Management Act 1994*, the following disclosures are made regarding responsible persons for the reporting period.

	Period
The Honourable Mary-Anne Thomas MP:	
Minister for Health	1 July 2024 - 30 June 2025
Minister for Ambulance Services	1 July 2024 - 30 June 2025
Minister for Health Infrastructure	1 July 2024 - 19 December 2024
The Honourable Ingrid Stitt MP:	
Minister for Mental Health	1 July 2024 - 30 June 2025
Minister for Ageing	1 July 2024 - 30 June 2025
The Honourable Lizzy Blandthorn MP:	
Minister for Children	1 July 2024 - 30 June 2025
Minister for Disability	1 July 2024 - 30 June 2025
The Honourable Melissa Horne MP:	
Minister for Health Infrastructure	19 December 2024 - 30 June 2025
Governing Boards	
Mr Donald Mace	1 Jul 2024 - 30 Jun 2025
Mr Harold Thomas	1 Jul 2024 - 30 Jun 2025
Ms Jennifer Bennett	1 Jul 2024 - 30 Jun 2025
Dr Tegwyn McManamny	1 Jul 2024 - 30 Jun 2025
Dr Isabel Paton	1 Jul 2024 - 30 Jun 2025
Ms Kim Rowley	1 Jul 2024 - 5 Dec 2024
Ms Natalie Willis	1 Jul 2024 - 30 Jun 2025
Ms Glenda Beecher	1 Jul 2024 - 30 Jun 2025
Ms Gael Evans-Barr	1 Jul 2024 - 30 Jun 2025
Mr Peter Kenyon	1 Jul 2024 - 30 Jun 2025
Accountable Officers	
Ms Susan Plath (Interim Chief Executive Officer)	1 Jul 2024 - 26 Jan 2025
Ms Sharon Walsh (Chief Executive Officer)	26 Jan 2025 - 30 Jun 2025

Notes to the Financial Statements
Beechworth Health Service
For the Financial Year Ended 30 June 2025

Remuneration of Responsible Persons

The number of Responsible Persons are shown in their relevant income bands:

Income Band	2025 No	2024 No
\$0 - \$9,999	10	10
\$10,000 - \$19,999	-	1
\$90,000 - \$99,999	1	-
\$120,000 - \$129,999	1	-
\$280,000 - \$289,999	-	1
Total Numbers	12	12
Total remuneration received or due and receivable by Responsible Persons from the reporting entity amounted to:	2025 \$'000	2024 \$'000
	272	335

Amounts relating to Responsible Ministers are reported within the State's Annual Financial Report.

Notes to the Financial Statements
Beechworth Health Service
For the Financial Year Ended 30 June 2025

Note 8.2 Remuneration of executives

The number of executive officers, other than Ministers and the Accountable Officer, and their total remuneration during the reporting period are shown in the table below. Total annualised employee equivalent provides a measure of full time equivalent executive officers over the reporting period.

Remuneration comprises employee benefits in all forms of consideration paid, payable or provided in exchange for services rendered. Accordingly, remuneration is determined on an accrual basis.

Several factors affected total remuneration payable to executives over the year. A number of employment contracts were completed and renegotiated, and a number of executive officers retired, resigned or were retrenched in the past year. This has had a significant impact on remuneration figures for the termination benefits category.

Remuneration of executives officers
(including Key Management Personnel disclosed in Note 8.3)

Total remuneration ⁱ

Total number of executives

Total annualised employee equivalent ⁱⁱ

Total Remuneration	
2025	2024
\$'000	\$'000
386	283
4	3
2.9	2.0

ⁱ The total number of executive officers includes persons who meet the definition of Key Management Personnel (KMP) of Beechworth Health Services under AASB 124 Related Party Disclosures and are also reported within Note 8.3 Related Parties.

ⁱⁱ Annualised employee equivalent is based on working 38 ordinary hours per week over the reporting period.

Notes to the Financial Statements

Beechworth Health Service

For the Financial Year Ended 30 June 2025

Note 8.3 Related parties

The Beechworth Health Service is a wholly owned and controlled entity of the State of Victoria. Related parties of the health service include:

- all key management personnel (KMP) and their close family members and personal business interests
- cabinet ministers (where applicable) and their close family members
- jointly controlled operations –the Hume Region Health Alliance and
- all health services and public sector entities that are controlled and consolidated into the State of Victoria financial statements.

Significant transactions with government related entities

The Beechworth Health Service received funding from the DH of \$8.59 m (2024: \$9.088 m) and indirect contributions of \$0.028 m (2024: \$0.076 m). Balances outstanding as at 30 June 2025 are \$Nil (2024: \$0.072 m).

Expenses incurred by Beechworth Health Service in delivering services are in accordance with HealthShare Victoria requirements. Goods and services including procurement, diagnostics, patient meals and multi-site operational support are provided by other Victorian Health Service Providers on commercial terms.

Professional medical indemnity insurance and other insurance products are obtained from the Victorian Managed Insurance Authority.

The Standing Directions of the Minister for Finance require the Beechworth Health Service to hold cash (in excess of working capital) in accordance with the State of Victoria's centralised banking arrangements. All borrowings are required to be sourced from Treasury Corporation Victoria unless an exemption has been approved by the Minister for Health and the Treasurer.

Key management personnel

KMPs are those people with the authority and responsibility for planning, directing and controlling the activities of the Beechworth Health Service and its controlled entities, directly or indirectly.

The Board of Directors and the Executive Directors of the Beechworth Health Service and its controlled entities are deemed to be KMPs. This includes the following:

Entity	KMPs	Position Title
Beechworth Health Service	Dr Isabel Paton	Chair of the Board
Beechworth Health Service	Mr Donald Mace	Board Member
Beechworth Health Service	Mr Harold Thomas	Board Member
Beechworth Health Service	Ms Kim Rowley	Board Member
Beechworth Health Service	Ms Jennifer Bennett	Board Member
Beechworth Health Service	Dr Tegwyn McManamny	Board Member
Beechworth Health Service	Ms Natalie Willis	Board Member
Beechworth Health Service	Ms Glenda Beecher	Board Member
Beechworth Health Service	Ms Gael Evans-Barr	Board Member
Beechworth Health Service	Mr Peter Kenyon	Board Member
Beechworth Health Service	Ms Sharon Walsh	Chief Executive Officer (from 26 Jan 2025)
Beechworth Health Service	Ms Susan Plath	Acting CEO/Director of Corporate Services
Beechworth Health Service	Ms Elizabeth Ibrom	Director of Clinical Services
Beechworth Health Service	Ms Dyan Hill	Director of People and Culture

Notes to the Financial Statements
Beechworth Health Service
For the Financial Year Ended 30 June 2025

The compensation detailed below excludes the salaries and benefits the Portfolio Ministers receive. The Minister's remuneration and allowances is set by the *Parliamentary Salaries and Superannuation Act 1968* and is reported within the State's Annual Report.

	2025	2024
	\$'000	\$'000
Total compensation - KMPs ⁱ	658	618

ⁱ KMPs are also reported in Note 8.1 Responsible Persons or Note 8.2 Remuneration of Executives.

Transactions with KMPs and other related parties

Given the breadth and depth of State government activities, related parties transact with the Victorian public sector in a manner consistent with other members of the public e.g. stamp duty and other government fees and charges. Further employment of processes within the Victorian public sector occurs on terms and conditions consistent with the *Public Administration Act 2004* and Codes of Conduct and Standards issued by the Victorian Public Sector Commission. Procurement processes occur on terms and conditions consistent with the HealthShare Victoria and Victorian Government Procurement Board requirements.

Outside of normal citizen type transactions with the Beechworth Health Service, there were no related party transactions that involved key management personnel, their close family members or their personal business interests. No provision has been required, nor any expense recognised, for impairment of receivables from related parties. There were no related party transactions with Cabinet Ministers required to be disclosed in 2025 (2024: none).

There were no related party transactions required to be disclosed for the Beechworth Health Service Board of Directors, Chief Executive Officer and Executive Directors in 2025 (2024: none).

Notes to the Financial Statements
Beechworth Health Service
For the Financial Year Ended 30 June 2025

Note 8.4 Remuneration of Auditors

Victorian Auditor-General's Office
Audit of the financial statements
Total remuneration of auditors

2025	2024
\$'000	\$'000
26	25
26	25

Note 8.5 Events occurring after the balance sheet date

There are no events occurring after the Balance Sheet date.

Notes to the Financial Statements
Beechworth Health Service
For the Financial Year Ended 30 June 2025

Note 8.6 Joint arrangements

	Principal Activity	Ownership Interest	
		2025 %	2024 %
Hume Region Health Alliance	Information Technology Services	4.7	4.64

	2025 \$'000	2024 \$'000
Total revenue and income	741	380
Total expenses	(845)	(369)
Total net result	(104)	11
Total other economic flows	-	-
Comprehensive result for the year	(104)	11
Total assets	810	681
Total liabilities	617	384
Total equity	193	297

Contingent liabilities and capital commitments

There are no known contingent liabilities or capital commitments held by the jointly controlled operations at balance date. Beechworth Health Service is involved in joint arrangements where control and decision-making are shared with other parties. Beechworth Health Service has determined the entities detailed in the above table are joint operations and therefore recognises its share of assets, liabilities, revenues and expenses in accordance with its rights and obligations under the arrangement.