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Board and committee remuneration

Annual remuneration for each board or committee is listed in Table 10.

Table 10: Child and Adolescent Health Service Board, 2021-22

Position	Name	Type of remuneration	2021-22 period of membership	2021–22 total remuneration ⁽¹⁾
Chair	Dr Rosanna Capolingua	Annual	12 months	\$80,370.56
Acting Chair	Professor Geoffrey Dobb	Ineligible	12 months	0
Acting Deputy Chair	Professor Di Twigg	Annual	12 months	\$45,971.13
Member	Ms Miriam Bowen	Annual	12 months	\$45,971.20
Member	Ms Kathleen Bozanic	Annual	3 months	\$9,724.66
Member	Ms Anne Donaldson (Linley Donaldson)	Annual	12 months	\$45,971.20
Member	Dr Alexius Julian	Annual	12 months	\$45,971.20
Member	Dr Daniel McAullay	Annual	12 months	\$45,971.20
Member	Mr Peter Mott	Annual	12 months	\$45,971.13
Member	Ms Maria Osman	Annual	12 months	\$45,971.38
Member	John McLean	Annual	7 months	\$27,405.93
Total				439,299.59

Notes:

1. The above list of board is as per the State Government Boards and Committees Register.

2. Remuneration is provided to private sector and consumer representative members of a board/committee. Individuals are ineligible for remuneration if their membership on the board/committee is considered to be an integral part of their organisational role.

3. Remuneration amounts can vary depending on the type of remuneration, the number of meetings attended, and whether a member submitted a remuneration claim.

4. 'Period of membership' is defined as the period (in months) that an individual was a member of a board/committee during the 2021–22 financial year.

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Pricing policy

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The National Health Reform Agreement sets the policy framework for the charging of public hospital fees and charges. Under the Agreement, an eligible person who receives public hospital services as a public patient in a public hospital or a publicly contracted bed in a private hospital is treated free of charge.

This arrangement is consistent with the Medicare principles which are embedded in the Health Services Act 2016 (WA).

The majority of hospital fees and charges for public hospitals are set under Schedule 1 of the Health Services (Fees and Charges) Order 2016 and are reviewed annually. The following informs WA public hospital patients' fees and charges for:

Compensable or ineligible patients

Patients who are either private or compensable and Medicare ineligible (overseas residents) may be charged an amount for public hospital services as determined by the State. The setting of compensable and ineligible hospital accommodation fees is set close to, or at, full cost recovery.

Private patients (Medicare eligible Australian residents)

The Commonwealth Department of Health regulates the Minimum Benefit payable by health funds to privately insured patients for private shared ward and same day accommodation. The Commonwealth also regulates the Nursing Home Type Patient contribution based on March and September pension increases. To achieve consistency with the Commonwealth Private Health Insurance Act 2007, the State sets these fees at a level equivalent to the Commonwealth Minimum Benefit

Veterans

Hospital charges of eligible war service veterans are determined under a separate CommonwealthState agreement with the Department of Veterans' Affairs (DVA). Under this agreement, the Department of Health does not charge medical treatment to eligible war service veteran patients; instead, medical charges are fully recouped from DVA.

Other fees and charges

The Pharmaceutical Benefits Scheme regulates and sets the price of pharmaceuticals supplied to outpatients, patients on discharge and for day admitted chemotherapy patients. Inpatient medications are supplied free of charge.

There are other categories of fees specified under the terms of Health Services (Fees and Charges) Order 2016, which include the supply of surgically implanted prostheses, orthoses, magnetic resonance imaging services and pathology services. The pricing for these hospital services is determined according to their cost of service.



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Capital works

The Auspman pharmaceutical manufacturing facility became operational in August 2021. The facility was capitalised at a total cost of \$4.9m. Remaining works to be funded and completed during 2022-23 include equipment fit out, TGA licensing and provision for potential defects rectification.

Funding of \$1.6m was provided in the 2022-23
State Budget Process for the purchase of 278
Tympanometers for use at 293 community based child health centres and primary school sites for the early detection and screening of chronic middle ear infection in children in response to recommendations included in the OAG Improving Aboriginal Children's Ear Health (2019) Report.

Some equipment was expensed during 2021-22 and the remaining funding will be utilised in 2022-23 for continued commissioning of tympanometers and for the equipment maintenance contract.

The Medical Equipment Replacement Program also completed capital works in 2021–22.

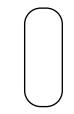
Table 11 shows the financial details of the capital works program.

Table 11. Major asset investment program works completed in 2021-22

Capital Works Programs Completed ⁽¹⁾	2021-22 \$'000
Auspman Paediatric Pharmaceutical Manufacturing Facility	4,785
Tympanometers - Community Health Centres	879
Medical Equipment Replacement	1,391
Minor Building Works and Other Plant & Equipment	379
Total	7,434

Note

(1) Excludes equipment funded outside of the State Government's Asset Investment Program and equipment expensed



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Indemnity insurance

In 2021–22, the amount of insurance premium paid to indemnify any 'director' (as defined in Part 3 of the *Statutory Corporations (Liability of Directors) Act* 1996) against a liability incurred under sections 13 or 14 of that Act was \$79,350.

Government policy requirements

Pecuniary interests

Senior officers of government are required to declare any interest in an existing or proposed contract that has, or could result in, the member receiving financial or other benefits. In 2021–22, none of the CAHS senior officers declared a pecuniary interest.

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