

Finance Return

Statement of Financial Performance

Refer to the Agency Information Management System Manual for instructions on completing this form

F1 Part 1

Hospital:	Agency Code:	Month:	Year:
Agency:			

	Services Supported By Health Service Agreement (HSA) YTD \$'000s	Non HSA Initiatives YTD \$'000s	All Activities Consolidated YTD \$'000s	Projected Consolidated Full Year to 30.6.2002 \$'000
REVENUE—PART 1A				
HSA Fund				
1 Output Group 111: Acute Health				
i Government				
ii Inpatient Accommodation Fees				
iii Other Income				
2 Output Group 129: Aged and Home Care				
i Government				
ii Inpatient Accommodation Fees				
iii Nursing Home Resident Fee				
iv Nursing Home Commonwealth Revenue				
v Other Income				
3 Output Group 115: Mental Health				
i Government				
ii Inpatient Accommodation Fees				
iii Other Income				
4 Output Group 128: Primary Health				
i Government				
ii Other Income				
5 Other Output Groups				
i Government				
ii Inpatient Accommodation Fees				
iii Other Income				
iv Non-Admitted Patient Fees				
6 Total HSA Revenue				
Non HSA Initiatives Revenue				
7. Business Units				
8. Property Income				
9. Hostel				
i Hostel Resident Fees				
ii Hostel Fees from Commonwealth				
10. Interest & Dividend (exclude capital purpose interest)				
11 i Controlled Entities				
ii Controlled Entities - Fund Raising Activities				
12. General Donations (untied)				
13. Other Revenue (including internally managed SPF)				
14. Total Controllable Non HSA Revenue				
15. Total HSA & Controllable Non HSA Revenue				
16. Restricted Specific Purpose Revenue				
i Donations (excluding capital donations)				
ii Research				
iii Controlled (separately managed) Entities				
iv Others (including interest)				

17. Total Restricted Specific Purpose Revenue				
18. Total Entity Operating Revenue (=15+17)				

	Services Supported By Health Service Agreement (HSA) YTD \$'000s	Non HSA Initiatives YTD \$'000s	All Activities Consolidated YTD \$'000s	Projected Consolidated Full Year to 30.6.2002 \$'000
EXPENSES—PART 1B				
Services Supported by HSA				
19. Output Group 111: Acute Health				
i Admitted Patients				
ii Non-Admitted Services				
20. Output Group 129: Aged and Home Care				
i Admitted Patients				
ii Nursing Home				
iii Community Based Services				
iv Others				
21. Output Group 115: Mental Health				
i Admitted Patients Services				
ii Others				
22. Output Group 128: Primary Health				
i Non-Admitted Services				
ii Other				
23. Other Output Groups				
i Admitted Patients				
ii Non-Admitted Services				
iii Other				
24. Total HSA Supported Services Expenses				
Non HSA Initiatives				
25. Business Units				
26. Property Expenses				
27. Hostel				
28. i Controlled Entities				
ii Controlled Entities - Fund Raising Activities				
29. Other Expenses				
30. Total Controllable Non HSA Expenses				
31. Total HSA and Controllable Non HSA Expenses				
32. Restricted Specific Purposes Expenses				
33. Total Entity Operating Expenses (=31+32)				
34. Surplus (Deficit) - HSA and Controllable Non HSA Initiatives (=15-31)				
35. Entity Operating Surplus/(Deficit) (=18-33)				
36. Depreciation				
i Buildings				
ii Plant, Equipment & Others				
37. Specific (Abnormal) Items (Note1)				
38. Extraordinary Items				
39. Capital Purposes Grants				
i DHS				
ii Others				
40. Other Capital Purpose Income				
i Donations for Capital Purposes				
ii Hostel activities				
iii Others (Note 2)				
41 ENTITY SURPLUS/(DEFICIT)				

Statement of Financial Performance (cont..)

F1 Part 1

Note 1: Specific (Abnormal) Items

		Services Supported By Health Service Agreement	Non HSA Initiatives	All Activities Consolidated	Projected Consolidated Full Year to 30/6/2002
		YTD	YTD	YTD	YTD
		\$'000	\$'000	\$'000	\$'000
42.	Fixed assets written off				
43.	Write down of inventory				
44.	Voluntary departure package - revenue				
45.	Voluntary departure package - expenses				
46.	Provision for diminution in investment				
47.	Revaluation increment/(decrement) on non current asset				
48.	Cost associated with restructure (disaggregating / aggregation)				
49.	Extinguishment of liabilities				
50.	Litigation settlements				
51.	Others				
52.	Total (=37)				

Note2: Includes capital interest and profit / loss on sales of fixed assets

	Allocation		Year to Date \$'000
Supplementary Information on Profit & Loss Statement			
53.	Operating expenses incurred in relation to revenue recognised in previous year (2000/2001)		
54.	Operating grants recognised YTD without corresponding operating expenses		
55.	WIES lost due to industrial dispute/force majeure and accrued as revenue -WIES number and \$ amount.		WIES
56.	WIES lost due to industrial dispute/force majeure and <i>not</i> accrued as revenue-WIES number and \$ amount.		WIES
57.	Salary increases charged to P&L and not yet matched by DHS funding		
58.	Employee entitlements provision - % and amount charged to P&L due to award adjustments		%
59.	Public Holiday Costs - days and amount charged to P&L		days
60.	i Infrastructure and Maintenance Grant recognised in P&L as operating revenue, and/or	Jote 3	Operating
	Infrastructure and Maintenance Grant recognised in P&L as capital purpose income		Capital
	ii	Jote 4	Operating
			Capital
	iii	Jote 4	Operating
			Capital

Note3: These grants are provided by DHS for use towards networks'/hospitals' annual capital equipment, plant and infrastructure maintenance /minor works needs. As the networks/hospitals have the discretion on how these grants are to be used, the treatment of these grants in the P&L should therefore be determined by their eventual usage.

Note 4: Please advise on other material grants (ie infectious control) that can be recognised as operating or/and capital revenue depending the eventual disposal of such grants.