

# ANNUAL REPORT 2023–2024

**Health and Wellbeing  
Queensland**



**Queensland  
Government**

## Accessibility

### Open data

Open data information about consultancies, contract disclosure report, overseas travel and the Queensland Language Services Policy is available at the Queensland Government Open Data Portal (<https://www.data.qld.gov.au>). Health and Wellbeing Queensland (HWQld) has reported data on overseas travel for the 2023–2024 reporting period. HWQld has no data to report on consultancies or Queensland Language Services.

### Public availability statement

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Aboriginal and Torres Strait Islander peoples are advised that this publication may contain words, names and descriptions of people who have passed away.

## Acknowledgement of Traditional Owners

Health and Wellbeing Queensland (HWQld) respectfully acknowledges and recognises Aboriginal and Torres Strait Islander peoples as the Traditional Owners and Custodians of the lands, winds, and waters where we live, learn and work.

We pay our respects and acknowledge the important role of Elders, past and present, for they hold the memories of the traditions, cultures, and aspirations of Australia's First Nations peoples, and have taken on the responsibility to protect and promote their culture and leave a legacy for future Elders and leaders.

We acknowledge any Sorry Business that may be affecting individuals, families, and communities.

We promise to be respectful, take our lead from the community and walk together with Aboriginal and Torres Strait Islander peoples, communities, and organisations in our journey to better health.

We recognise that Aboriginal and Torres Strait Islander culture is rich and diverse and that we, as an agency, have a responsibility to facilitate efforts that account for this to ensure equity for all.

We celebrate Aboriginal and Torres Strait Islander history, in particular the strength, resilience and courage which has occurred over time and now inspires current and future generations to create a healthier Queensland.

We recognise and support the Queensland Government's 2023 Closing the Gap Implementation Plan, *Queensland Government's Reconciliation Action Plan 2023–2025*, and *Making Tracks toward closing the gap in health outcomes for Indigenous Queenslanders by 2033*.

## Recognition of Australian South Sea Islanders

HWQld formally recognises the Australian South Sea Islanders as a distinct cultural group within our geographical boundaries. We are committed to fulfilling the *Queensland Government Recognition Statement for the Australian South Sea Islander Community* to ensure that present and future generations of Australian South Sea Islanders have equality of opportunity to participate in and contribute to the economic, social, political, and cultural life of the State.

## Recognition of a multicultural and diverse Queensland

HWQld recognises and supports the Queensland Government's *Multicultural Recognition Act 2016* and *Multicultural Queensland Charter (2017)* and is committed to engaging in activities that support and develop health

promotion and improve the health of all Queenslanders, regardless of culture, language, faith, or age. HWQld also values and is committed to universal inclusion of Queensland's lesbian, gay, bisexual, transgender, intersex, queer/questioning, and asexual (LGBTIQ+) community and supports the Queensland public sector LGBTIQ+ inclusion strategy. We pay our respects and offer our deep thanks to those who have worked to improve the health and wellbeing of LGBTIQ+ communities. Equity and inclusion stand as fundamental principles, steering and motivating everything HWQld does.

We focus on chronic disease prevention by addressing underlying causes of ill health, identifying barriers to achieving optimal health and addressing needs of different communities – and we do this through the development of partnerships and the co-design of programs that meet the needs of these communities. We do this to drive change that has the potential to prevent illness and strengthen and protect wellbeing at all stages of life for all Queenslanders.

## HWQld's Reconciliation Action Plan

Since our establishment in July 2019, Aboriginal and Torres Strait Islander health equity has remained a priority for HWQld. Over time, our programs have grown and our partnerships with communities have strengthened.

In October 2023, the Health and Wellbeing Queensland Reflect Reconciliation Action Plan (RAP) was endorsed by Reconciliation Australia and the Health and Wellbeing Queensland Board. With this we are taking the next step on our journey towards reconciliation.

Our Reflect RAP recognises our formal commitment to improving reconciliation and health equity with Aboriginal and Torres Strait Islander communities. We join more than 2700 corporate, government, and not-for-profit organisations that have made a formal commitment to reconciliation through the RAP program.

Through 13 actions under the banners of relationships, respect, opportunities, and governance, our Reflect RAP will be implemented over 12 months. Our RAP has 41 deliverables, with a very strong focus on improving our internal capacity to set us up for future more ambitious RAPs.

To date, Reflect RAP actions delivered include the delivery of an internal cultural capability survey to inform cultural capability training and development opportunities, establishment of a formal RAP Working Group and development of its Terms of Reference, and ensuring First Nations voices are captured in our consumer insights research pieces.

Together, with HWQld's *Strategic Plan 2023–2027* and *Generation Queensland Vision*, our RAP strengthens our platform to create a healthier and fairer future for all Queenslanders, in particular, children, young people and Aboriginal and Torres Strait Islander peoples. We acknowledge and thank all those whose contributions have helped shape our Reflect RAP, and for supporting our path to reconciliation.

# Letter of Compliance



30 August 2024

The Honourable Shannon Fentiman MP  
Minister for Health, Mental Health and Ambulance Services  
Minister for Women  
GPO Box 48  
BRISBANE QLD 4001

Email: [health@ministerial.qld.gov.au](mailto:health@ministerial.qld.gov.au)

Dear Minister Fentiman

I am pleased to submit for presentation to the Parliament the Annual Report 2023–2024 and Financial Statements for Health and Wellbeing Queensland.

I certify that this annual report complies with:

- the prescribed requirements of the *Financial Accountability Act 2009* and the *Financial and Performance Management Standard 2019*; and
- the detailed requirements set out in the *Annual report requirements for Queensland Government agencies*.

A checklist outlining the annual reporting requirements is provided at pages 54–55 of this annual report.

Yours sincerely

A handwritten signature in black ink, appearing to read "S. R. Ryan".

Mr Stephen Ryan  
Board Chairperson  
Health and Wellbeing Queensland

*making healthy happen*

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Our Patron Her Excellency the Honourable Dr Jeannette Young PSM, Governor of Queensland

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# Year in review

## From the Board Chairperson

It is with great pride that I present the Health and Wellbeing Queensland Annual Report 2023–2024.

The extensive achievements for Health and Wellbeing Queensland during the 2023–2024 year are something I am particularly proud of, and I sincerely thank all those involved.

As an inaugural board member of Health and Wellbeing Queensland since its bipartisan establishment in 2019 and Board Chair since 2022, I have witnessed the astounding growth and achievements of this unique organisation.

In just five years, Health and Wellbeing Queensland has developed into a strong public health agency and brought together stakeholders from across government, community and industry sector to develop policy, promote health initiatives and create innovative partnerships.

This is due, in part, to Health and Wellbeing Queensland's unique position as a statutory agency. This role creates the capability to be involved in not only the health sector, policy, prevention, promotion and partnerships, but to also work alongside local government, communities and associated community organisations to make healthy happen for all Queenslanders.

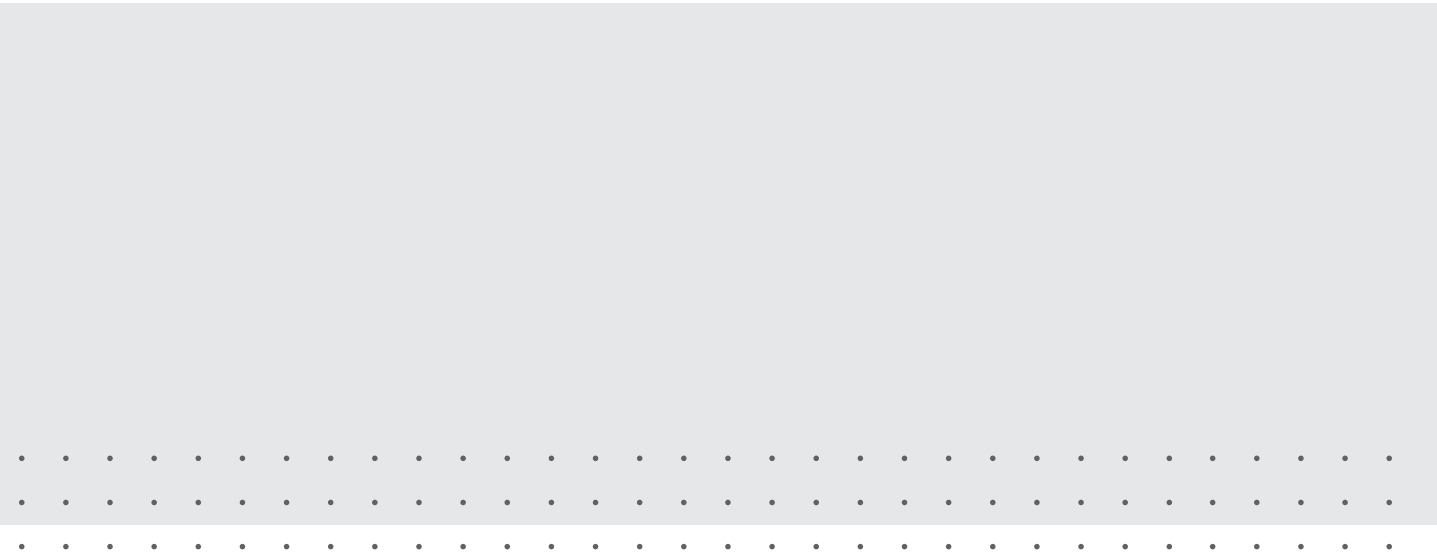
As Board Chair, I wish to thank The Honourable Dr Steven Miles MP, Premier; The Honourable Shannon Fentiman MP, Minister for Health, Mental Health and Ambulance Services and Minister for Women; and Her Excellency The Honourable Dr Jeannette Young PSM, Governor of Queensland, for their continued support of this incredible agency.

I extend a special thanks to Chief Executive Officer Dr Robyn Littlewood and her team for their passion, dedication, and commitment over the past five years, to find the right solutions that will advance the health and wellbeing for Queenslanders.

I also extend my thanks to the Health and Wellbeing Queensland Board for their collaborated direction and guidance. To our three ex-officio members Queensland Health Director-General Michael Walsh, Department of Tourism and Sport Director-General Andrew Hopper and Department of Treaty, Aboriginal and Torres Strait Islander Partnerships Director-General Clare O'Connor, thank you for your time and efforts in addition to your highly demanding leadership roles in government. Thank you to our non-executive directors for their skills, advice and engagement based on your personal incredible experience and commitment. We all want to leave a legacy for Queensland and we are doing this together.

The way our experienced Board members interact with each other and our team, reflects the strong and trusting partnerships Health and Wellbeing Queensland continue to foster across Queensland Government. This is part of our legacy to work with all sides and levels of government, and all agencies to make healthy happen for Queenslanders. The passion and dedication of our workforce is reflected in the results of the 2023 Working for Queensland survey, which showed 100 per cent of staff agreed our work has a positive impact on the lives of Queenslanders.

The culture is good and I feel it from the top down and bottom up.



As with all annual reports before this, this highlights the diverse array of initiatives that deliver on our commitment to enable Queenslanders of all ages and abilities to move more and make healthier food and drink choices and as the Board Chair, I couldn't be more proud.

One of those initiatives is Pick of the Crop, a whole-of-school healthy eating initiative now in more than 200 primary schools across the state. Since its launch in 2020, Pick of the Crop has awarded more than \$453,000 in grant funding to encourage children to eat more fruits and vegetables. This is just one of the ways we are setting up the next generation of Queenslanders for success. These programs are all based on solid foundations of co-design, partnership, consumer-engagement, evidence and innovation. Research, evaluation and sustainability are key to our work, which will ensure impact, well into the future.

I look forward to seeing Health and Wellbeing Queensland continue to influence and shape the health of our state for decades and generations to come. If our first five years is anything to go by, we will.

**Mr Stephen Ryan**  
Chairperson of the Board

# Year in review

## From the Chief Executive Officer

2024 marked five years since Health and Wellbeing Queensland was established as the state's first dedicated prevention agency. The bipartisan creation of Health and Wellbeing Queensland in July 2019 is one of the greatest investments in our state. In just a short time, we have created programs and policies that have had meaningful impact on the lives of Queenslanders. I am also honoured to have been reappointed as Chief Executive Officer in November 2023 and will have the opportunity to continue leading the groundbreaking work of this organisation.

As we reflect, we remain grateful. Everything we have achieved in the past five years is due to the terrific partners we engage with and the support from the people of Queensland who understand we are here to make healthy happen with them. In just five years, Health and Wellbeing Queensland has increased its reach through community engagement, public health campaigns, partnerships and health programs. We have driven a truly collaborative agenda to advancing preventative health – together. We know that's the only way we can achieve our shift that is so needed. Specifically, I would like to acknowledge the incredible support of our funded prevention program partners: Deadly Choices, My health for life, 10,000 Steps, Queensland Country Women's Association Country Kitchens and the Queensland Association of School Tuckshops Healthier Tuckshops. These partners provide us with the much-needed boots on ground support in communities across Queensland and have collectively supported 158,134 Queenslanders since July 2021.

Our organisation's success has been guided by our highly skilled Board, many of whom have been with us since our establishment. My Board Chair, Mr Stephen Ryan, was in the room with me from the beginning and remains a fierce advocate of our agenda. I thank Mr Ryan for his dedication, leadership and governance throughout these first five years. Our Board members continue to guide us with well-considered advice, and I thank each of them for how they conduct themselves and lead us.

The Honourable Dr Steven Miles MP, Premier, spearheaded the establishment of Health and Wellbeing Queensland in 2019 as then-Health Minister, and I thank him for his continued dedication to our organisation. Thank you also to The Honourable Shannon Fentiman MP, Minister for Health, Minister for Mental Health and Ambulance Services and Minister for Women, who has advocated strongly for prevention and supported us through major policy developments this year that will shape the health of Queenslanders well into the future.

Our organisation is incredibly fortunate to have the active support of our Patron, the Governor of Queensland, Her Excellency, The Honourable Dr Jeannette Young PSM. Dr Young not only champions our very special prevention agenda, but also provides us with the visibility and means to reach more Queenslanders with her advocacy.

In my opinion, one of our greatest strengths is the consistency and dedication of passionate and exceptional staff. Health and Wellbeing Queensland continues to enjoy the experienced executive leadership that has guided us since establishment. I thank Deputy Chief Executive Officer Ms Gemma Hodgetts and Chief Operating Officer Mr Mark Tuohy, Senior Director Ms Judy Nean and Director Ms Jennifer Kenny, for creating a culture that embodies the values of our organisation, so we are making healthy happen not only for the people of Queensland but for our workforce too. I also thank our directors and staff who bring not only a wide



breadth of expertise and experience to our agency, but a commitment I have never seen previously. I know that we are all here every day for the same reason. Our entire Health and Wellbeing Queensland workforce understands our why – to build the health of Queensland.

This year we have achieved major milestones to shift the dial in Queensland's health:

- ***Making Healthy Happen 2032 – A strategy for preventing obesity in Queensland*** – we developed and delivered the Queensland Government's response to the National Obesity Strategy 2022–2023. It includes 40 actions across 11 agencies to reduce the prevalence of obesity around the state.
- ***Gather + Grow 2023–2032 – Queensland Remote Food Security Strategy*** – we developed and delivered the Queensland Government's strategy to improve food security in remote Aboriginal and Torres Strait Islander communities and was developed through partnerships across sectors.
- **Healthy Eating and Physical Activity Infrastructure Planning program** – we supported the delivery, in partnership with The Department of Tourism and Sport, of more than \$1.4 million to 19 Queensland Aboriginal and Torres Strait Islander discrete communities to increase physical activity and healthy eating.
- **Podsquad** – our free, play-based wellbeing app that helps kids learn new healthy habits through play received more than 15,500 downloads since its launch in July 2023.
- **Pick of the Crop** – our whole-of-school healthy eating initiative Pick of the Crop reached almost 200 schools and more than 42,000 primary school students across Far North Queensland, North Queensland, North Coast, Darling Downs South West, Metropolitan South and South East regions.
- **Healthy eating campaign** – our annual healthy eating campaign with Outdoor Media Association and Nutrition Australia, Fresh Veg, deliciously affordable, received a record \$12.3 million in donated advertising space. The campaign featured on more than 18,250 advertising signs across every state and territory and reached more than 11.5 million Australians.
- **Events** – a continued presence across a range of sponsored events including the Gold Coast Marathon Junior Dash; the popular Governor's Walks around the beautiful grounds of Government House and for the first time, in Rockhampton; the Murri Carnival where we saw more than 50,000 Queenslanders enjoying a sugar, drug, alcohol and tobacco-free event.
- **GenQ Grants** – 25 GenQ Health and Wellbeing Community Grants (totalling \$399,007) and two GenQ Health and Wellbeing Impact Grants (totally \$399,995) were awarded, with a primary focus on physical activity, wellbeing, nutrition, or health equity.
- **Health and Wellbeing Centre for Research Innovation (HWCRI) inaugural showcase** – co-hosted by HWQld and our partners with The University of Queensland and held at Custom's House, the inaugural showcase explored the value of partnerships and importance of research in policy development.

Lastly, I would like to offer a special thank you to our partners across government, sector and industry who have helped shape and deliver our agenda. Many of the challenges we are facing are complex but wherever we go, Health and Wellbeing Queensland is warmly welcomed, and people are willing to share their time and lived experience to inform our work. Know that together, we are creating a legacy to improve the health outcomes of our future generations and can leave this world a little better than we found it.

I simply can't wait to see what this next year brings.

**Dr Robyn Littlewood**  
Chief Executive Officer

# Message from our Patron



GOVERNOR OF QUEENSLAND

## Message from the Governor of Queensland

As Governor of Queensland, I wish to extend my gratitude and admiration for the ongoing commitment of Health and Wellbeing Queensland to ensuring the people of this state have the resources to lead active, vibrant lives. As a proud Patron, I am pleased to have this opportunity to highlight the work this innovative organisation has done to prioritise preventive health across our state.

Two initiatives in particular warrant special mention: 'Making Healthy Happen 2032' is a bold strategy for preventing obesity around the state and in turn, creating a healthier Queensland, while 'Gather + Grow 2023 – 2032' is aimed at addressing food security in remote Aboriginal and Torres Strait Islander communities. Both strategies call for new ways of thinking to address complex problems, and I commend Health and Wellbeing Queensland for undertaking such important work.

'A Better Choice' – a program recognising the importance of access to nutritious food for all – has made it easier for Queenslanders to lead healthier lifestyles. The 'Podsquad' app is empowering Queensland kids to develop healthy habits surrounding food, physical activity, and sleep. And 'Pick of the Crop' is promoting food literacy among primary school children, encouraging them to embrace vegetables as a delicious part of their diet.

At the Fernberg Estate, I have delighted in co-hosting regular free community bushland walks through the pristine native bushland surrounding Government House. A strong turnout at the community walk through the beautiful Rockhampton Botanic Gardens in May suggests this wonderful initiative, conceived and led by Health and Wellbeing Queensland, will also be embraced by regional Queenslanders.

As someone deeply invested in the wellbeing of our state, extending from my background in the health sector to my current role, I am deeply appreciative of the progress Health and Wellbeing Queensland has made in this area.

I look forward to lending my support to future efforts to make a positive impact on the health of all Queenslanders.

A stylized, handwritten signature in black ink, appearing to read 'Jeannette Young'.

**Her Excellency the Honourable Dr Jeannette Young AC PSM**  
Governor of Queensland

# About HWQld

Health and Wellbeing Queensland (HWQld) was established on 1 July 2019, as an independent statutory body under the *Health and Wellbeing Queensland Act 2019* (HWQld Act), to improve the health and wellbeing of all Queenslanders and reduce health inequities.

As the state's prevention agency, HWQld is committed to creating a healthier and fairer future for Queensland. Our priority is to work with all parts of the entire Queensland health system to reduce the impacts of chronic disease, with a focus on supporting those who unfairly experience poorer health due to circumstances that are out of their control.

Shifting the focus towards improving health and wellbeing and prevention as well as optimising healthcare, is critical to creating a healthier and more sustainable future. This needs to occur throughout and beyond the health system to address the complex and interconnected systems that influence health, to truly improve the health and wellbeing of all Queenslanders. We are committed to working in partnership across government, communities, and other sectors to address the underlying factors that drive chronic ill-health through collaborative, evidence-based and community-focused action.

Using an evidence- and value-based approach, HWQld works through investing in partnerships, initiatives, and programs throughout Queensland, providing a central and coordination role to leverage skills, opportunities and resources into collaborative action and policy to elevate prevention.

HWQld works in partnership with Hospital and Health Services (HHSs), Primary Health Networks (PHNs), other government agencies, as well as community leaders and groups, not-for-profits, business, industry, and universities to reduce the impacts of chronic disease, especially for those who unfairly experience poorer health due to circumstances that are out of their control.

The integration agenda has become a central element in the reform of the healthcare system around the world. To make the change that is needed, HWQld is working in partnership to create and integrate responsive solutions and amplify actions that will shift the environmental, social, systemic, and individual factors that contribute to the obesity crisis.

## Our vision and purpose

Our vision is Generation Queensland (GenQ) – for the health and wellbeing of future generations. This is based on evidence demonstrating the benefits of improving wellbeing from the earliest years of life.

HWQld is working to achieve this generational shift through targeted investment and coordination of strategic, cross-government initiatives to achieve measurable change in the areas of chronic disease and obesity prevention, with an initial focus on nutrition, physical activity; improving health equity; and wellbeing.

Our purpose is to drive systems change that addresses the preventable burden of disease, for a healthier and fairer Queensland. It is underpinned by the principles of equity, empathy, innovation, collaboration and courage.

Health and wellbeing is influenced by a complex combination of physical, mental, emotional, social, cultural, and economic factors, commonly referred to as the social determinants of health, which must be addressed through a system focus. HWQld's systems change approach is founded on research and evidence and is guided by community leadership.

The point of difference for the organisation is how HWQld effectively leverages the expertise of the research community to translate evidence into policy and practice and delivers robust and comprehensive evaluations to measure the specific and collective impact of prevention work.

HWQld is committed to a partnership approach across government, communities and other sectors to address the underlying factors that drive chronic ill-health, including working with the Queensland health system to reduce the impacts of chronic disease.

## Our people

### HWQld Board

HWQld is governed by a board of nine members, including a Chairperson and Deputy Chairperson appointed by the Governor in Council under section 18 of the HWQld Act on the recommendation of the Minister, for terms of up to four years.

Pursuant to the HWQld Act, the board consists of no more than 10 members comprised of:

- at least one and not more than four chief executive officers (Directors-General) of government departments
- at least one and not more than six other members with qualifications and experience in areas including law, business or financial management, public health, academia, community service organisations, the not-for-profit sector, or other areas the Minister considers relevant or necessary to support the board in performing its functions
- at least one of whom must be an Aboriginal person or a Torres Strait Islander.

The board provides strategic leadership, guidance and effective oversight of management, operations and financial performance and is responsible for the following functions:

- ensuring the proper, efficient, and effective performance of HWQld's functions
- deciding the objectives, strategies, and policies to be followed by HWQld
- ensuring HWQld complies with its legislative obligations
- any other function given to the board under an Act.

The board met six times during the reporting period, with all meetings offered in-person and virtually.

### Health and Wellbeing Queensland Board

Act or instrument	<i>Health and Wellbeing Queensland Act 2019</i>
Functions	HWQld is governed by a board appointed by the Governor in Council.
Achievements	<ul style="list-style-type: none"> <li>• Welcomed Mr Michael Walsh to the board in the ex-officio appointment of Director-General, Queensland Health</li> <li>• Approved the 2023–2024 Budget</li> <li>• Approved contract extensions for prevention program partners</li> <li>• Approved submission to Health and Environment Committee's parliamentary inquiry into reducing rates of e-cigarette use</li> <li>• Monitored implementation of the HWQld <i>Strategic Plan 2023–2027</i></li> <li>• Monitored the launch of Podsquad</li> <li>• Monitored implementation of <i>Making Healthy Happen 2023 – A strategy for preventing obesity in Queensland</i></li> <li>• Monitored implementation of <i>Gather + Grow 2023–2032 – Queensland Remote Food Security Strategy</i></li> <li>• Monitored the development of an Equity Framework</li> <li>• Monitored the development of a Clinical Prevention Framework</li> <li>• Monitored the development of <i>Thriving Lives, Connected Communities – Queensland Government Mental Health and Wellbeing Commitment</i></li> <li>• Endorsed and monitored the HWQld <i>Reflect Reconciliation Action Plan</i></li> </ul>

Health and Wellbeing Queensland Board					
Financial reporting	The Finance, Audit and Risk Management Committee (FARM Committee) provides independent advice, assurance and assistance to the HWQld Board in the areas of risk, control, audit, performance management and compliance frameworks.				
	A financial report is provided for discussion at each board meeting to enable members to fulfil their responsibility to approve annual budget and financial plans, monitor financial performance including approval of annual financial reports. A communiqué is provided to the board after each FARM Committee meeting.				
	The HWQld Board acts in accordance with the <i>Financial Accountability Act 2009</i> and adheres to the <i>Financial and Performance Management Standard 2019</i> and contributes to the Queensland Health budget and service delivery statements.				
Remuneration					
Position	Name	Meetings/ sessions attendance	Approved annual, sessional or daily fee	Approved sub-committee fees if applicable	Actual fees received
Chairperson and Member	Mr Stephen Ryan	6	\$35,000 per annum	\$2,000 per annum	\$41,000
Director-General Member and Deputy Chairperson	Mr Andrew Hopper	3	Not applicable as chief executive	Not applicable	Not applicable
Director-General Member	Ms Clare O'Connor	5	Not applicable as chief executive	Not applicable	Not applicable
Director-General Member	Mr Michael Walsh	4	Not applicable as chief executive	Not applicable	Not applicable
Director-General Member	Mr Shaun Drummond	0	Not applicable as chief executive	Not applicable	Not applicable
Member	Emeritus Professor Ian Lowe	6	\$15,000 per annum	Not applicable	\$17,000
Member	Dr Shea Spierings	6	\$15,000 per annum	Not applicable	\$17,000
Member	Ms Stella Taylor-Johnson	5	\$15,000 per annum	Not applicable	\$17,000
Member	Ms Anna Voloschenko	6	\$15,000 per annum	Not applicable	\$17,000
Member	Ms Jane Williams	4	\$15,000 per annum	\$2,000 per annum	\$19,000
No. scheduled meetings/sessions	Six board meetings were held during the reporting period being 30 August 2023, 18 October 2023, 6 December 2023, 20 February 2024, 10 April 2024, 18 June 2024				
Total out of pocket expenses	N/A				

## Board members

<b>Chairperson and member:</b>	Mr Stephen Ryan
<b>Appointed:</b>	1 July 2019
<b>Current term:</b>	1 July 2023 to 30 June 2027

Mr Ryan is a professional board member, senior executive and educator with more than 40 years' experience in strategic leadership, governance and service delivery. Mr Ryan has had extensive exposure across the public, union, superannuation and not-for-profit sectors in his various roles as a secondary school teacher, a Trustee of the QSuper Board and a Director of Qinvest. Mr Ryan is also the Chairperson and a Director of the Residential Tenancies Authority Queensland and an ex-officio member of its Risk and Audit Committee; he is also a Director of GROW, a national not-for-profit community-based organisation helping Australians recover from mental illness through programs of mutual support and personal development. Further, Mr Ryan was previously an executive member and President of the Queensland Teachers' Union.

- Mr Ryan attended all board meetings held during the reporting period as the Chairperson and Deputy Chairperson.

<b>Director-General member:</b> Director-General, Department of Tourism and Sport (ex-officio) and Deputy Chairperson	
<b>Appointed:</b>	1 July 2021
<b>Current term:</b>	1 July 2023 to 30 June 2026
<b>Current office holder:</b>	Mr Andrew Hopper
<b>Deputy Chairperson:</b>	11 August 2022 – current

As Director-General, Department of Tourism and Sport, Mr Hopper is leading the Government's objectives to drive economic growth and support jobs through strengthening and growing the state's tourism sectors. Through grant funding, infrastructure and planning, major events, world-class venues, and support for the state's elite athletes via the Queensland Academy of Sport, Mr Hopper is leading government support of Queensland's success in sport and active recreation. Mr Hopper has enjoyed a highly successful career in government, tourism, sport and major events. He has extensive experience in sports administration, operations, governance, asset management and venue leasing, has a detailed understanding of the private and public sectors and is recognised for his leadership skills, strategic thinking, commercial acumen and communication skills.

- Mr Hopper attended three of six board meetings held during the term of his ex-officio appointment. Ms Sarah Vandersee, Deputy Director-General attended the 10 April 2024 board meeting as Acting Director-General.

### Director-General member:

Director-General, Department of Treaty, Aboriginal and Torres Strait Islander Partnerships, Communities and the Arts (ex-officio)

<b>Appointed:</b>	1 July 2019
<b>Current term:</b>	1 July 2023 to 30 June 2026
<b>Current office holder:</b>	Ms Clare O'Connor

Ms O'Connor was appointed as the Director-General, Department of Treaty, Aboriginal and Torres Strait Islander Partnerships, Communities and the Arts on 18 May 2023. Ms O'Connor has previous experience in Director-General positions, having served in three other departments, including most recently, Communities, Housing and Digital Economy. Ms O'Connor has a Bachelor of Arts and Master of Arts in Public Sector Leadership and extensive experience in community and disability services as well as progressing other transformational social service reforms.

- Ms O'Connor attended five of six board meetings held during the reporting period.

### Director-General member:

Director-General, Queensland Health (ex-officio)

<b>Appointed:</b>	1 July 2019
<b>Current term:</b>	2 August 2021 to 30 June 2024
<b>Current office holder:</b>	Mr Michael Walsh

Mr Walsh is the Director-General, Queensland Health and was previously in this position from July 2015 to September 2019. Most recently, Mr Walsh was Chair of the Queensland Reconstruction Authority and Chair of the Western Australia Health, Health Support Service. Mr Walsh was the Administrator, North West HHS from June 2021 to April 2022.

Mr Walsh was Chair of the Australian Health Ministers Advisory Council (AHMAC) providing advice to the COAG Health Council from 2016 to 2018. From 2019 to 2020, Mr Walsh was the inaugural Chair of the Australasian Institute of Digital Health and has previously been on Board of the Australian Digital Health Agency. From 2019 to 2022 Michael was Chair of the Digital Health Cooperative Research Centre.

Mr Walsh holds a Master of Business Administration, Bachelor of Arts (Hons) in Psychology, Bachelor of Science in Human Movement, and Bachelor of Education. Mr Walsh has a passion for organisational excellence and leading value-based teams achieving outcomes that improve the lives of all Australians.

Commenced as Acting Director-General, Queensland Health on 24 July 2023 and appointed as Director-General, Queensland Health on 21 December 2023.

- Mr Walsh attended four of six board meetings held during the reporting period.



<b>Member:</b>	Emeritus Professor Ian Lowe AO
<b>Appointed:</b>	1 April 2020
<b>Current term:</b>	11 August 2022 to 30 June 2026

Emeritus Professor Lowe is a highly experienced, widely published and highly awarded expert on urban development, sustainability, environmental science and public health. One of Australia's most respected environmental scientists, he is an emeritus professor at the University of the Sunshine Coast and an emeritus professor of science, technology and society at Griffith University where he was previously Head of the School of Science. Emeritus Professor Lowe holds earned degrees from the University of New South Wales and the University of York as well as honorary doctorates from Griffith University and the University of the Sunshine Coast. Emeritus Professor Lowe's principal research interests are in the broad area of policy decisions influencing the use of science and technology, especially in the fields of energy and environment.

- Emeritus Professor Lowe attended all board meetings held during the reporting period.

<b>Member:</b>	Dr Shea Spierings
<b>Appointed:</b>	3 February 2022
<b>Current term:</b>	1 July 2023 to 30 June 2027

Dr Spierings is a Gaangulu man with expertise in Indigenous health, research, and Governance. Dr Spierings is a Research Fellow at the ARC Centre of Excellence for Indigenous Futures at the University of Queensland, investigating pandemic health messaging, Indigenous cultural governance, and Indigenous health. Dr Spierings is the Deputy Chair of Country to Coast Queensland, and a Board Member of the Metro North HHS. He has previously worked in various policy and community development roles and the construction and security industries.

- Dr Spierings attended all board meetings held during the reporting period.

<b>Member:</b>	Mrs Stella Taylor-Johnson
<b>Appointed:</b>	1 April 2020
<b>Current term:</b>	11 August 2022 to 30 June 2026

Mrs Taylor-Johnson has more than 40 years' experience working in the health sector and studying in the fields of behavioural science and social welfare. Mrs Taylor-Johnson was instrumental in the development of the first *Queensland Health Aboriginal and Torres Strait Islander Mental Health Policy* and holds a range of senior advisory positions in government and the not-for-profit sector, and numerous board directorships including with the Institute for Urban Indigenous Health (UIH), Queensland Aboriginal and Islander Health Council and Health Workforce Queensland.

Throughout her career Mrs Taylor-Johnson has held leadership roles and chair positions, which have provided the opportunity to build on the further establishment of the Murri Independent Community School in Brisbane, Queensland Trachoma and Eye Health and the development and implementation of the Queensland Police Service Aboriginal and Torres Strait Islander Recruitment Strategy.

- Mrs Taylor-Johnson attended five of six board meetings held during the reporting period.

<b>Member:</b>	Ms Anna Voloschenko
<b>Appointed:</b>	1 April 2020
<b>Current term:</b>	11 August 2022 to 30 June 2026

Ms Voloschenko is a health professional with more than 30 years' experience encompassing public health, health promotion, health protection and population health. Ms Voloschenko is an independent consumer advisor and strategic planner on matters relating to the health of populations and communities who live in Queensland. Throughout her career, Ms Voloschenko has been involved in the development of major public health and health promotion campaigns, which included community education and associated workforce both nationally and at a state level. For many years, Ms Voloschenko has championed health issues including health literacy and challenges facing culturally and linguistically diverse Queenslanders. She also advocates for equity and inclusion for all. As a result of her efforts, Ms Voloschenko was awarded an Outstanding Individual Achiever Award by Multicultural Queensland in 2019.

- Ms Voloschenko attended all board meetings held during the reporting period.

<b>Member:</b>	Ms Jane Williams
<b>Appointed:</b>	1 April 2020
<b>Current term:</b>	1 July 2023 to 30 June 2027

Ms Williams is an experienced Director and Board Chair across a number of sectors. With 30 years' in health and an extensive background in rural and remote emergency nursing, Ms Williams has developed a wealth of transferable skills networks and experiences. Ms Williams has lived and worked in Western Queensland. Living and working as part of these communities has provided Ms Williams with valuable insights into the issues and challenges facing these communities. Ms Williams holds a number of key board appointments including Chair of the Central West HHS, Board Director on Royal Flying Doctor Service Queensland Board, Checkup, Sunwater and is a council Member of the Queensland Mental Health and Drug Advisory Council.

- Ms Williams attended four of six board meetings held during the reporting period.

## Former member

**Director-General member:**  
Director-General, Queensland Health (ex-officio)

**Former office holder:** Mr Shaun Drummond

Mr Drummond was the Director-General, Queensland Health, until resigning on 23 July 2023.

- There were no board meetings held during the period of his ex-officio appointment.

## Finance, Audit and Risk Management Committee

The Finance, Audit and Risk Management Committee (FARM Committee) is a sub-committee of the HWQld Board. Members are appointed by the Board with membership consisting of a minimum of three and not more than five members. Representatives from the Queensland Audit Office and the Queensland Government Corporate Administration Agency are also invited to each meeting to provide updates on external and internal audit activities.

The FARM Committee has completed their third year of membership. The FARM Committee met three times during the reporting period, with both meetings offered in-person and virtually.

Finance, Audit and Risk Management Committee					
Act or instrument	Finance, Audit and Risk Management Committee Charter				
Functions	The role of the Committee is to provide independent advice, assurance and assistance to the HWQld Board in the areas of: <ul style="list-style-type: none"><li>• Risk, control, audit, performance management and compliance frameworks.</li><li>• The Board’s external accountability responsibilities as prescribed in the <i>Financial Accountability Act 2009</i>, the <i>Statutory Bodies Financial Arrangements Act 1982</i> and the <i>Financial and Performance Management Standard 2019</i>.</li></ul>				
Achievements	<ul style="list-style-type: none"><li>• Monitored the 2023–2024 budget</li><li>• Endorsed the 2022–2023 financial statements</li><li>• Endorsed progress on the Internal Audit Charter and 2023–2026 Internal Audit Plan</li><li>• Monitored the External Audit Plan</li><li>• Monitored the Risk Register</li><li>• Provided guidance on the long-term budget position</li><li>• Updated the board with advice on financial governance, risk management and cyber risk.</li></ul>				
Financial reporting	A financial report is provided for discussion at each board meeting to enable members to fulfil their responsibility approve annual budget and financial plans, monitor financial performance including approval of annual financial reports.				
Remuneration					
Position	Name	Meetings/ sessions attendance	Approved annual, sessional or daily fee	Approved sub-committee fees if applicable	Actual fees received
Chair	Mr Chris Johnson	3	\$3,000 per annum	Not applicable	\$3,000
Member	Mr Stephen (Steve) Ryan	3	\$2,000 per annum	Not applicable	*\$2,000
Member	Ms Jane Williams	3	\$2,000 per annum	Not applicable	*\$2,000
No. scheduled meetings/ sessions	Three meetings were held during the reporting period being 7 August 2023, 15 November 2023, and 27 March 2024.				
Total out of pocket expenses	N/A				

\*This fee is also included in the Board reporting table under the approved sub-committee fees (page 9).



## Members

<b>Independent External Chairperson:</b>	Mr Chris Johnson
<b>Appointed:</b>	2 July 2020
<b>Current term:</b>	1 July 2023 to 30 June 2026

Mr Johnson possesses 30 plus years' experience in the professional services industry. He is a fellow of the Institute of Chartered Accountants in Australia and New Zealand as well as England and Wales. Mr Johnson is a graduate of the Australian Institute of Company Directors, Chair of the Department of Housing, Local Government, Planning and Public Works; and a member of the Department of Energy and Climate and is a past Chair of Queensland Health's Audit and Risk Committee.

- Mr Johnson attended all FARM Committee meetings held during the reporting period.

<b>FARM Committee member:</b>	Mr Stephen (Steve) Ryan
<b>Appointed:</b>	2 July 2020
<b>Current term:</b>	1 July 2023 to 30 June 2026

- Mr Ryan attended all FARM Committee meetings held during the reporting period.

<b>FARM Committee member:</b>	Ms Jane Williams
<b>Appointed:</b>	2 July 2020
<b>Current term:</b>	1 July 2023 to 30 June 2025

- Ms Williams attended all FARM Committee meetings held during the reporting period.

## Executive Leadership Team

HWQld's Executive Leadership team is responsible for delivering the agency's legislative requirements within a compliant corporate governance framework and for providing strategic and operational guidance and comprises:

- Chief Executive Officer: Dr Robyn Littlewood
- Deputy Chief Executive Officer: Ms Gemma Hodgetts
- Chief Operating Officer: Mr Mark Tuohy
- Senior Director – Health Promotion: Ms Judy Nean
- Director – Business and Governance: Ms Jennifer Kenny.

In March 2024, the Executive Leadership team expanded to incorporate the positions of Senior Director – Health Promotion; and Director – Business and Governance, due to the broadening and diversity of responsibilities and programs across the agency.

### *Chief Executive Officer, Dr Robyn Littlewood*

The Chief Executive Officer (CEO) reports directly to the board and directs the overall efficient, effective and strategic direction of HWQld. The CEO is responsible for the day-to-day administration of HWQld, including management and performance of the CEO's functions in accordance with the HWQld Act. Dr Littlewood was appointed pursuant to section 32 of the HWQld Act by the Governor in Council, with the approval of the HWQld Board, for a four-year term commencing 18 November 2019 and has been reappointed for a further four-year term commencing 18 November 2023.

With over 25 years' experience in clinical care, research and education, Dr Littlewood has made significant contributions to paediatric healthcare. Dr Littlewood has authored over 100 publications and has trained hundreds of students over two decades of frontline service.

Leveraging a systems-based and collaborative approach, Dr Littlewood continues to drive research and data outcomes in the area of health and wellbeing. Dr Littlewood leads a dedicated team focused on making healthy happen for all Queenslanders, with a particular focus on improving health outcomes for our next generation.

Dr Littlewood holds a raft of formal qualifications including a Bachelor of Science and Postgraduate Diploma in Nutrition and Dietetics, a Master of Medical Science, a Master of Business Administration and a PhD. Dr Littlewood has also completed a number of postgraduate qualifications in executive leadership and is a member of the Australian Institute of Company Directors. Dr Littlewood holds Adjunct Professor appointments from UQ, QUT and Griffith universities, has been awarded Fellow of Dietitians Australia, the Barbara Chester Award and QUT Health Alumni of the year in recognition of her outstanding contribution to the dietetics profession.

### *Deputy Chief Executive Officer, Ms Gemma Hodgetts*

The Deputy Chief Executive Officer leads the planning, direction and controlling of HWQld's business and is responsible for providing strategic and tactical advice, direction and support to the Chief Executive Officer and the organisation to ensure the delivery of key functions and seeks to identify, develop, and implement new opportunities. This is achieved through the building and fostering of relationships with key stakeholders and sectors with a commitment to collaborative and effective partnerships to implement evidence-based, sustainable solutions. The Deputy Chief Executive Officer leads the consultation and facilitation of executive information and provides expert advice with respect to executive government processes including policy, cabinet, parliamentary and ministerial liaison.

## About HWQld

Ms Hodgetts has a Master of Business Administration, qualifications in business and policy analysis and more than 20 years' experience in governance, operations, media strategy, compliance and risk, process improvement and management. Ms Hodgetts was invited to join UQ as Adjunct Senior Fellow in the Faculty of Health and Behavioural Sciences. Ms Hodgetts is a graduate of the Australian Institute of Company Directors (GAICD) and is an Institute of Public Administration Australia (IPAA), Queensland Division Council Member.

Ms Hodgetts joined HWQld in February 2020, prior to which she held senior leadership, policy and governance roles within the Departments of Health, State Development and Community Safety. Through these roles, she has led the provision of strategic advice and service delivery options for government. Gemma's contributions centre on reforming engagement practices and system leadership in the delivery of policy and strategic advice.

### *Chief Operating Officer, Mr Mark Tuohy*

The Chief Operating Officer leads the business, corporate governance and service delivery functions and drives the day-to-day delivery of organisational performance. A strong focus of this role includes the oversight of business planning and continuous improvement to deliver the highest standards of operations and corporate governance, aligned with the strategic directions of HWQld.

Mr Tuohy is a qualified lawyer with approximately 16 years' experience working as a solicitor in private practice and as a government lawyer, including as an in-house lawyer with Queensland Health. Mr Tuohy is a graduate of the Australian Institute of Company Directors (GAICD) and has extensive experience in governance and compliance in a government and health context. In February 2024, Mr Tuohy was appointed as an inaugural external advisor member of Griffith University's Health Group Advisory Board.

Prior to his appointment as Chief Operating Officer, Mr Tuohy was Director of the HWQld Implementation Team where he coordinated activities required to ensure HWQld's commencement of operations on 1 July 2019.

Mr Tuohy's management and operational experience includes undertaking a variety of other senior roles in Queensland Health, including as Cabinet Legislation and Liaison Officer and Director roles in Legislative Policy, the Mental Health Branch and the Office of Health Statutory Agencies – a role providing support and advice to the former Deputy Premier, Minister for Health and Minister for Ambulance Services and the Director-General Queensland Health in relation to health portfolio statutory agencies, including the monitoring of key governance compliance requirements and application of whole-of-government policy and legislation.

### *Senior Director – Health Promotion, Ms Judy Nean*

Ms Nean is a public health expert with over 30 years' experience spanning state, regional, and local government. As the Senior Director of Health Promotion at HWQld, she oversees the Prevention Systems team in championing a comprehensive prevention agenda across the health and education systems. Her work aims to improve food and physical activity systems, create healthier communities, provide equitable access to effective prevention and supportive healthcare, and promote positive, inclusive and respectful health and weight-related messaging.

Judy holds a Master of Medical Science (Research) from The University of Queensland, a Graduate Diploma in Nutrition and Dietetics, and a Bachelor of Applied Science from Queensland University of Technology.

### *Director – Business and Governance, Ms Jennifer Kenny*

The Director of Business and Governance is responsible for ensuring the optimal delivery of contemporary corporate services across HWQld, including financial and human resource management; grant administration; contract and procurement services; risk, information, and knowledge management; and support to the HWQld Board and FARM Committee.

Ms Kenny is an experienced public sector professional with over 20 years' expertise in governance, policy and legislative reform, industry regulation, and Ministerial, executive, and corporate services. Ms Kenny joined HWQld in 2021, before which she held a variety of leadership, policy, and governance roles in Queensland Government agencies including the Departments of Transport and Main Roads, Community Safety, Queensland Corrective Services, the Public Safety Business Agency, and the Crime and Misconduct Commission.

Ms Kenny holds a Master of Public Administration, a Bachelor of Behavioural Science, and a Bachelor of Arts in Criminology and Criminal Justice from Griffith University.

## Organisational structure and workforce profile

HWQld has a diverse and skilled workforce that includes dietitians, public health nutritionists, nurses, health promotion officers, research fellows, policy experts, strategic communications specialists, digital and data analysts and administration officers. This diversity of skills is both a result of, and a necessary requirement for successful delivery of our functions.

As at 30 June 2024, HWQld had an establishment of 62.18 full-time equivalent (FTE) positions, with a head count of 74 people including full-time, part-time and temporary employees. The HWQld workforce profile has expanded from establishment and planning in 2019–2020 to the present focus of implementation delivery.

HWQld's workforce is primarily permanent with 78 per cent of FTEs employed in permanent roles and 22 per cent of FTEs employed on a temporary basis. Women make up 78 per cent of managerial positions (being positions at or above Administration Officer 7 level).

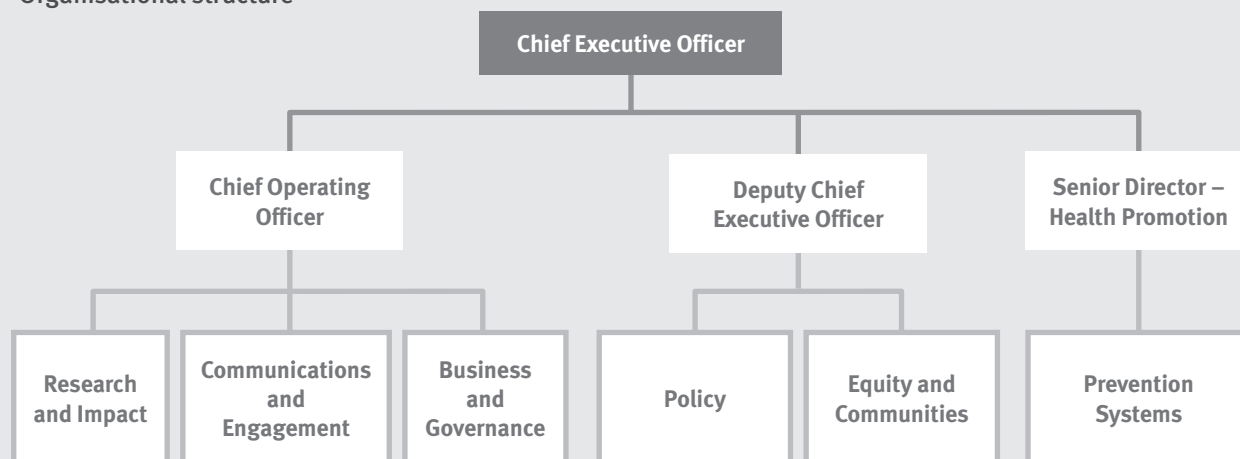
*\*MOHRI FTE data for fortnight ending 30 June 2023.*

The Queensland public service values guide the behaviours and decision-making of all employees.

Six teams deliver on HWQld's program of work spanning across the spectrum of prevention, in primordial, primary, secondary and tertiary prevention: The teams are as follows:

- **Research and Impact** – facilitating the creation and application of a robust research evidence base coupled with a systems-based approach to inform policy, programs and investment, to generate a positive impact and improve population health and reduce health inequities in Queensland.
- **Communications and Engagement** – leading contemporary and strategic marketing, communication and engagement activities to support people to make healthy choices through the delivery of statewide, integrated social marketing and behaviour change campaigns, communications activities, community sponsorships and corporate partnerships.
- **Business and Governance** – providing optimal delivery of contemporary corporate services across HWQld, including financial and human resource management, grant administration, contract and procurement services, risk and information management, and support to the HWQld Board and FARM Committee.
- **Policy** – developing and implementing strategic policies relevant to the agency's remit through research, analysis and consultation. Coordinates HWQld's strategic change agenda, acting as the central point of contact for Government and other organisations. Provides whole of agency project management and advice, ensuring efficient and effective delivery of key strategic priorities. This enables the organisation and its partnerships to deliver effective, measurable and sustainable system-wide impact.
- **Equity and Communities** – responsible for the implementation and coordination of *Making Healthy Happen 2032 – A strategy for preventing obesity in Queensland*; and *Gather + Grow 2023–2032 – Queensland Remote Food Security Strategy*.
- **Prevention Systems** – driving a prevention agenda to integrate and embed chronic disease prevention, early intervention and access to supportive care in the health and education systems across the life course. This includes utilising models of care, statewide prevention programs, digital solutions, and education and training underpinned by research and evaluation.

### Organisational structure



# Why do we need a generational shift?

Australia continues to grow, with Queensland having the second highest population growth rate at 2.7 per cent, above the national average of 2.5 per cent. Queensland is now home to 5.4 million+ (5,495,500) persons as of 2023<sup>1</sup>. The state is predicted to reach between 6.0 and 6.4 million persons by 2032<sup>1</sup>.

- 2.73 million (68 per cent) adults aged 18 or older in Queensland were overweight or obese in 2022, with half of this population group having obesity (1.37 million)<sup>2</sup>. Nationally, almost 13 million Australian adults (66 per cent) aged 18 or older are overweight or obese<sup>2</sup>. Almost half of this population falls into the obesity category (32 per cent) with obesity prevalence in Australia predicted to increase to 47 per cent by 2035<sup>2,3</sup>.
- One in two (49.9 per cent) Australians had at least one chronic condition in 2022 with mental health and behavioural conditions being predominant (26 per cent)<sup>2</sup>. In Queensland, 53.6 per cent had at least one chronic condition in 2022, above the national prevalence<sup>2</sup>. Mental health and behavioural conditions were also predominant in Queensland, and above the national prevalence, at 31 per cent<sup>2</sup>.
- In 2023, Australians lost 5.6 million years of healthy life due to living with non-fatal illness (54 per cent) and dying prematurely (46 per cent)<sup>4</sup>.

## Population sub-groups

Structural barriers in Australia hinder equal access to health-supporting behaviours and wellbeing. Social groups and populations experiencing inequity by systems and health infrastructure include Aboriginal and Torres Strait Islander persons, people in rural and remote areas, individuals experiencing socioeconomic disadvantage, culturally and linguistically diverse communities and persons with disabilities<sup>5</sup>.

As of 2021, 5.2 per cent of Queensland's population identify as Aboriginal and/or Torres Strait Islander and the number of Queenslanders identifying as Aboriginal and/or Torres Strait Islander increased almost 28 per cent from 2016 to 2021<sup>1</sup>. Around seven million (28 per cent) Australians live in rural and remote areas as of June 2022<sup>1</sup>. Seven of the 10 most disadvantaged local government areas in Australia are in Queensland as of 2016, and in 2018 there were 4.4 million (18 per cent) Australians with disability<sup>6,7</sup>. People in rural, remote, and lower socioeconomic areas, along with those with disabilities and Aboriginal and Torres Strait Islander people, face higher rates of illness, hospitalisation, and death compared to other Australians<sup>8</sup>.

HWQld's commitment to preventive health, health equity, and health promotion through initiatives such as Making Healthy Happen and Gather + Grow starts at viewing data, information, and stories through a systems lens. Fostering health equity actions through early intervention, education, and collaboration to increase physical activity and healthy eating, and reduce sedentary behaviours and poor sleep, are at the forefront of our mandate. The time for health equity and health legacy is now.

## The cost to the health system

While the costs of poor health and unwellness are more than financial, health expenditure on chronic disease is especially expensive in terms of dollars spent on treatment. Health expenditure information for 2019–2020 for a subset of chronic conditions in Queensland was as follows: \$2.392 billion for coronary heart disease, \$1.994 billion for type 2 diabetes, \$994.8 million for COPD, \$899.9 million for asthma, and \$893.5 million for stroke<sup>9</sup>. Increased spending on healthcare can also place pressure on funding for other portfolio areas.

With nearly one in two Australians suffering from a chronic condition in 2022, and over two in three Australian adults aged 18 and over living with overweight or obesity in 2022, the necessity of preventing chronic disease and addressing determinants of health is clear. Obesity costs Australia \$11.8 billion in 2018, and without intervention, it is projected to cost an estimated \$87.7 billion by 2032<sup>10</sup>. Research shows for every \$1 invested in health prevention, there is a return of \$14 to the wider economy<sup>11</sup>.

## The impact of obesity on the life expectancy of the next generation of Queenslanders

Obesity is associated with shortened life expectancy due to cardiovascular events, diabetes, chronic kidney disease, and several forms of cancer<sup>12</sup>. The life-long consequences of obesity track from childhood into adulthood. Evidence indicates that 90 per cent of children who are overweight or obese, will transition into overweight or obesity in adulthood.

One in four Queensland children live with overweight and obesity. Obesity rates of children in the lowest socio-economic areas are double that presented among the highest socio-economic areas.

Research commissioned by HWQld<sup>13</sup> found life expectancy for children born in the decade from 2023 could drop by up to 4.1 years in the general population if nothing is done to reverse obesity rates. First Nations children could lose up to 5.1 years, potentially widening the life expectancy gap between Aboriginal and Torres Strait Islanders and non-Indigenous Queenslanders. The ill-health consequences of obesity and overweight have been estimated to cost the Queensland health system \$756 million per year.

# How is HWQld responding?

Delivering a change to the lives of the next generation can only be achieved by working together across government, sectors, industry and community. HWQld invests in activities and partnerships which leverage the capacity, capability and experience of partners to achieve systems-oriented improvements and outcomes. In 2023–2024, HWQld administered over \$43.3 million in funding to deliver its functions to support the health system to reduce the impact of chronic disease, shifting the balance towards improving health and wellbeing, to create a healthier and more sustainable future for Queenslanders.

We have created a vision for the next generation of children in Queensland.

The GenQ Vision is a connected, coordinated effort to collectively shift the systems that hold obesity, food insecurity and inequities in place. HWQld is focused on four priority areas and key strategies that will enable a response which is required to address the challenge and enable healthy weight and healthy living for all Queenslanders.

HWQld's bold vision is for GenQ (<https://hw.qld.gov.au/gen-q/>) to create a positive and lasting generational shift to improve health and wellbeing for all Queenslanders, with a particular focus on children and young people.

GenQ encompasses five key strategies and a suite of supporting activities designed to reduce inequities across the system and improve the lives of future generations including:

- **Gather + Grow 2023–2032 – Queensland Remote Food Security Strategy:** aims to improve food security through community-driven solutions at individual, family, community, and system levels and will prioritise local food production, logistics and supply chain, healthy housing, and healthy communities.
- **Making Healthy Happen 2032 – A strategy for preventing obesity in Queensland:** informed through extensive consultation with 1300 individuals and organisations, with the goal of changing systems to prevent, reduce and treat obesity.
- **Thriving Lives, Connected Communities – Queensland's Commitment to Mental Health and Wellbeing:** The initial step in a phased approach to developing a statewide mental health and wellbeing strategy package, co-led by HWQld and Queensland Mental Health Commission, to improve the mental health and wellbeing of all Queenslanders.
- **Queensland Equity Framework:** a draft framework that aims to create a shared understanding of the underlying causes of inequitable social outcomes for Queenslanders and identify the joined-up, systemic solutions needed for change.
- **Queensland Clinical Prevention Framework:** a draft framework in development, that brings together stakeholders across the health continuum to establish a shared agenda for integrating prevention into primary, secondary and tertiary care.



The map (right) represents the locations of HWQld's activities and initiatives across Queensland in 2023–2024, strengthened by digital resources, media campaigns and social marketing.

In order to support all of these planned strategies, HWQld is partnering and leveraging. By driving collective leadership and accountability through the coordination of cross-government governance groups, we can support the development and delivery of our comprehensive, equity-informed policies, strategies and actions which reflect the voice of Queenslanders. These collaborative partnerships harness the knowledge, skills and resources to deliver innovative and creative initiatives with shared value. Community partnerships amplify the collective voice of the most impacted stakeholders to co-design and deliver initiatives which are responsive to local context. Research partnerships foster prevention research and knowledge translation. HWQld's funded partnerships enable the delivery of prevention programs with broad reach and impact in promoting the health and wellbeing of Queenslanders.

By building and nurturing connections and synergies, our diversity of partnerships is harnessing collective power to address complex health and wellbeing challenges, amplifying the impact of prevention efforts and driving sustainable and transformative change for the improved health and wellbeing of Queenslanders.



# 1. Queensland Remote Food Security

- Not everyone has the same opportunity to exercise their Human Right to food. Systemic challenges mean that some Queenslanders are more likely to experience challenges accessing a quality, healthy diet that meets their dietary needs and cultural preferences.
- Reliable access to nutritious food and the ability to safely store, prepare and consume it, is fundamental to good health and wellbeing. Food insecurity is associated with poorer nutrition and health outcomes such as overweight and obesity, diabetes, heart disease, and poor mental health and wellbeing. Food insecurity has the potential to exacerbate health inequities, particularly for Queensland remote Aboriginal and Torres Strait Islander communities.
- In Queensland, food insecurity is compounded by geographical isolation and colonisation among other drivers of inequity. Food sold in Far North Queensland Aboriginal and Torres Strait Islander communities travels almost 3500kms to remote stores. This food is often poor quality, up to 30 per cent more expensive<sup>14</sup>, and of lesser variety. As a result, food insecurity disproportionately impacts those living in remote areas, particularly Aboriginal and Torres Strait Islander communities. Due to these challenges, food insecurity is experienced by least 31 per cent of Aboriginal and Torres Strait Islander peoples living in remote Australia<sup>15</sup>.

## Gather + Grow Remote Food Security

### Gather + Grow 2023–2032 Strategy and the Gather + Grow Action Plan 2023–2026

- **Gather + Grow 2023–2032 – Queensland Remote Food Security Strategy** (The Strategy) (<https://www.hw.qld.gov.au/gather-grow>) was released in November 2023 and developed in partnership with Queensland remote Aboriginal and Torres Strait Islander communities, multiple sectors and across all tiers of Government. HWQld is now taking a leading role in co-ordinating its implementation by establishing appropriate governance and reporting processes. HWQld will also drive the delivery of a series of enabling actions that will improve the impact of The Strategy.
- The Strategy is supported by a Steering Committee with representatives from all tiers of government. This collective leadership model focuses on improving outcomes in Aboriginal and Torres Strait Islander remote communities.
- **Gather + Grow Queensland 2023–2032 – Remote Food Security Action Plan** (The Action Plan) (<https://www.hw.qld.gov.au/gather-grow>) will deliver 23 actions through the commitments of 19 Government agencies with a focus on communities in the Far North and Lower Gulf. It will set the foundations for change by establishing the right partnerships, data, and evidence, and by testing solutions. It will deliver a multi-strategic response to food insecurity through four community-identified priority areas that will reduce systemic barriers and activate local solutions:
  - Optimising logistics and supply chain performance and resilience to ensure quality, affordable, healthy food is consistently available all year round.
  - Improving the accessibility and availability of healthy food by creating supportive settings for sustainable local food production.
  - Empowering healthy communities by building awareness, capability, and environments for good nutrition.
  - Supporting healthy homes that enable the utilisation of healthy food with reliable and functional health hardware (for example, food cooking and storage facilities).
- HWQld is leading the evaluation of The Strategy and Action Plan including the development of a Measuring Change Framework. To support this, in late 2023, HWQld collected data on the affordability of diets across 35 remote, regional and urban communities.

### Logistics and Supply Chain

- Four actions will support identification of opportunities within remote food supply chains that service remote communities. These actions will be delivered through the leadership of four Queensland Government agencies (HWQld, the Department of Agriculture and Fisheries

(DAF), the Department of Transport and Main Roads and Queensland Health (QH)).

- HWQld are co-ordinating the establishment of a Logistics and Supply Chain Technical Working Group to deliver these actions which will build collective leadership across sectors, monitor progress and explore evidence-based, community-informed solutions.
- HWQld is supporting this priority area through previous work undertaken to map healthy food supply chains in remote Queensland communities through the **HWQld Healthy Food Supply Chain Mapping Study**. (<https://hw.qld.gov.au/gather-grow/healthy-food-supply-chain-study/>)

### Local Food Production

- Four actions will focus on setting up remote communities for success in local food production by supporting them with the right networks, information, partnerships, planning and decision-making tools for local food production. These actions will be delivered through the leadership of three agencies HWQld, DAF and the Department of Treaty, Aboriginal and Torres Strait Islander Partnerships, Communities, and the Arts (DTATSIPCA).
- Similar to Logistics and Supply chain, HWQld are co-ordinating the establishment of a Local Food Production Technical Working Group to deliver these actions.
- HWQld is supporting the delivery of this priority area through continuing to seek and progress partnerships with communities to realise local food production aspirations. For example, HWQld continues to seek opportunities to progress the outcomes of the Mornington Island Market Garden Feasibility Study.

### Healthy Communities

- Four actions will deliver healthier environments across Queensland remote communities through taking a settings-based approach to nutrition education and awareness. These actions are delivered through the leadership of HWQld and DTATSIPCA.
- The Gather + Grow Healthy Communities initiative is engaging with remote communities to understand and address their local food security priorities. This initiative is delivered in partnership with the Aboriginal and Torres Strait Island Community Controlled health sector and other local organisations to develop community food security action plans (CAPs).
  - In Cape York, HWQld continue to partner with Apunipima Cape York Health Council to support completion of 11 CAPs for the Cape York region. To date Apunipima have completed six of 11 CAPs.
  - In the Torres, HWQld has commenced a partnership with Torres Strait Island Regional Council to develop 15 CAPs for the outer island communities.
  - In the Lower Gulf, HWQld's partnership with Gidgee Healing concluded with the completion of the service agreement in March 2024.



- The Gather + Grow Healthy Stores Project is delivered in partnership with Community Enterprise Queensland (CEQ) and seeks to modify in-store environments to promote healthy food purchasing. This financial year:
  - 39 in-store food environment assessments have been completed, across 25 CEQ stores.
  - 10 store managers have been interviewed to understand the project's acceptability and feasibility.
  - 20 CEQ stores, initially recruited for the Healthy Stores research project in 2022, are on track to have all data collected by December 2024, in line with the research protocol.
- Pick of the Crop, HWQld's whole-of-school healthy eating initiative, is being piloted across 10 remote schools that are located within Far North Queensland and the Lower Gulf. The intent of the pilot is to test the cultural appropriateness and feasibility of this program in the remote Aboriginal and Torres Strait Islander context. To date, four schools are confirmed to participate.

### Healthy Homes

- Four actions will focus on challenges and opportunities to ensure homes have the kitchen facilities and equipment needed for a healthy diet. These actions will be delivered in leadership by HWQld, QH and the Department of Housing, Local Government Planning and Public Works to collect data and evidence about healthy food utilisation opportunities in remote homes and work with stores to promote healthy home product purchasing.

## Making Tracks Together

- Making Tracks Together – Queensland's Aboriginal and Torres Strait Islander Health Equity Framework provides the policy direction for HHSs to develop and implement Health Equity Strategies aimed at achieving health equity for Aboriginal and Torres Strait Islander peoples.
- All 16 HHSs have published their inaugural Health Equity Strategy and commenced their initial three-year implementation cycle, which HWQld has supported as a prescribed stakeholder under the Hospital and Health Boards Regulation 2023.
- Through HWQld's *Gather + Grow 2023–2032 – Remote Food Security Strategy* and *Making Healthy Happen 2032*, HWQld is committed to achieving the outcomes of Making Tracks toward closing the gap in health outcomes for Indigenous Queenslanders by 2031.
- HWQld continue to engage in a number of Health Equity working groups, such as the Children's Health Queensland Health Equity Strategy Steering Committee, and regularly attend First Nations Health Equity events.

## 2. Making Healthy Happen

- HWQld's foundational *Making Healthy Happen 2032* (<https://hw.qld.gov.au/making-healthy-happen/>), a strategy for the prevention of obesity in Queensland, and the *Making Healthy Happen Action Plan 2024–2026* were released on 19 May 2024.
- HWQld is committed to reducing the risk factors that contribute to obesity including poor nutrition, physical inactivity, tobacco use, harmful use of alcohol and health inequities.
- The Strategy and Action Plan represents the Queensland Government's strong commitment to enhancing health and wellbeing across the state to create better long-term health and constitute a significant step toward addressing the challenges faced by Queenslanders of all ages and backgrounds in maintaining a healthy weight.
- *Making Healthy Happen 2032* comprehensively responds to the *National Obesity Strategy 2022–2032*.
- It will guide Queensland through to 2032 in the prevention, reduction and treatment of obesity through a focus on:
  - creating supportive, sustainable, and healthy environments;
  - empowering people to stay healthy; and
  - enabling access to prevention, early intervention, and supportive healthcare.
- Informed by the insights of 1296 individuals and organisations, including those with lived experience of obesity, the Strategy is grounded in a deep understanding of the drivers of obesity, enabling it to highlight where action is needed to make changes to the systems that hold obesity in place.
- The Action Plan, which includes 40 actions to be delivered by 11 Queensland Government agencies, establishes strong foundations for change by building collaboration and strong partnerships. HWQld leads 21 actions, co-leads eight, and provides support for a further four.

- Key actions led by HWQld and other agencies include:
  - expanding Pick of the Crop, a school healthy eating program promoting a positive food culture
  - developing and aligning innovative healthy food and drink strategies in everyday settings, such as the A Better Choice healthier food and drink strategies
  - developing a media guide to foster positive, inclusive and respectful weight-related messaging and imagery
  - developing a social marketing strategy to deliver evidence-informed campaigns to promote healthy behaviours
  - encouraging Queensland adults to reconnect and engage in community sport
  - continued investment in school breakfast programs, and
  - delivering the walking and cycling network across Queensland.
- Together, these actions represent a significant step forward in addressing the challenges faced by Queenslanders of all ages and backgrounds in maintaining a healthy weight.
- A Steering Group with members from 10 government agencies has been established to support the development and implementation of the Strategy and Action Plan.
- A Measuring Change Framework offers a roadmap for assessing outcomes and impacts and will ensure alignment with existing HWQld Service Delivery Statement targets, measures to be developed for the National Obesity Strategy, and the National Agreement on Closing the Gap.
- Schools received a total of \$556,000 in grant funding to support the implementation of their locally designed School Action Plans, based on the five components: *Food and Grower Connections; Teaching and Learning; Vegetable and Fruit @ schools; Healthy School Environments and Family and Community Connections.*
- Four HWQld implementation partners hosted Pick of the Crop regional coordinators who recruit, engage and facilitate support for local schools. This includes Bowen Gumlu Growers; Bundaberg Fruit and Vegetable Growers Ltd; Darling Downs Health and Hospital Service (HHS) and Children's Health Queensland HHS. South West HHS continued to invest core resources to work with local schools under a Memorandum of Understanding with HWQld on Pick of the Crop.
- A full cohort of regional coordinators was in place throughout 2023–2024.
- Schools continue to network through locally planned meetings, facilitated by regional coordinators and involving local stakeholders.
- During the year, regional coordinators and HWQld organised diverse activities and events for the schools including:
  - A collaboration with Queensland Fruit and Vegetable Growers, with eight South East Queensland-based growers from across the South East attending Pick of the Crop sessions at the Ekka Education Rural Discovery Days. This five-day event reached nearly 1500 students. Each session involved growers inspiring students on how produce is planted, grown and harvested before students got their hands dirty planting seeds and tasting beans.
  - Two Question & Answer Gardening sessions with Annette McFarlane, gardening presenter and expert, with support from the North Coast regional coordinator and horticulturist. Twelve schools attended the session, receiving expert advice to help set up and sustain their school gardens.
  - An 'Eat the Alphabet' video and resource were produced for schools in the North Coast region and made available to all Pick of the Crop schools, led by Bundaberg Fruit and Vegetable Growers Ltd.
  - A cooking event at the Toowoomba Show, with Costa Georgiadis, landscape architect and TV presenter, inspiring attendees on the benefits of veggies and fruit, and local produce. This was led by the Darling Downs Regional Coordinator, hosted by Darling Downs Health.
  - Mini Farmers Day in the South East region promoting the farm-to-plate experience. In 2023–2024, 12 schools participated in activities such as seed planting, dress ups, farm sing-alongs, and resources from George the Farmer.
  - A Plant to Plate competition was held by the North Queensland based Regional Coordinator, hosted by Bowen Gumlu Growers, to coincide with Burdekin and Bowen Shows in May 2024.

## Healthy schools

### Pick of the Crop expands

- Pick of the Crop (<https://www.hw.qld.gov.au/pick-of-the-crop>) has continued to be a HWQld flagship program in 2023–2024, inspiring Queensland primary school students to learn about and eat more vegetables and fruit through a positive food culture in schools.
- A total of 199 schools across Queensland have participated in the initiative, reaching close to 40,000 students since 2021.
- In 2023–2024, Pick of the Crop expanded across Metropolitan South and Far North Queensland regions. Of the eight Department of Education regions across Queensland, Pick of the Crop now includes schools from six of these including South West Darling Downs; South West; North Coast and North Queensland.
- A total of 192 schools participated in Pick of the Crop in 2023–2024, with 97 new schools joining the initiative and 31 returning for a second year, each accessing grant funding. A further 64 schools have continued implementing Pick of the Crop with no grant funding.

- In 2023–2024, a pilot of Pick of the Crop commenced in Far North Queensland, working with six schools in Cape, Torres Strait, and Lower Gulf regions. Delivered by the HWQld Far North Queensland hub in Cairns, this phase has allowed HWQld to explore and identify necessary adaptations to ensure the initiative is effective, sustainable and aligned with these unique environments. For the pilot, a point of difference is that schools in Far North Queensland co-designed School Action Plans of two years duration, with funding of \$8000 available.
- Pick of the Crop continues to attract media attention, including interest from local newspaper and news outlets across the regions. Online resources and information are available to schools on the Pick of the Crop webpage, and dedicated Facebook group and webpage.

## Healthy food environments

### A Better Choice

- A Better Choice (<https://hw.qld.gov.au/a-better-choice/>) is a comprehensive public health approach to improve access to healthy food and drink options in places outside of the home.
- A Better Choice is based on the Australian Guide to Healthy Eating and applies a traffic light system to classify food and drinks according to their nutritional value.
- In 2023–2024, HWQld continued to implement the A Better Choice Strategy to improve food environments in HHSs and sport and recreation facilities.

### A Better Choice: Hospital and Health Services

- A Better Choice in Queensland healthcare facilities is implemented in HHSs through the *Health Service Directive: Healthier food and drinks at healthcare facilities* (the Directive). HWQld is responsible for assisting HHSs to implement the Directive and to report on HHS performance against the Directive annually, by 30 April every year.
- The Directive was renewed in November 2023 for three years. Changes to the Directive included the requirement for HWQld to report publicly on HHS level performance against the Directive, as well as providing a clear scope for the Directive and formal exemption process for special circumstances.
- HWQld reported the 2023 HHS performance by 30 April 2024, with the data showing an improvement in overall compliance with the A Better Choice targets for food and drinks sold in retail outlets and vending machines.
- HWQld continues to support HHSs to implement the Directive through the funding of access to Nutrition Australia's FoodChecker, an online food and drink database and classification tool, and funding of a support service provided by Statewide Food Services within the Metro North HHS.

- In partnership with HWQld, Deakin University's Centre of Research Excellence in Food Retail Environments (RE-FRESH) commenced a randomised trial with four HHSs to pilot a toolkit to make it easier for HHSs and retailers to implement the A Better Choice Strategy. The final data collection and reporting on results is expected to occur in the second half of 2024.

### A Better Choice: Sport and recreation facilities

- HWQld continued to support the implementation of A Better Choice in Queensland sport and recreation facilities for the second year. This included the development of further resources and case studies to support sporting clubs and venues to implement the A Better Choice Food and Drink Supply Strategy for Queensland Sport and Recreation Facilities.
- To boost healthy options in sport HWQld partnered with Netball Queensland and Touch Football to reach their associations and clubs in 2023. HWQld attended annual conferences with trade displays and had a speaking opportunity to share more about the Strategy. In 2024 HWQld continues to work closely with Netball Queensland as well as Queensland Rugby League, QSport and other state sporting organisations to boost awareness of and engagement with the Strategy. The support provided by the Department of Tourism and Sport (DTS) is critical to this work's success.
- HWQld is currently working with three large sporting venues (Nissan Arena, Queensland State Athletic Centre, and Sleeman Sports Complex) with support from Stadiums Queensland to boost the healthy options available and promoted to its visitors.

### A Better Choice: 'Pick me' promotion

- As part of A Better Choice, the 'Pick me' promotion is helping customers to identify healthier options in settings where food and drink is available outside of the home.
- Results from the 'Pick me' consumer promotion campaign trial in sport and health care settings for healthier food and drinks were presented at the September 2023 Australian Public Health conference in Tasmania. The campaign influenced one in 10 customers to make a healthier choice and one in five to think about making a healthier choice. In December 2023, HWQld published a Consumer Insights Summary Report, based on the development of the promotional materials and consumer insights collected in May 2023.
- The Pick me campaign trialled in three major hospitals and the Nissan Arena Brisbane in 2023 has now been updated and rolled out at Nissan Arena for the 2024 Netball Season.
- Work is being conducted to understand the acceptability and feasibility of a healthy food and drink marketing campaign on influencing the purchasing behaviour among children in sport and recreation facilities across Queensland. For this, HWQld conducted a survey and collected the views of over 100 Queensland kids. There are plans and approved ethics to publish the results in due course.

## Healthy communities

### ConnectingQ

- Launched 31 October 2023, ConnectingQ is an integrated prevention platform and practical network of individuals who have a role in creating active and healthy communities.
- It has 248 members and continues to grow, with members including local government, non-government, Queensland Government and community, health, and academic agencies. Co-designed with multiple stakeholders, its development continues to be guided by a cross sector working group.
- The network aims to enable and empower members to connect, share and learn across sectors, disciplines, and regions in Queensland. Members are invited to submit details of events, case studies and other resources to share and engage in meaningful exchange. By hosting and promoting virtual online events, the network supports learning with practical tools and engaging content.
- Online Project ECHO® sessions were held in March and June 2024, with a focus on the importance of Effective communication for community engagement and presenting a Case study of Overcoming health inequity in the Logan region.
- The network provides an opportunity to bring together diverse knowledge, expertise from sectors including local government, community, and health, who share goals that may include creating or leveraging healthy, active liveable or inclusive communities, healthy food environments, food security or healthy eating, community engagement, research, planning or design, communications, or policy development.

### Do Your Thing (Bundaberg)

- Do Your Thing (DYT) is a HWQld funded initiative of the 'Building a Healthy Bundaberg' Alliance (BaHB).
- The goal of the initiative is to reduce overweight and obesity in the Bundaberg Region, to below the national average by 2030. The intent is to improve the way programs and services across nutrition, physical activity, mental health and social wellbeing sectors are coordinated, delivered, and communicated across the region.
- HWQld is a lead organisation in BaHB, alongside the Bundaberg Regional Council (BRC), and Sport and Recreation (Department of Tourism and Sport).
- HWQld has engaged Evidn Australia for a third time from 9 October 2023 to 19 January 2025 to deliver Phase 3 of DYT Bundaberg.

- The third phase will focus on the transition and legacy work which has been designed to ensure DYT is embedded into the Bundaberg community beyond the involvement of HWQld and Evidn.
- One important aspect of this work was ensuring best practice governance and leadership. Through a collection of interviews and consultation, a refined governance structure was achieved (29 March 2024) to ensure long-term suitability and sustainability of DYT.
- Phase 3 aims to:
  - Elevate the community's engagement with health and wellbeing initiatives;
  - Strengthen integration and capacity among local service providers;
  - Use data and storytelling to foster a positive regional identity; and
  - Cultivate community leadership to drive DYT and sustain the momentum of existing health and wellbeing outcomes.
- Phase 3 will be evaluated in early 2025 and act as a blueprint for how community-led initiatives can overcome significant health challenges in regional Queensland.

### Healthy Eating and Physical Activity Infrastructure Planning program

- DTS and HWQld are working collaboratively to jointly deliver the Healthy Eating and Physical Activity Infrastructure Planning program (formally the Discrete Communities Planning Program).
- HWQld are administering the funding in partnership with DTS, with both agencies involved in the engagement with local government authorities.
- Approved planning activities must be delivered by the 30 June 2025.
- Funding of \$75,315 (GST exclusive) is awarded to each of the 19 Queensland discrete community local government authorities to support the delivery of planning activities to increase physical activity and capacity for healthy eating in their communities.
- Recipients can utilise the funding for planning activities aligning with the below categories:
  - Delivery of sport and recreation activities
  - Design and delivery of sport and recreation infrastructure
  - Increased food security or infrastructure that will enable healthier eating options.



## Reducing health inequities

- **Agency partnerships** HWQld drives change through strategic partnerships to deliver policy priorities and empower communities to prevent chronic disease and obesity, improve equitable health outcomes and wellbeing.
- Leadership, collaboration, and working together across all levels of government, sectors and community are some of the five key enablers that underpin *Making Healthy Happen 2032* in driving successful action to positively influence the systems that contribute to obesity and poor health outcomes for Queenslanders. The purpose of the *Making Healthy Happen Action Plan 2024–2026* is to establish strong foundations for change by building mechanisms for collaboration and cultivating strong partnerships.
- HWQld continues to contribute to Queensland cross-government strategies and partner with other Queensland Government agencies:
  - HWQld currently leads specific actions under the *Communities 2032 Strategy*, *Queensland Walking Strategy 2019–2029*, *Queensland Cycling Strategy 2017–2027* and associated action plans.
  - Since 2021, HWQld's partnership with DTS aims to support Queenslanders to lead healthier and more active lives. Shared governance arrangements together with a Memorandum of Understanding (MOU) and annual Shared Initiative Plan provide a solid foundation for collaborative effort around agreed priorities. Key achievements resulting from the partnership include:
    - ActiveKIT co-investment and shared communication opportunities
    - Securing Healthy Eating and Physical Activity Infrastructure Planning program funds (contract signed in November 2023)
    - Boosting awareness and engagement with the *A Better Choice Food and Drink Supply Strategy for Queensland Sport and Recreation Facilities*.
    - An ongoing partnership between HWQld, DTS, BRC and various local health organisations continues to strengthen the foundations for community-led outcomes, with Phase 3 of the DYT Bundaberg initiative focusing on strengthening community leadership to sustain the momentum of existing health and wellbeing outcomes.
  - Commencing in 2020, HWQld's partnership with South West HHS aims to provide a coordinated approach to achieving shared outcomes for healthy weight and improved health and wellbeing in the region. Supported by shared governance arrangements and an MOU, the partnership has provided a foundation for collaborative effort including:
    - Delivery of the 'Support healthy ageing and prevention of chronic disease in adults' ECHO® series; and
    - Implementation of a Prevention Model of Care pilot that offers a single-entry point to prevention programs and services in the Maranoa Regional Council area.
  - ConnectingQ is working to establish the foundations for cross-sector collaboration and networking through connecting, learning and sharing knowledge and skills to support active and healthy communities.
  - A partnership governance approach was employed to develop the Equity Framework to help understand the causes of inequity and how to address it. This included partnerships across Queensland Governance agencies and a Community Governance Group with nine members who used their lived experience of inequity to provide insight.

## ActiveKIT (Knowledge, Innovation, Technology)

- ActiveKIT is an example of a productive collaboration between HWQld and DTS.
- The objective of ActiveKIT is to support innovative solutions within the active industry to increase physical activity opportunities for Queenslanders and contribute to system-wide capability improvements.
- Since 2020, ActiveKIT has ensured more people move more often through providing \$7.5 million over two rounds of funding, of which HWQld co-invested \$1.5 million.
- Round 2 was awarded in October 2022. 38 projects across the state have been supported and where relevant Round 2 Projects are continuing to be completed, with the majority finalised by 30 June 2024.
- HWQld and DTS have supported many launch events, including the launch of the Move It NQ App:
  - Move It NQ (<https://www.moveitnq.com.au>) is an initiative of the North Queensland Sports Foundation and delivers innovative, fun community physical activity programs for those who need it most across the region.
  - The Move It NQ app strengthens an interactive hybrid health and wellbeing platform that provides updates about physical activities from yoga to park runs to netball, and its launch which was made possible by \$100,000 ActiveKIT funding (<https://www.dtis.qld.gov.au/sport/funding-programs/activekit>).
- HWQld have supported the evaluation of the ActiveKIT initiative, which included key stakeholder engagement and past ActiveKIT recipients to help inform the future direction of ActiveKIT in Queensland.

### 3. Thriving Lives, Connected Communities – Queensland’s Commitment to Mental Health and Wellbeing

- HWQld is leading the development of a Queensland mental health and wellbeing strategy package in partnership with the Queensland Mental Health Commission.
- Approximately one in two Queenslanders will experience mental ill-health in their lifetime<sup>16</sup> and this strategy package will build on current action to support Queenslanders’ mental health and wellbeing and provide a guide for future action to promote wellbeing to support mental health outcomes.
- Thriving Lives, Connected Communities is the first step in delivering on the Queensland Government’s response to Recommendation 19 of the Mental Health Select Committee’s inquiry into improving the mental health and wellbeing of Queenslanders.
- For every \$1 spent on mental health and wellbeing promotion, prevention and early intervention, there is an expected return of over \$8<sup>17</sup>.
- The strategy package builds on existing Queensland Government action to support wellbeing and prevent mental ill-health, including the social determinants of health, such as housing.
- The approach is strongly based in evidence including a systematic review of evidence and a system scan of national and international mental health and wellbeing strategies.
- Following consultation, key themes and learnings from more than 450 Queenslanders are helping to shape this work.

### 4. Queensland Equity Framework

- HWQld progressed development of an Equity Framework (Framework) as policy priority to help deliver on the GenQ vision.
- The Framework is a direct response to HWQld’s legislative remit under the *Health and Wellbeing Queensland Act 2019* to address health inequity.
- Development of the Framework also supports HWQld’s commitment under the *Communities 2032 Action Plan 2022–2025* to develop a Queensland equity framework to support Queensland Government and non-government structures, policies, practices and services to address the causes of inequity.
- It is a conceptual framing of the causes of inequity and how to overcome them. The key is to understand the interacting factors that leave people left out, doing without, and hindered and then intervene and work differently to bring about change.
- Intervening differently includes welcoming diverse views, widening perspectives and acknowledging biases. It also involves amplifying strengths, intervening early and working to remove unfair obstacles that are at the root of inequity. Working differently means choosing to prioritise equity, and collaborating to drive meaningful change.
- In 2023–2024, HWQld continued to develop the Framework and associated materials through an evidence and community-informed approach.
- Having previously completed an investigation of the drivers of inequity, evidence reviews, mapping of system actors, and interviews, in 2023–2024 HWQld tested and refined sections of the Framework. This was a collaborative creation process, including a Community Governance Group who used their lived experience of inequity to provide insight and guide solutions.
- Further consultation conducted with Queensland Government agencies and academic experts provided support for the model.
- The Framework has supported HWQld to apply an equity lens in the development of strategic priorities in 2023–2024. It is intended for release on the HWQld website to ensure it is available for broader use, building on extensive work already being undertaken across agencies to boost equity.

## 5. Clinical Prevention

HWQld has led extensive consultations on a Clinical Prevention Framework, aiming to establish a consolidated, multi-level and coordinated approach to effective prevention, timely identification, and early intervention of chronic conditions to improve the health outcomes of Queenslanders.

HWQld delivers a suite of clinical prevention initiatives designed to integrate and embed prevention into the health system, aiming to reduce the burden of chronic disease at an individual, service and system level. The Framework details the principles and system building blocks to reduce the burden of chronic disease by targeting modifiable risk factors by:

- Keeping people well
- Identifying risk and early onset of disease; and
- Providing timely holistic support responsive to individual needs.

### Podsquad

- **Podsquad** (<https://www.playpodsquad.com.au>) is a free, play-based wellbeing program helping children and families to build healthy habits together. Developed in partnership with researchers at The University of Queensland and a creative and digital services provider, the program supports children aged five to 12 years to adopt and maintain health-promoting behaviours in the areas of nutrition, physical activity and sleep. Podsquad is delivered through mobile applications (apps) for Apple and Android devices.
- The app was launched on 6 July 2023. A highlight of the launch campaign was the delivery of 'Podsquad Live', an educational performance developed with the Queensland Performing Arts Centre. Premiering at the Ekka, it was performed 27 times over 10 days, attracting hundreds of families and showcasing the program's adaptability and potential beyond the app. Other launch engagement activities included clinician webinars attended by over 200 health professionals, The Sunday Mail Transurban Bridge to Brisbane (15 October) and Welcome the Babies event in Springfield (22 October).
- Just prior to the one-year anniversary of the app launching, the app has been downloaded more than 14,500 times and has maintained a high star rating on the app stores.
- Khemistry, Podsquad's creative and digital agency, received four awards for Podsquad at the Brisbane Advertising and Design Club Awards 2023, a prominent industry event.

- Key activities in 2023–2024 following launch:
  - Attending and hosting a number of events including the Podsquad Pop up community event at the Governor's house (9 April 2024) and an interactive presence at the Roma Show (9–11 May 2024) in collaboration with South West HHS.
  - A comprehensive, integrated, and multi-phase digital marketing campaign reached families and health professionals across Queensland to raise awareness and drove downloads. Marketing activities included digital and print promotions in 725 GP practices and 52 Aboriginal Medical Services (December 2023 – May 2024), and a paid social media campaign (December 2023 – February 2024).
  - Working with Podsquad's key partners, The University of Queensland, Children's Health Queensland HHS, and Queensland Performing Arts Centre, to maximise benefits for the program through cross-sector collaboration.
  - HWQld staff presented at three conferences:
    - *Prototype of an app-based wellbeing program for children and families* at the Dietitians Australia conference in Melbourne (23 July 2023).
    - *Applying behaviour change theory and design thinking to develop Podsquad, a play-based wellbeing app for children and families* at the Australian & New Zealand Obesity Society Annual Scientific Meeting in Adelaide (18 October 2023).
    - *How cross-sector collaboration and co-design strengthened the development and implementation of Podsquad, a new wellbeing app for Queensland families* at the Early Years Conference in Cairns (16 May 2024).
  - Building further in app and out of app content to increase engagement with the program.

### Research Project – Podsquad

- A Podsquad social media campaign commenced on 23 December 2023, with adverts promoting the first Podsquad Research Study (from 29 January 2024), with incentives to complete the survey to increase participation rates. This concluded on 26 February 2024.
- The manuscript on the development of Podsquad was led by Ms Rebecca Farletti, Project Lead – Podsquad, Senior Public Health Nutritionist, with co-authors including Dr Li Kheng Chai, Research Fellow and researchers from the Health and Wellbeing Centre for Research Innovation. The manuscript has been submitted for journal publication.
- Planning has commenced for an NHMRC Partnerships grant application, led by Dr Jacki Walker, Senior Research Fellow and Podsquad Research Lead.
- Initial feasibility study update – 43 responses for baseline survey, eight responses for one month follow-up survey. Discussions in place to increase engagement.

## Logan Healthy Living

- Logan Healthy Living is a community-focused and integrated approach to chronic disease prevention and management delivered by UQ Health Care in partnership with HWQld, with support of alliance partners The University of Queensland, Metro South Health, Brisbane South Primary Health Network and Griffith University.
- It provides evidence-based lifestyle management programs that offer practical support and empower individuals to address the physical, mental, emotional, and situational factors that influence their health and wellbeing.
- Delivered by a student-infused allied health workforce in an environment of teaching and research, the programs integrate HWQld's clinical prevention resources and suite of prevention programs, including the My health for life group program.
- The research component of Logan Healthy Living is led by Associate Professor Sjaan Gomersall and colleagues from the Health and Wellbeing Centre for Research Innovation supporting the model of care to be both evidence informed and evidence generating.
- In July to December 2023, Logan Healthy Living reported:
  - 151 new program participants.
  - high attendance rates for intake assessments (80 per cent) and program completion (70 per cent), consistent with previous reporting periods;
  - very high participant satisfaction (98.2 per cent to 100 per cent satisfaction reported across all six domains) and student satisfaction (88 per cent to 100 per cent reported across all five domains); and
  - participant improvements in diabetes self-management, self-efficacy, physical activity, fruit and vegetable consumption, and physical function, and reductions in waist circumference and diabetes-related stress.
- More than 550 participants have engaged with Logan Healthy Living's lifestyle management programs since 2021.
- Preliminary evaluation data has demonstrated participant improvements at 12-month follow-up in:
  - Physical activity levels.
  - Fruit and vegetable consumption.
  - Confidence in managing diabetes.
  - Weight and waist circumference; and
  - Participation in community-based programs outside of Logan Healthy Living.
- Achievements in 2023–2024:
  - Logan Healthy Living has been introduced as the primary case example for the HLTH1000 course (Professions, People and Healthcare) at The University of Queensland related to social determinants of health, health systems and interprofessional practice. This course is delivered to over 1500 students in the Faculty of Health and Behavioural Sciences.

- Approximately 9500 hours of student placements were delivered for 50 students across both Griffith University and The University of Queensland and included a range of clinical placements as well as project specific placements within the health faculties.
- Research outputs co-authored with teams of researchers, students (undergraduate and PhD), HWQld staff and clinical staff from Logan Healthy Living included conference abstracts, publications and grants.

## Project ECHO®

- Project ECHO® Learning series (<https://www.hw.qld.gov.au/echo/>) can be accessed by general practitioners, medical specialists, nurses and allied health professionals and is an online knowledge sharing model that expands the capability of health and other professionals to build prevention in their daily work through engaging, interactive, conversational communities of practice.
- Healthy Kids ECHO® Series is delivered twice a year in partnership with Children's Health Queensland and The University of Queensland. It has been delivered to health professionals across Queensland to build the capability of primary health care providers supporting children and families to build better health and lifestyle habits together.
- Develop Skills in Early Childhood Nutrition ECHO® Learning Series was hosted in partnership with Nutrition Australia Queensland. This four-part series was designed to provide an upskilling opportunity for Early Childhood Educators, Centre Cooks and Playgroup Facilitators around key nutrition milestones of children 0–5 years. The series was attended by six early childhood professionals from Cairns, the Gold Coast, and across Brisbane. Following the reduced number of attendees, the series has commenced a review to better understand the learning needs of the early childhood workforce. This review aims to inform future professional development initiatives and ensure that they meet the evolving needs of early childhood professionals.
- The Healthy Ageing ECHO® series was a collaborative effort between South West clinicians and HWQld to co-design and deliver a series focused on supporting healthy ageing and prevention of chronic disease in adults within the South West Region. The series was attended by 24 health professionals including 13 Medical officers.
- ConnectingQ ECHO® network has delivered two sessions to 43 professionals across Queensland including Bungalow, Townsville, Rockhampton, Gold Coast, Sunshine Coast and across Brisbane. This series aims to connect members, provide a platform to share knowledge and learn from peer professionals working to support sustainable active and healthy communities across Queensland.



## Prevention program partners

### Deadly Choices

- Deadly Choices (DC) (<https://deadlychoices.com.au>) is the Institute for Urban Indigenous Health's (IUIH) flagship strengths-based health promotion initiative and includes multiple interrelated activities and programs.

### Deadly Choices Healthy Lifestyle Programs

- HWQld funds a range of DC programs that aim to empower Aboriginal and Torres Strait Islander people to make healthy choices for themselves, their families, and communities, to eat good food, exercise daily and to stop smoking.
- HWQld funded DC programs and community engagement strategies include:
  - DC education programs,
  - Good Quick Tukka (cooking and nutrition program)
  - DC Fit (group exercise and fitness program)
  - Traditional Indigenous games
  - DC social marketing and media campaign
  - DC community and sporting events and DC NRL and sporting ambassadors.
- Between 1 July 2023 and 30 June 2024, IUIH has supported 23,000 Queenslanders to participate in 847 DC programs and local community events. These included 286 DC Healthy Lifestyle Education programs, 170 Good Quick Tukka programs, 99 DC Fit programs and 157 Traditional Indigenous Games programs.
- Demographic data shows that in this period:
  - 45 per cent of these programs and activities were delivered outside of Southeast Queensland
  - 12 per cent of participants were located in areas of socio-demographic disadvantage (areas in the bottom 50 per cent of the SEIFA decile index).
  - 50 per cent of participants were male and
  - 35 per cent were from rural or remote communities.
- Participation in DC programs has continued to increase participant confidence in living a healthy lifestyle from 74 per cent pre-program to 87 per cent post-program. Participants in the programs also indicated improved confidence in being a good leader and seeking help for social and emotional wellbeing. Increases were particularly notable in those programs delivered outside of Southeast Queensland.
- DC programs have also demonstrated improvements in fruit and vegetable consumption with 71 per cent of participants reporting achieving the recommended intake of fruit post program, as opposed to 62 per cent pre-program. Smaller increases were achieved for recommended intake of vegetables with 12 per cent of participants achieving five serves per day post-program as opposed to 10 per cent pre-program.

- School attendance has also been positively impacted through the delivery of the DC programs in schools, an unintended outcome that is evidenced through the following feedback.

*"When starting this program, we didn't have as many students attending school but towards the end of the program more students began attending school."*

DC regional team member

- The DC campaigns and suite of programs also provide the mechanism to engage with Aboriginal and Torres Strait Islanders to improve the uptake of the 715 annual health check with local Community Controlled Health Services and engage in other health related care to maintain health and wellbeing.
- In the period 1 July 2023 to 30 June 2024, 2798 program participants received a 715 Health Check with 61 per cent of these in Southeast Queensland, and 39 per cent in regional and rural areas.

### Deadly Choices: Broncos, Cowboys, Titans and Dolphins Partnership

- Uptake of 715 health checks is further supported through the DC Broncos, Cowboys, Titans and Dolphins Partnership that promotes DC lifestyle messages and encourages community members to take a health check.
- In this period the DC Broncos, Cowboys, Titans and Dolphins Partnership held 11 large community and sporting events with the major achievement being the delivery of the annual Queensland Murri Carnival and Junior Murri Carnival for the 14th consecutive year.
- Supported by HWQld and DTS, DC partnered with the Arthur Beetson Foundation to run the annual Murri Carnival event featuring Broncos, Dolphins and Titans NRL Clubs and DC Ambassadors, with players attending and interacting with over 10,000 community members. Players were involved in DC education sessions as well as delivering health messages at the DC educational marquees.
- Other DC major sporting events included the Deadly Maroons, Deadly Choices Touch Carnival (700 participants), and the Torres Queensland Academy of Sport Olympic Future Olympian Day (400 participants).

### My health for life

- My health for life (MH4L) (<https://www.myhealthforlife.com.au>) is a free statewide integrated health risk assessment and healthy lifestyle behaviour change program delivered by Diabetes Australia (DA) and the Healthier Queensland Alliance – a partnership of non-commercial health bodies, including Stroke Foundation, Heart Foundation, Queensland Primary Health Networks, Ethnic Communities Council of Queensland (ECCQ) and the Queensland Aboriginal and Islander Health Council (QAIHC).

## How is HWQld responding?

- Queensland adults continue to take up the MH4L online health risk assessment that provides both an individual chronic disease risk score, and also provides a brief intervention to engage them in a range of tailored MH4L health coaching options to improve wellbeing and reduce their personal risk score. MH4L participant engagement has been specifically designed to align with the needs of Queenslanders, providing the right information, to the right person, at the right time.
- The program is based on six pillars of health: achieving or maintaining a healthy weight; being physically active; eating healthier; living and coping well; safe alcohol consumption; and quitting or reducing smoking. MH4L is accessible in a range of modes including group-based, individual telephone health coaching, online, hybrid and digital options to ensure accessibility and reach across Queensland.
- Culturally and contextually tailored resources for facilitators and participants continue to evolve based on the needs of a range of target communities identified at high risk of chronic disease including Aboriginal and Torres Strait Islander people, culturally and linguistically diverse communities, men, and blue-collar workplaces.
- During 2023–2024, the program initiated a range of new innovative community engagement approaches including a MH4L pharmacy pilot that has generated new opportunities for Queenslanders living in rural communities to engage with their local pharmacy. Evaluation of the pilot is underway and findings will determine the focus over the next year.
- A highly successful MH4L Men's Shed project is currently active across Queensland, engaging men in health conversations to motivate healthy and sustainable lifestyle modifications.
- Following a successful pilot phase, the Men's Shed project initially expanded to nine additional groups in South East Queensland. From February 2024, evaluation outcomes supported further expansion to another ten Men's Shed groups.
- For the period 1 July 2023 to 30 June 2024, 11,354 Queenslanders completed a MH4L health risk assessment. As a result, 2623 commenced a program, participating in either personalised telehealth coaching, community group-based activities, or online.
- Participant retention rates at 71.4 per cent and participant satisfaction rates at 65.3 per cent are evidenced by the following testimonial from a program participant.

*"I did telephone coaching and it was the perfect balance for me. There were regular check-ins with my coach and especially for someone like me from a regional area it's a fantastic way to get involved in the program. My health for life is a great way to make that first step to change your life for the better."*

**Mark, My health for life participant**

- For the period 1 July 2023–30 June 2024 MH4L has reported participant biometric and short term behavioural changes showing 11.1 per cent of participants achieved greater than or equal to 5 per cent reduction in body weight, 65.7 per cent decreased their waist circumference, the proportion of participants eating sufficient fruit increased from 48.2 per cent during session one to 75.7 per cent by session six, and the proportion of participants eating sufficient vegetables increased significantly from 8.4 per cent during session one to 22.1 per cent by session six. In addition, the proportion of participants that met physical activity guidelines increased from 31.4 per cent during session one to 48.7 per cent by session six.

## QCWA Country Kitchens

- The Queensland Country Women's Association (QCWA) continued to successfully deliver the Country Kitchen (CK) program in 2023–2024 **QCWA Country Kitchens program** (<https://qcwacountrykitchens.com.au/>).
- QCWA CK is a statewide health promotion program that aims to improve food and nutrition literacy among people in Queensland, and supports communities to improve their health, particularly those living in regional, rural, and remote areas.
- The program continues to build the health promotion capacity of local QCWA Branches by connecting with QCWA members and empowering them to initiate and deliver CK healthy eating and health promotion activities. The program is delivered across Queensland through QCWA Branches in 20 Divisions across three regions, Southern, Central and Northern.
- Volunteer QCWA members are supported to progress through Levels 1–6 of the CK training PATHway, The PATHway is designed to build the knowledge, skills and confidence of Country Kitchens facilitators to increase outreach in the community. Each training level supports delivery of specific health promotion activities, from delivering healthy eating promotion and awareness raising (Levels 1–3) to healthy behaviour change activities (Level 4–5) and food, nutrition and physical activity related advocacy (Level 6). Trained Facilitators are supported to deliver these activities in their local communities by the Country Kitchens Health Promotion Team Leaders.
- There are currently 294 QCWA members who are trained volunteer CK facilitators, with 65 per cent of the 220 QCWA Branches across Queensland now having a trained CK Facilitator.
- Between 1 July 2023–30 June 2024, 76 CK Facilitators completed the Level 4 and/or five training providing them with the knowledge and skills to deliver Hands on Nutrition workshops. These workshops focus on nutrition education based on the five key messages and/or promote healthy eating through food literacy education and hands on skills.

- The highlight of the CK training pathway for this period was finalisation of the Level 6 – Advocacy training with four training sessions delivered to 47 CK Facilitators, with 100 per cent of those surveyed satisfied with the CK training.
- Between 1 July 2023–30 June 2024, CK Facilitators successfully delivered 1482 healthy eating and health promotion activities in their local communities ranging from recipe promotions and showcases to cooking demonstrations, as well as Hands on Nutrition and Back to Basics cooking workshops in community and school settings.
- These activities are guided by the CK five key messages – encouraging Queenslanders to get more fruit and vegetables into their meals, cook at home, check their portion size, be aware of sugar in their drinks and to sit less and move more.
- Trained CK Facilitators have established and maintained partnerships with 171 organisations across their local communities to support ongoing delivery of these activities and grow opportunities for future activity delivery.
- Key highlights from 2023–2024 program delivery include:
  - the planning and delivery of Hands on Nutrition and Back to Basics workshops in 13 schools across the state
  - engagement with HWQld Pick of the Crop Coordinators in a number of these schools resulting in positive engagement, connections and collaborations across both programs
  - the planning and/or delivery of healthy eating showcases and demonstrations with 13 local councils
  - delivering Hands on Nutrition and Back to Basics workshops with organisations who support newly arrived migrants, refugees and First Nations people
  - support from small regional and rural grocery stores in the delivery of CK healthy eating showcases and healthy recipe promotions.
- The CK program has been instrumental in supporting over 29,000 community members in rural and regional Queensland to be as healthy and active as they can be.
- Another highlight for the CK program for 2023–2024 was the support provided to QCWA members to participate in the Queensland Walks Explore Challenge, a partnership between the 10,000 Steps program and Queensland Walks. Aligned with the program's key message Sit less, Move more, the initiative was successful in engaging five QCWA teams who logged over seven million steps over the month.
- The impact of the CK program on the QCWA and its volunteer members is best evidenced by the following testimonial:
 

*"I truly believe that there is something for everyone in the Country Kitchens program and you can be involved at whatever capacity suits you and your lifestyle. It has a simple message, with a powerful impact on people's health and wellbeing."*

### 10,000 Steps

- Central Queensland University (CQU) has been delivering the **10,000 Steps program** (<https://www.10000steps.org.au/>) for Queenslanders since 2001. Since the program's inception, more than 195,640 Queenslanders have signed up as members, logging more than 117 billion steps and counting!
- 10,000 Steps is an interactive, behaviour change program that empowers Queenslanders to increase their physical activity levels, with resources and strategies to support workplaces and communities to break down the barriers to physical activity and create healthy people and healthy places.
- Individuals and workplaces sign up to the 10,000 Steps platform via the website or mobile phone app to set goals, track their steps or activity such as swimming and cycling and take part in monthly challenges with family, friends, or workplace colleagues.
- 10,000 Steps continues to expand, improve and innovate support and resource options available to Queenslanders to help increase motivation to be more active, underpinned by the message that 'every step counts'.
- Since 2021, there have been a total of 156,778 downloads of the 10,000 Steps app with 74,014 (47 per cent) of those downloads since the release of the newly upgraded app in May 2023.
- During the period from 1 July 2023 to 30 June 2024, 20,895 new Queenslanders registered with the program and 16.76 billion steps were logged by 33,085 active users in 422 postcodes across the state. 100 per cent of these active participants set a daily steps goal with 40 per cent recording a minimum average of 10,000 steps per day.
- In 2023–2024, the 10,000 Steps program continued to be effective at reaching women, younger adults and people living in major cities. 75 per cent of users reached are women, 35 per cent are between 18 and 34 years of age and 64 per cent reside in major cities. This year has seen an increased engagement of priority groups with 4 per cent of new individual participants identifying as Aboriginal and/or Torres Strait Islander.
- Individual impact is best evidenced in the following participant testimonial:
 

*"I am appreciative of the role 10,000 steps program has and does play in me living a healthier and healthy life."*

**Arthur Hadaway, 10,000 Steps member since 2007 who has participated in 75 monthly Challenges and logged more than 80 million steps.**
- In 2023–2024, the program continued to successfully engage workplaces, with 89 per cent of new participants referred to the program as part of a workplace initiative.
- Between 1 July 2023 and 30 June 2024, a total of 186 new organisations registered with the 10,000 Steps program and 313 organisations successfully engaged participants with 3552 Teams competing in 382 Tournaments and Health Challenges.

## How is HWQld responding?

- Ongoing quality improvements this year have resulted in the activation of an advanced email system for Queenslanders. This system allows the setup of email automations including a welcome series for new individuals, campaign emails to share the updates during largescale Challenges, and a tournament success series to support participating organisations getting started. Improving communication that is tailored to the engagement and activities of participants using the Program aims to support Queenslanders to use the program and increase their daily physical activity.
- Significant achievement for the 10,000 Steps program in 2024 was delivery of the Queensland Health 10,000 Steps Challenge. Initiated following the Queensland Health Director-General's commitment to increasing staff connection and participation in physical activity, the Challenge ran from 29 April to 31 May 2024.

*"It's not just a pedometer contest; it's an investment in their physical and mental health. We all know that getting active boosts morale, reduces stress, and sharpens focus."*

**Michael Walsh, Director General, Queensland Health**

- The highly successful Challenge targeted all 16 HHSs, Queensland Health, the Queensland Ambulance Service and health statutory agencies engaging 9206 participants across all participating organisations and resulted in 2.6 million (2,641,508) steps logged over the five-week period.

### Healthier Tuckshops program

- The Queensland Association of School Tuckshops (QAST) continued to deliver the **Healthier Tuckshop** program in 2023–2024 (<https://qast.org.au/about-us/healthier-tuckshops-program/>).
- The Healthier Tuckshops program supports school tuckshop convenors, volunteers and operating organisations with the tools and resources to increase opportunities to offer and promote healthy food and drinks in schools across Queensland, in line with the Queensland Government's Smart Choices Healthy Food and Drink Supply Strategy for Queensland Schools.
- The program is delivered primarily through communication activities, networking and training opportunities designed to engage school tuckshop convenors and volunteers in online and face-to-face network meetings. These activities aim to increase confidence and competence to provide healthy food options within school communities.
- Key highlights from 2023–2024 program delivery include:
  - The Healthier Tuckshops program successfully engaged 243 tuckshop convenors and volunteers from 179 schools at 17 QAST Network meetings held throughout Queensland. Attendance at network meetings continues to increase as compared to previous reporting periods.
  - The program consistently reports an increase in knowledge and confidence of tuckshop convenors to improve menus and provide healthier food and drinks in school tuckshops with 78 per cent of members reporting making improvements to their menus during this period.

- The new Healthy Menu Planning Training course was successfully piloted and evaluated engaging eight participants over two workshops, with planned expansion to continue in 2024–2025 and contribute to the Making Healthy Happen Strategy and Action Plan.
- Feedback to date from participating Tuckshop Convenors has been positive and included the following statements:
  - "The course framework was logical and as someone who is new to the world of tuckshop it gave me a great base."*
  - "The course gave a very good overview of the factors that come into designing a healthy tuckshop menu."*
- The HWQld sponsored 2023 Recipe of the Year competition was highly successful, attracting a 35 per cent increase in entries from 2022. The winning tuckshop was celebrated through national and statewide broadcasts, radio and print media coverage, achieving a cumulative reach of 1.4 million people. Views for the recipe demonstration video surpassed 1000, and more than 1200 people viewed the winning recipe online.
- The Healthier Tuckshops team successfully completed and released two new podcasts and recorded 5308 resource downloads, 465 recipe video views, and 513 recipe downloads directly through the Healthier Tuckshops website.

The annual QAST Tuckshop Survey for 2023–2024 was completed by 157 tuckshop convenors and volunteers, achieving the highest response rate to date. 71 per cent of participants who responded reported feeling more confident in providing healthy foods and drinks on school tuckshop menus, with 83 per cent making menu improvements in the past 12 months. Participants indicated healthy menu planning would help them meet their tuckshop goals in the following 12 months.

### Life Education

- **Life Education Queensland** (Life Ed Qld) (<https://lifeeducationqld.org.au/>) is a non-government provider of fee-based health and wellbeing education modules that target primary school aged children in Queensland schools.
- HWQld has partnered with Life Ed Qld to ensure that funded program delivery focuses on social and emotional wellbeing education including personal safety, respectful relationships, mental wellbeing, digital citizenship, puberty, sexual health, identity and diversity.
- Targeted education module delivery focuses on:
  - Equitable access to the programs for all children, particularly those that need it the most.
  - First Nations children and families
  - Families and children from languages other than English backgrounds
  - School located outside Brisbane, Gold Coast and Sunshine Coast areas
- School located in low socio-economic areas.



- Between 1 October 2023 and 30 June 2024, Life Ed Qld delivered 4711 program modules/sessions to 95,727 students across Queensland.
- Performance reporting for this period demonstrates that Life Education Qld delivered HWQld funded programs to 531 Primary Schools located within priority locations, and an additional 138 within other regions. This equates to 56,723 students within priority regions.

## Prevention Program Collective

- The HWQld Strategic Management Approach (SMA) continues to underpin and guide strategically aligned statewide work with prevention program partners, based on the key pillars of HWQld-led Governance, Evaluation and Communication and Marketing.
- The SMA continues to actively evolve from a traditional funder/provider model to a mutually beneficial partnership that positively impacts chronic disease prevention service delivery practice across Queensland, enhancing and informing collective and quality approaches to prevention program investment.
- A key achievement of this approach is best evidenced by the growing cross-program collaboration generated by the Prevention Program Collective (PPC) group, which provides a collaborative and functional governance model that shapes focus and direction to achieve best practice.
- This PPC consists of Chief Executives of Queensland's peak preventive health agencies who collectively deliver on HWQld's significant investment in a suite of evidence based and high-quality chronic disease prevention programs accessible free of charge to Queenslanders no matter where they live.
- In 2024, HWQld integrated its internally developed prevention programs, Podsquad and Pick of the Crop under this SMA, which will ensure that the delivery, monitoring and evaluation of these 'homegrown' programs is informed by and benefits from any learnings from this well established and successful approach.
- Similarly, the Prevention Program Communication and Marketing Community of Practice group continues to coordinate prevention program related promotion across partner agencies to ensure clear and consistent chronic disease prevention messaging.
- The University of Queensland's Institute for Social Science Research has continued to support and deliver on the high-quality evaluation pillar of the SMA, the Strategic Evaluation of Prevention Programs project. This project ensures that successful and ongoing rigorous monitoring and evaluation activities are undertaken, which provide HWQld with a detailed understanding of the performance and impact of this significant investment.

- Since July 2021, five high-quality infographic Performance Measurement Reports have been delivered on a six-monthly basis. These Reports provide a key data analysis summary based on six-monthly prevention program data submissions.
- This suite of reports continues to provide HWQld with the key mechanism to communicate program performance, outcomes, improvements, and opportunities both internally and externally.
- From July 2021, ISSR worked in collaboration with each program partner to co-design and deliver tailored Evaluation Plans and Program Logic documents that guided the evaluation process with each of the five funded prevention programs over a 2.5-year period.
- Five Prevention Program Evaluation Reports based on key co-designed evaluation questions were delivered in March 2024 with the purpose of deepening understanding of program service delivery, strengthening strategic alignment with HWQld, and ensuring outcomes related to the health and wellbeing of Queenslanders are clearly demonstrated.

## Clinicians Hub

- Clinicians Hub (<https://www.hw.qld.gov.au/hub/>) is a freely accessible and dynamic online resource which supports clinicians at all levels of healthcare to build their knowledge on chronic disease, and associated health behaviours.
- Since its inception, Clinicians Hub has evolved to meet the needs of its users. Clinicians Hub now houses key clinical resources including growth charts, resources to share with patients, and a new *Clinician's Guide to Healthy Kids* podcast series (launched October 2023). Clinicians Hub has continued to expand beyond the original paediatric focus, now including resources and relevant information for clinicians working at all critical life stages.
- Following user feedback through surveys, interviews, and website metrics, in early 2024, Clinicians Hub has commenced the technical build to integrate an interactive library of evidence-based information, prevention programs, and resources. These new features aim to improve user experience and assist clinicians with accessing relevant information for the delivery of effective preventive care.
- Clinicians Hub and the redesign process was presented at the Queensland Child and Youth Clinical Network Forum on 14 May 2024 in Cairns.
- In the last financial year, there have been 16,260<sup>18</sup> views from 7341 users.
- Average engagement time for clinician's hub pages is 1 minute<sup>18</sup>, indicating positive engagement with content.

### First 2000 days

- HWQld plays a key role in embedding prevention across the first 2000 days to improve the health of our youngest Queenslanders. From conception to age five is a critical time to set up a child for life by improving their health, social, and economic circumstances. Supporting the preconception, antenatal and post-natal health of parents has positive intergenerational and lifelong impacts.
- Six submission contributions to national and state-wide strategy consultation responses that relate to the first 2000 days, including the Early Years Strategy, Putting Queensland Kids First, Review of MAIF (Marketing and advertising of Infant Formula), ACCC application to MAIF renewal, Input to FSANZ changes to food standards that relate to infant formula products (A1265), National Mental Health Commission.
- Promoting prevention in the first 2000 days in multiple media presentations that include TV, radio and six internal blogs and four media presentations.
- Supported facilitation of ECHO® Series that relate to the first 2000 days, including two Healthy Kids Series and one Early Childhood Education and Care (ECEC) Series.
- Conference presentations at the Early Years Conference, held in Cairns in May 2023, regarding using ECHO® as a way to build capability in Early Childhood Education Centres.
- Stakeholder/Partners in multiple national collaborations including National Nutrition Network, BHNQ, Let's Grow, TOPCHILD, Go and Grow and Connecting2U (C2U). HWQld were also considered subject matter experts for C2U and have prevention service links embed into this service.
- Mapping work commenced across Queensland, to raise profile of positive and supporting breastfeeding environments.
- Preconception work approved to progress internally and plans to commence active stage on this project by Q4 2024.
- Post-GDM project approved to progress, in partnership with MH4L and Metro North HHS, with plans to commence active stage on this project by Q3 2024.
- Susan de Jersey appointed in an advisory role to support key pieces of work that relate to women's health in the first 2000 days.
- Partnered with Murdoch Children's Research Institute to provide data mapping for prevention in the first 2000 days.

### Prevention Model of Care pilot

- The Prevention Model of Care aims to activate the community to improve proactive identification of those living with chronic disease modifiable risk factors and streamline pathways to increase participation in evidence-based preventive care.
- The Prevention Model of Care is a digitally enhanced, consumer-led approach that offers a single-entry point to available prevention programs and services. Consumers complete a digital health and wellbeing assessment and receive support from a telephone coach to identify and address priority health needs and facilitate referral to suitable prevention programs and services.
- In-scope prevention programs and services include self-management health coaching, physical activity, healthy eating, smoking cessation, alcohol support, low to moderate intensity mental wellbeing and cancer screening.
- HWQld has continued to lead collaborative efforts with South West HHS Healthy Communities Team and Queensland Health's Health Contact Centre (HCC) in preparation for pilot implementation in the Maranoa Regional Council area.
- People living in the SWHHS region are more likely to be engaging in poor health behaviours, and experience higher estimated incidence of chronic conditions compared to the Queensland average. The Prevention Model of Care is an innovative approach to reach those living with health behaviour risk factors earlier in their health journey, whilst easing pressure on frontline health professionals.
- Key activities during 2023–2024 include:
  - Customisation of the HCC's Way to Wellness (WTW) service infrastructure finalised to ensure the model is accessible and fit for delivery in health and community settings. This includes the digital health assessment, telephone coaching service, referral pathways and evaluation contacts.
  - Consultation sessions across Injune, Mitchell, Roma, Surat and Wallumbilla have involved over fifty community members spanning health and community settings. This has informed:
    - A community-driven approach to implementation that applies simple quality improvement methodology and leverages local health and community connectors.
    - Consumer informed project branding ('Wellness my Way') and marketing campaign that is representative of the region, including local people and places.
    - The inclusion of more than 15 additional referral pathways to strengthen the model and build capacity and sustainability in the region.

- Engagement with a broad range of stakeholders including all prevention programs and services embedded in the Prevention Model of Care, Maranoa Regional Council, Western Queensland Primary Health Network and Charleville and Western Areas Aboriginal and Torres Strait Islanders Community Health.
- Collaboration with the HWCRI to design a comprehensive evaluation plan. The primary focus of the evaluation is to measure engagement across the consumer journey, including uptake of referral pathways. The pilot will also capture consumer experience, short-term health behaviour change, and the experience of those involved in implementation and integration of the model.
- The Prevention Model of Care will be piloted over an 8-month period during 2024–2025. The data driven approach will inform the potential for future investment and scalability.

## Periods, Pain, and Endometriosis Program (PPEP Talk®)

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- The Periods, Pain, and Endometriosis Talk (PPEP Talk®) program is an initiative of the Pelvic Pain Foundation of Australia <https://www.pelvicpain.org.au/pppep-talk-schools-program/>.
- The program aims to educate secondary school students about endometriosis and pelvic pain, raise awareness, promote early diagnosis and help to create pathways to better health outcomes for all people living with pelvic pain conditions.
- HWQld has continued to work alongside the PPEP Talk® team to incorporate practice improvements that have shifted the former single-information session provision approach to an enhanced structured wrap-around program to ensure students are able to access support before, during and after PPEP Talk® session delivery.
- During the HWQld funded period, 1 July 2023 to 30 June 2024:
  - 104 x 60-minute single session PPEP Talk® session were delivered in 81 Queensland state schools reaching 5562 Queensland secondary school students in years 10–12, and 131 teachers and school staff.
  - 77 per cent of schools receiving PPEP Talk® were located in Non-Metropolitan, Rural and Remote regions and 33 per cent recorded an Index of Community Socio Educational Advantage score that indicates educational disadvantage.
  - 81 wrap-around sessions were completed with a range of school-based support staff including School Based Youth Health Nurses and Guidance Counsellors at government schools. PPEP Talk® team members engaged with 56 local health professionals to further increase skilled management, appropriate and timely referral of students experiencing pelvic pain.
  - Pre- and post-session student surveys indicated a 60 per cent increase in student awareness of what endometriosis is following attendance at PPEP Talk®.

# Enablers

HWQld's point of difference is established and embedded organisational enablers that provide the foundations to drive successful action and for system change.

## 1. Health promotion communications

HWQld delivers contemporary and strategic marketing, communication and engagement activities to encourage and support people to make healthy choices. This is done through the delivery of statewide, integrated social marketing and behaviour change campaigns, communications activities, community sponsorships and corporate partnerships.

### Fresh Veg, deliciously affordable campaign

- Fresh Veg, deliciously affordable (<https://hw.qld.gov.au/blog/deliciously-affordable-meal-swaps-tackle-rising-cost-of-takeaway/>) was a national \$12.3+ million campaign delivered in partnership with the Outdoor Media Association and Nutrition Australia to encourage Australians to eat more vegetables.
- The Australia Bureau of Statistics (ABS) found more than 95 per cent of Australian adults and children did not meet the recommend dietary guidelines for vegetable consumption in 2022.
- With cost-of-living pressures affecting many Australian families throughout 2023–2024, this campaign highlighted the affordability and nutritional value of in-season vegetables as an alternative to take-away meals and ultra-processed convenience foods.
- While takeaway and fast-food prices significantly increased in 2023, ABS data revealed the cost of seasonal fresh fruit and vegetables had declined.
- The campaign was designed to challenge the common misconception that fresh food is more expensive, encouraging Australians to make healthy swaps, which benefit their health and hip-pocket.
- The initiative provided inspiration and education for Australians around how to create healthy, enjoyable, and affordable meals using vegetables. It included tips and tricks shared by dietitians and nutritionists.
- The campaign was in market for four weeks, from 28 January to 24 February 2024 inclusive.
- The campaign materials featured on more than 18,250 individual outdoor media sites across Australia. This media advertising space was donated by members of the Outdoor Media Association as in-kind support for the promotion of healthy eating habits and lifestyles in Australia.



- The Fresh Veg, deliciously affordable campaign generated \$12.3 million in media value and reached more than 11.6 million Australians.
- The campaign received widespread media coverage across radio, print, television, and digital media, plus additional in-kind advertising support from multiple media websites, including Yahoo! and Nine.com.au, further extending the reach of the messaging.
- The campaign generated more 61,124 views of the dedicated campaign website (<https://hw.qld.gov.au/make-healthy-happen/health-wellbeing-initiatives/boost-your-healthy/>). The promotion of the campaign across HWQld's social media channels (Facebook, Instagram and LinkedIn) resulted in 1,348,843 impressions.
- A post-campaign survey of 1205 people found:
  - 91 per cent of parents were encouraged to include vegetables in meals, lunchboxes or snacks
  - 88 per cent of parents were encouraged to make healthier choices for their child or children, and
  - 79 per cent were encouraged to consider vegetables as the cheaper and healthier alternative to junk food.
- To help tackle the risk factors contributing to chronic disease in First Nations communities, HWQld also sponsored the **International Legends of League Carnival in Yarrabah**, as well as the **Island of Origin Carnival on Badu Island**, which attracts players and spectators from across the Torres Strait. At these events, HWQld staff engage with players and their families to discuss nutrition, healthy eating, physical activity and how children can prepare for sport and life in a series of education sessions.
- HWQld also partnered with **Netball Queensland** to amplify its **Diamond Spirit program** in regional and remote communities. Through netball, the Diamond Spirit program engages, empowers and educates First Nations girls on and off the court. The two-year partnership (2021–2023) ensured the Diamond Spirit program empowered and educated First Nations girls on and off the court and provided culturally supportive pathways to play sport. The program operates across Far North Queensland, including the Lower Gulf and Cape regions, in addition to two dedicated school sites in Cairns and Ipswich.
- HWQld proudly supported three community running events – the **2023 Gold Coast Marathon**, **2024 Mater Foundation International Women's Day Fun Run** and **2023 Bridge to Brisbane**. The world-class Gold Coast Marathon attracted almost 20,000 participants of all ages and abilities from around the world to participate across eight races, including the HWQld 2km Junior Dash and 4km Junior Dash, which attracted 1000 children. The International Women's Day Fun Run attracted 22,000 participants in Brisbane and an additional 3500 virtual participants from across Queensland who raised funds for world-leading research and healthcare for women living with breast cancer. The Bridge to Brisbane fun run attracted more than 25,000 participants and provided a fantastic opportunity to promote health and wellbeing, fitness and fun to Queenslanders.
- HWQld continued their support of **The Yoga Partnership** by renewing the partnership for an additional three years (2024–2026) to provide a free online Yoga and Mindfulness Program for regional and remote communities across Queensland and to deliver a regional Rural Yoga Roadshow (in 2025). The free online yoga classes and roadshow align with the HWQld objective of empowering Queenslanders to live a healthier life and address health inequities by delivering physical activity and social connectedness through yoga by supporting both the online mindfulness program and the road show.
- HWQld also continued our partnership with Queensland Symphony Orchestra to deliver their health and wellbeing program, as well as supporting their Regional Touring Program which delivers performance to people in regional and remote communities. Music has proven health benefits, and our partnership aims to boost the physical, mental and emotional health of Queenslanders.

## Sponsorships and partnerships

- HWQld is committed to supporting events and organisations to help deliver positive health outcomes for Queenslanders. We have sponsored a wide range of events and initiatives, across sports, physical activity and wellness.
- HWQld supported the Arthur Beetson Foundation by providing funding to help deliver the **2023 Queensland Murri Rugby League Carnival** (with support from DTS) and the **2024 Murri (Queensland) vs Koori (New South Wales) Rugby League Interstate Challenge**. These events showcase the health benefits of sports, the community it builds, and the opportunities it can bring to young First Nations people. Carnival participants range from under 6s to open men's and women's. These events place a significant emphasis on promoting health and education. Committed to fostering a positive environment, both carnivals uphold a strict policy of being smoke, drug, alcohol, and sugar-free, ensuring the wellbeing of all involved. Every player is required to complete a health check to ensure their readiness for participation. For junior players, attendance at school is a paramount priority, with a minimum requirement of 90 per cent attendance to qualify for competition. The annual Murri Carnival attracted approximately 40,000 people from across Queensland who came together to watch hundreds of Aboriginal and Torres Strait Islander athletes compete. The Murri vs Koori event, however, attracted around 5000 people including the Pasifika community.

- To promote healthy eating, we sponsored the **Royal National Agricultural and Industrial Association of Queensland Rural Discovery Day** in May 2024 which provided Queensland primary school students and their teachers the opportunity to learn about the origins of food and fibre from an agriculture and education perspective. HWQld delivered a hands-on activity for school students focusing on fruit and vegetables and fresh produce and linked back to our school-based Pick of the Crop program.
- HWQld's reach extended to support industry and professional organisations. We sponsored QSports industry focused events in 2023 and 2024 and the Institute of Hospitality in Healthcare Excellence Awards to demonstrate HWQld's investment in healthy eating, physical activity programs and support for sporting clubs and facilities.
- We continued our partnership with Government House to deliver free community wellbeing walks and activities at the Fernberg Estate in Paddington, Brisbane. The monthly activities are held between March and October and have been attended by more than 1200 people. In March 2024 we hosted our first Podsquad Pop Up during the school holidays with activities promoting good sleep, eating and movement activities, and in May 2024, we hosted our first regional Governor's Community Walk at the Rockhampton Botanic Gardens to promote physical activity during Beef Week, followed by another first with Yoga on the Lawn in June 2024 supported by The Yoga Partnership.

### *Health of the Nation*

In January and February 2024, HWQld spokespeople were featured in News Corp's national health campaign Health of the Nation. The six-week campaign covered a range of topics including promoting nutrition and physical activity. CEO Dr Littlewood was quoted in the campaign's launch article promoting the role of prevention. Dietitians Fiona Nave and Rebecca Farletti were also interviewed for articles about children's nutrition and the benefits of HWQld app Podsquad. This coverage resulted in 55 mentions across News Corps mastheads in print and online, with a cumulative potential reach of 4,916,470 people and an ASR of AUD \$904,011.

### *ABC North Queensland Just One Thing*

Since January 2024, HWQld spokespeople have taken part in fortnightly radio interviews with ABC North Queensland for the 'just one thing' segment, which promotes just one thing to improve health and wellbeing. The segments have covered a range of topics including the importance of staying hydrated during hot weather, how to prepare a healthy disaster kit and what to eat to ensure a good night's sleep. While the audience data is not available for ABC North Queensland, the station broadcasts to Townsville, the Whitsundays and surrounding regional areas. The segments have also been syndicated on occasion to ABC Southern Queensland, which broadcasts to the Darling Downs and South West regions.

## Social media

1 July 2023–30 June 2024:

- 550 mentions
- Cumulative potential reach of 17.64 million people
- Advertising Sale Rate of AUD \$6.07 million

### Examples of great coverage

#### *GenQ grants*

In October 2023, HWQld hosted a press conference at the South Cairns Gymnastics Club in Cairns to announce the recipients of its inaugural GenQ community grants program. The press conference was attended by television stations Seven News Cairns and WIN Cairns, and local newspaper The Cairns Post. CEO Dr Robyn Littlewood was also interviewed over the phone by a Southern Cross Austereo reporter. A series of media releases were also distributed to regional news outlets. The coverage resulted in a front-page article in The Cairns Post, news segments syndicated on Seven and WIN's regional bulletins, and radio coverage by Triple M, ABC Sunshine Coast and hitFM. The total coverage resulted in 44 mentions across Queensland media, with a cumulative potential reach of 232,933 people and an Advertising Space Rate (ASR) of AUD \$23,274.

## 2. Impact and Evaluation

Research underpins and informs all HWQld work and initiatives. HWQld is committed to generating new knowledge and the development of evidence-based interventions that prevent or reduce the burden of chronic diseases.

HWQld is committed to strengthening strong partnerships with the tertiary education and research sector to:

- Drive knowledge translation while implementing policy priorities focusing on chronic disease prevention, public health promotion, protection, and education.
- Support innovative and high-impact transdisciplinary research to inform HWQld's program design, implementation and evaluation to deliver the most impactful preventive health, for all Queenslanders.

### Research

The HWQld Research Team has grown in early 2024, with the addition of an *Evaluation and Impact Manager*, a *Principal Data Analyst* and a *Principal Lead – Research, Development and Partnerships*.

The Evaluation and Impact Manager provides leadership, oversight and advice in the design and implementation of evaluations, relating to methods and processes that enhance organisational learning, participatory approaches and understanding of change in complex situations and systems.

The Principal Data Analyst undertakes research and analysis to support the delivery of evaluation projects for HWQld funded and flagship programs and initiatives, and will support the collection, management, analysis, interpretation, and reporting of a range of qualitative and quantitative data.

The Principal Lead – Research, Development and Partnerships plays a key role in leading the strategic development of research engagement initiatives to forge enduring partnerships with organisations from industry, government, non-profit sectors and with local communities.

### Research Advisory Committee

The Research Advisory Committee (RAC) (<https://hw.qld.gov.au/about-us/research-advisory-committee/>) continues to provide independent strategic research advice and recommendations to the HWQld CEO on health and wellbeing research priorities and investment, opportunities to inform policy and practice, as well as opportunities for research partnerships and potential funding sources. A key achievement for the RAC in 2023–2024 was the review and assessment of grants submitted under the inaugural GenQ HWQld Community and Impact Grants Schemes. This entailed a rigorous assessment using a two-stage process.

Current members of the RAC include:

- Ms Helen Darch OAM (Chair)
- Laureate Professor Clare Collins AO
- Professor Sharon Goldfeld
- Professor Dan McAullay (until December 2023)
- Distinguished Professor Anthony Okely
- Dr Robyn Littlewood (ex-Officio Member, HWQld)
- Dr Sandra Pavey (ex-Officio Member, HWQld)

### Health and Wellbeing Centre for Research Innovation

- Health and Wellbeing Centre for Research Innovation (HWCRI) established in partnership with the University of Queensland (UQ) was in its third year of operation.
- The Centre has attracted a total of over \$6.5 million (2021–2024) in research funding to advance prevention and health promotion in Queensland.
- The centre currently has approximately \$13 million in pending grant outcomes from 10 funding applications submitted in the 2023–2024 financial year.
- The Centre currently has more than 28 research projects targeting areas including health behaviours, physical activity and nutrition across the life course and diverse populations.
- The Centre currently supports 34 research students from undergraduate through to Research Higher Degrees (PhD, MPhil).

## GenQ Health and Wellbeing Grants Program

### GenQ Health and Wellbeing Community Grants

The GenQ Health and Wellbeing Community Grants scheme provided funding for Queensland community-based projects that help local councils, non-government and community organisations to deliver initiatives or programs that support health and wellbeing within the community, with an emphasis on children and youth.

Twenty-four community grants were awarded and ranged from local school programs, community and sports centre initiatives, as well as health and wellbeing initiatives focused in target populations. HWQld congratulates GenQ Community Grant recipients and look forward to receiving final reports following completions of the respective projects.

### GenQ Health and Wellbeing Impact Grants

In a highly competitive grant funding opportunity, thirty-three applications were submitted for funding consideration for the GenQ Health and Wellbeing Impact Grants. Of these, two applications were successful, with details of the awarded projects provided below:

- *Queensland Family Cohort Study* – capturing the data on Gen Q led by Professor Vicki Clifton, The University of Queensland through the Mater Research Institute.
- *Assessing and supporting First Nations students' wellbeing in Queensland High Schools* led by Dr Kate Anderson, The University of Queensland – School of Public Health.

Both of these projects have now had their respective research grant agreements signed and have commenced research work in June 2024.

## Research partnerships

Research Partnerships enable innovative and high impact transdisciplinary research to inform HWQld's program design, implementation, and evaluation to deliver the most impactful preventative health, for all Queenslanders. To achieve this, HWQld collaborates with university partners across Australia, including Queensland, New South Wales, Victoria, Western Australia, and South Australia to generate high quality, relevant and novel evidence-based data to inform policy recommendations and practices to enhance chronic disease prevention and health promotion practices in Queensland.

## Grant awards

A total of three grant applications led by University Partners and supported by HWQld were successful and awarded in the financial year 2023–2024 totalling \$7.7 million in funding awarded, with a total of \$81,920 cash contribution and additional in-kind support from HWQld (all grants administered by universities).

### *Grants awarded in the financial year 2023–2024:*

- **Cerebral Palsy - Knowledge, Advocacy Skills and Support Program (CP-KASP)**, led by Associate Professor Leanne Sakzewski from UQ, aiming to deliver a co-designed program with families of children with cerebral palsy to optimise evidence-based funding through the National Disability Insurance Scheme (NDIS).
- **Efficacy, cost-effectiveness and scale-up for a health behaviour intervention for toddlers**, led by Professor Kylie Hesketh from Deakin University, aiming to conduct an innovative scalable program addressing the four health behaviours of diet, physical activity, sedentary behaviour and sleep in toddlers.
- **Tools for Change: Informing and Supporting Sustainable Chronic Disease Prevention in Australian Schools**, led by Associate Professor Nicole Nathan from The University of Newcastle, aiming to identify key aspects required for sustained chronic disease prevention and delivery of evidence-based tools, decision aids and guidance for policy makers and practitioners.

### *Previous and continuing research partnerships and funded grants:*

- **ARC Training Centre for Information Resilience (CIRES)** – The project will drive precision prevention practice change that will meet and overcome the growing burden of chronic disease in our society, using obesity data as an exemplar, across the life course and linking it with health services, population health and environmental data.
- **Office of 2032 Games Engagement (OGE)** – HWQld is now a partner organisation of OGE and the Queensland Centre for Olympic and Paralympic Studies (QCOPS). The OGE is UQ's central coordination office for Olympic and Paralympic activity and partnerships at the university. The key sporting initiatives include QCOPS, the Paralympic Centre of Excellence, Paralympics Australia Official Partner, and Youth Game Changers. HWQld will be an active partner with QCOPS in relevant research promoting healthy and sustainable communities.
- **UQ HERA 360-Kids Community Network** – Two Research Fellows, Dr Matthew Bourke and Dr Martin O'Flaherty, have commenced work in the 360-Kids Community Network program that seeks to equip all children and young people with the foundations for optimal health and development trajectories that deliver the best opportunities in life.
- **UQ Queensland Digital Health Centre (QDHeC) at the Centre for Health Services Research** – A Research Academic has commenced in the newly created QDHeC, a leading digital health research centre based at UQ. This centre is generating new research and innovation to speed up the translation of new knowledge to improve healthcare.

## Education and training

- A commitment to learning and improvement drives both knowledge generation and translation into policy and practice. Our agency remains committed to nurturing the next generation of health practitioners, preparing them to address emerging challenges and contribute to the promotion of health and wellbeing in local communities and across Queensland.

## Student placements

- HWQld is dedicated to supporting student training and placements, recognising the critical role they play in shaping the future of public health and chronic disease prevention.
- Through partnerships with educational institutions, we offer a unique workplace-based learning opportunity through industry placements, undergraduate placements, and research opportunities that allow students to apply their knowledge and develop skills in real-world settings. In doing so, we are ensuring the next generation of clinicians and researchers have a solid grounding in public health and chronic disease prevention.
- HWQld hosted 34 students from five Queensland Universities. Over the previous year, we introduced placements with new programs and faculties across our university partnerships to grow our program from 18 students on placement in 2022–2023 to 34 students between 2023–2024.
- Students were from a range of health disciplines including nutrition and dietetics, public health and psychology and represented both undergraduate and postgraduate programs. We are committed to the ongoing growth of student placement capacity and the diversity of students placed with our teams, both within and outside of health disciplines.
- HWQld is also committed to the support of higher degree by research (HDR) programs and currently has five PhD candidates affiliated with the agency.
- The HWQld Early Career Research Network, established in 2022, acts as an information exchange forum whereby HDR students can connect with other PhD candidates and interact and exchange learnings with HWQld staff through invited presentations to enhance the understanding of how research practice in applied in Industry.

## University partnerships

- Health Professionals' education, including quality work integrated learning experiences, is dependent on strong, reciprocal partnerships between Universities and Industry.
- As evidence of commitment to student learning across the spectrum from the lecture theatre to workplace, HWQld has active partnerships with seven of the 12 Universities who have a Queensland-based campus to deliver student placements or contributions to classroom-based learning. Our intention is to work towards collaborative partnerships with all Queensland Universities. This provides an important opportunity for students to understand the applied principles of health promotion, public health and clinical prevention at an early stage in their health degree.
- In addition to this, 12 HWQld staff hold honorary or adjunct titles for either teaching or research purposes with Griffith University, Queensland University of Technology and The University of Queensland.

## Parliamentary Inquiries

HWQld is a strong advocate for the nationwide public health and prevention agenda and welcomes the opportunity to provide written submissions to Australian and Queensland Government inquiries and reviews.

HWQld actively engaged in strategic advocacy to elevate the role of prevention, amplify the voice of the public health sector, and advocate for strategic priorities to improve health outcomes for Queenslanders.

## Independent review of the Human Rights Act

- In June 2024, HWQld provided a submission to the Independent review of the Human Rights Act. HWQld advocated for an expansion of the rights protected by the *Human Rights Act 2019* to include the right to health, the right to adequate food and the right to a clean, healthy and sustainable environment. Such an expansion would provide a strong mechanism to support the scale of system change needed to shift the underlying drivers of inequity and chronic disease. The submission also discussed barriers that may restrict some Queenslanders' access to preventive health services—including barriers related to weight stigma and discrimination directed towards people living with obesity—and HWQld action to reframe how obesity is talked about among health professionals and in the community.



## Review of the Public Health Act

- The Queensland Public Health Review Final Report 2023 recommended a major review of the *Public Health Act 2005*. HWQld provided a response to this review to Queensland Health in May 2024, emphasising the importance of including health promotion and prevention in the Act, in line with other states. Adding a requirement to develop public health plans at statewide and regional/local levels was also highlighted as a reform that would support collaborative planning and action.

## Queensland Supermarket Pricing Inquiry

- HWQld provided a submission to the Queensland Supermarket Pricing Select Committee on 12 April 2024.
- The submission advocated for the important role of supermarkets in influencing health outcomes in remote Aboriginal and Torres Islander communities, noted the potential for strengthened governance to support food security and improved supermarket offerings and highlighted the potential to leverage existing programs and policy such as *Gather + Grow 2023–2032 – Queensland Remote Food Security Strategy*. The submission also raised opportunities related to consistent and state-wide food affordability monitoring, a whole of system approach to logistics and supply chain, and improved healthiness of retail environments in the remote store setting.
- On 3 May 2024, HWQld officers provided evidence at the Queensland Supermarket Pricing Inquiry Public Hearing, at which they emphasised that food affordability is not only a cost-of-living, but a health issue.

## Inquiry into Food and Beverage Manufacturing in Australia

- In May 2024, HWQld provided input to the joint response from the Department of Agriculture and Fisheries, and the Department of Regional Development, Manufacturing and Water, to the House of Representatives Standing Committee on Industry, Science and Resources: Inquiry into Food and Beverage Manufacturing in Australia.
- HWQld's input focused on the opportunity for Aboriginal and Torres Strait Islander foods, and Aboriginal and Torres Strait Islander food industry, to have dual outcomes for both food security and economic self-determination in Aboriginal and Torres Strait Islander communities. HWQld also highlighted growing consumer interest in healthier food products.

## Inquiry into Diabetes

- In August 2023, HWQld provided a submission to the Standing Committee on Health, Aged Care and Sport for the Inquiry into Diabetes. HWQld's submission recommended adopting a life course approach to prevention to minimise risk factors and optimise protective factors, with an emphasis on the first 2000 days of life, as a critical period that can impact chronic disease risk from childhood and into adulthood. HWQld further recommended prioritising prevention through healthcare funding reform and collaborative leadership for chronic disease prevention.

## National Framework for Chronic Conditions

- In April 2024, HWQld provided a submission to the Australian Government's consultation to refresh the National Framework for Chronic Conditions. The submission advocated for stronger recognition of the importance of addressing the social determinants of health and alignment with the National Preventive Health Strategy on this issue.

## Food Standards Australia New Zealand Act 1991 Review

- In April 2024, HWQld contributed to a Queensland Health led Queensland Government response to consultation on review of the *Food Standards Australia New Zealand (FSANZ) Act 1991* draft impact analysis. HWQld noted in its submission that confusion and tensions in the FSANZ management of food regulation issues often arise because of tensions with the desirability for an efficient and competitive food industry.

## Draft Queensland Anti-Discrimination Bill 2024

- HWQld made a submission in March 2024 on the draft Queensland Anti-Discrimination Bill 2024. In its submission HWQld strongly supported the continued inclusion of breastfeeding as a protected attribute under clause 10 of the Bill and the inclusion of personal appearance, including a person's weight, height and size, as a new protected attribute in the draft Bill.

## Feasibility study on options to limit unhealthy food marketing to children

- In March 2024, HWQld provided a submission to the Australian Department of Health and Aged Care in relation to a Feasibility study on options to limit unhealthy food marketing to children: Policy options for consultation. HWQld recognised that significant public health measures are required to reduce the exposure of children to unhealthy food and drink marketing across media, settings and marketing techniques.



## Productivity Commission Inquiry into Early Childhood Education and Care

- Recognising the vital importance of the first five years of every child's life, HWQld made a submission to the Productivity Commission's Inquiry into Early Childhood Education and Care (ECEC). The submission argued that universal access to ECEC can directly improve children's health outcomes by ensuring that quality ECEC services provide a healthy environment, with provision of healthy food and ample opportunities for physical activity.

## Red Book 10th edition – Guidelines for preventive activities in general practice

- In December 2023, HWQld provided a submission to the Royal Australian College of General Practitioners on the draft Red Book 10th edition – Guidelines for preventive activities in general practice, focusing, among other matters, on the importance of adopting people-first, inclusive and non-judgemental language that recognises the diverse factors that contribute to overweight and obesity, without implying individual blame.

## National Health and Climate Strategy

- In July 2023, HWQld made a submission to the Australian Department of Health and Aged Care's consultation process for the development of Australia's first National Health and Climate Strategy. HWQld's submission highlighted HWQld's work with First Nations communities in the Torres Strait including the outcomes of the Torres Strait Climate Change Workshop held in June 2022.

## Publications

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- HWQld staff have delivered 15 conference presentations – across 10 conferences held in Australia in the field of preventive health, obesity, nutrition, and dietetics, and food security.
- HWQld staff have co-authored six publications in scientific journals in the areas of obesity, nutrition, and physical activity.
- Dr Robyn Littlewood and Dr Jacki Walker were the guest editors for **Nutrients Special Issue: Dietary Strategies for Obesity**. (<https://doi.org/10.3390/nu15194275>).
- HWQld has gained publication impact of at least 103 citation counts over the last 12 months.

# Our objectives and measures

HWQld works purposefully to connect systems, sectors, and communities to strengthen chronic disease prevention in Queensland.

HWQld's approach is underpinned by five objectives outlined in our *Strategic Plan 2023–2027*:

- **Enable collective wellbeing:** Address the drivers of inequity to improve collective wellbeing.
- **Champion prevention:** Coordinate, promote and advocate for prevention to ensure sustainable outcomes.
- **Drive systems change:** Work in ways that purposefully connect systems, sectors and communities to enable systems change.
- **Commit to impact:** Generate and harness evidence and innovation to deliver measurable impact.
- **Thrive together:** Adapt and enhance our ways of working to create a thriving and sustainable organisation.

HWQld is committed to working together with diverse communities and priority population groups to ensure our activities are reflective of the needs and priorities of the Queensland communities we serve. Our Community Partnering Strategy informs how we engage with communities to develop and deliver initiatives that are inclusive, accessible, culturally respectful, and relevant.

Our strategic objectives, performance measures and strategies are as follows:

<i>Strategic objective: Enable collective wellbeing</i>	
Performance measure	Strategies
<p>The drivers of inequity are identified and addressed across government, demonstrated through:</p> <ul style="list-style-type: none"><li>• Increased recognition and awareness of the drives of inequity;</li><li>• Use of data and evidence to prioritise efforts for the populations with the greatest capacity to benefit;</li><li>• Application of an equity lens across policy and service delivery.</li></ul>	<ul style="list-style-type: none"><li>• Facilitate the development and delivery across government of equity-informed policies, strategies and actions which reflect the voice of Queenslanders.</li><li>• Support our system partners to apply a holistic, data-informed approach to population health and wellbeing.</li><li>• Collaborate to advance health equity for Aboriginal and Torres Strait Islander peoples.</li><li>• Focus on the delivery of equity-informed actions to respond to population groups with the greatest capacity.</li></ul>

<i>Strategic objective: Champion prevention</i>	
Performance measure	Strategies
<p>Prevention is prioritised and embedded across the system and delivering intended outcomes, demonstrated through:</p> <ul style="list-style-type: none"> <li>• Promotion and coordination of prevention initiatives, programs and services;</li> <li>• Advocacy efforts leading to policy change and collaboration to support health and wellbeing;</li> <li>• Investment in prevention initiatives, learning and development.</li> </ul>	<ul style="list-style-type: none"> <li>• Drive a policy agenda to create healthier environments where Queenslanders live, learn, work, play and age.</li> <li>• Partner with the health system to embed prevention across the continuum using innovative service delivery strategies.</li> <li>• Empower, inspire and engage people and communities to access evidence-based programs, resources, campaigns and initiatives.</li> <li>• Build prevention capability across health and other sectors through education, training and resources.</li> <li>• Strengthen the prevention network to integrate efforts and share learnings across communities, sectors and systems.</li> <li>• Proactively advocate and contribute to the national prevention agenda.</li> <li>• Explore innovative funding models which support and incentivise prevention.</li> </ul>
<i>Strategic objective: Drive systems change</i>	
Performance measure	Strategies
<p>There is an authorising environment for prevention and shared accountability for health and wellbeing outcomes, demonstrated through:</p> <ul style="list-style-type: none"> <li>• Purposeful engagement with leaders, influences and partners;</li> <li>• Connections made across sectors support collaboration, including sharing of resources, skills and data;</li> <li>• Utilising community demand, engagement, and mobilisation to shape and support action.</li> </ul>	<ul style="list-style-type: none"> <li>• Strengthen inter-connected system governance and partnerships to facilitate shared action and investment.</li> <li>• Understand and invest in stakeholder relationships across sectors, industry and community as a vehicle for systems change and solution design.</li> <li>• Mobilise and empower the Queensland community to build capacity and connection.</li> </ul>

<i>Strategic objective: Commit to impact</i>	
Performance measure	Strategies
<p>There are appropriate approaches to monitoring, evaluation and reporting across programs to support evidence-based decision making and action, demonstrated through:</p> <ul style="list-style-type: none"> <li>• Developing and implementing a shared and coordinated research and evaluation agenda;</li> <li>• Broad sharing of qualitative data, quantitative data, evaluation findings and promising practice;</li> <li>• Increased engagement with communities and consumers to develop, deliver and evaluate initiative.</li> </ul>	<ul style="list-style-type: none"> <li>• Identify, build and share data and insights to inform the delivery of impactful solutions.</li> <li>• Highlight and harness the voices, experiences and stories of the Queensland community, particularly peoples.</li> <li>• Work with communities and priority population groups to co-design and evaluate locally-driven solutions.</li> <li>• Leverage the expertise of the research community to translate evidence into policy and practice.</li> <li>• Invest in partnerships to generate and lead evidence-based and innovative solutions.</li> <li>• Deliver robust and comprehensive evaluations to measure the specific and collective impact of prevention work.</li> </ul>
<i>Strategic objective: Thrive together</i>	
Performance measure	Strategies
<p>Organisational enablers for systems change have been established and embedded, demonstrated through:</p> <ul style="list-style-type: none"> <li>• Implementing the HWQId monitoring, evaluation and learning framework to support a culture of continuous improvement;</li> <li>• A healthy, engaged and empowered workforce that is skilled and accountable for delivery of our functions and able to work effectively with our partners and the community.</li> </ul>	<ul style="list-style-type: none"> <li>• Build an inclusive workplace culture that celebrates the diversity of workforce experience, skills and perspectives that reflects the Queensland communities we serve.</li> <li>• Strengthen the cultural capability of our organisation and partners.</li> <li>• Foster a thriving workplace environment by supporting and investing in the wellbeing, capability and development of our staff.</li> <li>• Enhance our organisational systems and process to enable efficient investment of time, expertise and resources.</li> </ul>

# Statement of the government's broad objectives for the community

The government's objectives for the community reflect the government's vision for Queensland and outline the plan to build future prosperity and growth across the state.

The objectives are long-term and can only be achieved by everyone involved working together. The objectives are:

- Good jobs
- Better services
- Great lifestyle

HWQld's *Strategic Plan 2023–2027* (<https://hw.qld.gov.au/about-us/performance/strategic-plan/>) supports the Queensland Government's objectives of 'Good Jobs', 'Better Services' and 'Great lifestyle'. HWQld contributes to the sub-objectives of Backing our frontline services, Keeping Queenslanders safe, Connecting Queensland, and Honouring and embracing our rich and ancient cultural history.

HWQld is key to the Queensland Government's commitment to reducing overweight and obesity rates, and the associated burden on the health system. As a statutory body, HWQld can leverage its unique position to work both within the health system and across systems to influence the multiple drivers of health and wellbeing and provide significant economic benefits. HWQld is committed to working in partnership across government, communities, and other sectors to address the underlying factors that drive chronic ill-health through collaborative, evidence-based and community-focused action.

# Service areas and service standards

## Service area objective

To reduce health inequity and tackle Queensland's high obesity and chronic disease rates.

HWQId works in partnership with communities, public and private sector and government agencies to drive population change that will prevent chronic disease.

Service standards	2023–2024 Target/Est.	2023–2024 Est. Actual	2024–2025 Target/Est.
<b>Effectiveness measures</b>			
Percentage of the Queensland population who consume recommended amounts of <sup>1,2</sup>			
• fruits	48.9%	46.2%	47.6%
• vegetables	7.6%	6.2%	6.4%
Percentage of the Queensland population who engaged in levels of physical activity for health benefit <sup>1,2</sup>			
• Persons	58.3%	56.7%	58.4%
• Male	60.7%	59.2%	61.0%
• Female	56.1%	54.3%	55.9%
Percentage of adults and children with a body mass index (BMI) in the normal weight category <sup>3</sup>			
• Adults	33.3%	29.2%	30.1%
• Children	67.5%	65.5%	67.5%
<b>Efficiency measure</b>			
Not identified			

### Notes:

1. These survey measures are population measures from a representative survey sample, and as such there is a year-to-year variation. Point estimates such as these are not indicative of statistical trends.
2. The most recent available data for adults (18+) based on measured BMI is from the Australian Bureau of Statistics (ABS) 2022 National Health Survey.
3. The most recent available data for children (5–17) based on measured BMI is from the ABS 2017–18 National Health Survey. Measured BMI for children aged 5–17 is anticipated to be available for the 2025–26 SDS.

The SDS measures reflect the effectiveness of whole-of-government activity and the complex challenges, many of which lie outside the health system, in improving these indicators.

The current SDS measures mask the complex interplay between biology, psychology, social and physical environmental determinants related to weight and weight-related behaviour (healthy eating, physical activity). This complexity also means that obesity rates will take time to be reversed. Reversing the prevalence of obesity has not yet been achieved anywhere in the world although there has been plateauing in some countries (the first step towards reversal).



# Finance, risk management and accountability

## Financial performance

The operating result for HWQld for the 2023–2024 financial year was \$739,000.

## Strategic workforce planning, performance and separation

HWQld adopts a flexible approach to managing our establishment, leveraging the individual and collective ability of our skilled workforce to pivot, refocus, and lean into opportunities as they arise. Early in the reporting period, HWQld realigned into a refreshed organisational structure to maximise effective implementation of priority tasks. Agility is embedded in how we operate, with further minor realignments across teams throughout the year reflective of this fluid model of work.

To support the delivery of services throughout the state and across a diverse geographical area, HWQld has employees based at Cairns as part of a Far North Queensland hub. HWQld further optimises workforce effectiveness through the utilisation of Research Fellows, and PhD, undergraduate and postgraduate students across various fields.

In 2023–2024, employees continue to access flexible work arrangements with 19 per cent of staff working part-time. HWQld engages external service provider Telus to provide employees and their immediate families with counselling and emergency assistance. Employees were encouraged to access the free Queensland Government influenza vaccination program.

No redundancies, early retirements or retrenchments were offered or paid in 2023–2024.

## Workforce profile data

Total FTE for HWQld based upon the fortnight ending 30 June 2024, including both full-time and part-time employees, measured on a full-time equivalent basis (reflecting Minimum Obligatory Human Resource Information (MOHRI)) is 62.18.

Target group data<sup>1</sup>

Gender	Number (headcount)	Percentage of total workforce (calculated on headcount)
Woman	65	87.8%
Man	9	12.1%
Non-binary	<5	

Diversity groups	Number (headcount)	Percentage of total workforce (calculated on headcount)
Women	65	87.8%
Aboriginal Peoples and Torres Strait Islander Peoples	<5	
People with disability	<5	
Culturally and Linguistically Diverse – born overseas	5	6.7%
Culturally and Linguistically Diverse – speak a language at home other than English including Aboriginal and Torres Strait Islander/Australian South Sea Islander languages	<5	

Women in leadership roles <sup>2</sup>	Number (headcount)	Percentage of total Leadership Cohort (calculated on headcount)
Senior Officers (Classified and s122 equivalent combined)	6	54.5%
Senior Executive Service and Chief Executives (Classified and s122 equivalent combined)	<5	

1. To ensure privacy, in tables where there are fewer than five respondents in a category, specific numbers should be replaced by <5.
2. Women in Leadership Roles are considered those positions that are Senior Officer and equivalent and above.

## Information systems and recordkeeping

HWQld's information and records are public and corporate assets, vital both for ongoing operations and in providing valuable corporate records on business decisions, activities and transactions. HWQld uses Content Manager, an electronic document and record management system, and is committed to training staff to ensure records management practices are consistent, accurate, fit for purpose and undertaken in accordance with the requirements of the *Public Records Act 2002* and whole-of-government policy, including the Records Governance Policy and General Retention and Disposal Schedule.

## Queensland public sector ethics

As a health statutory agency, HWQld must comply with the *Public Sector Ethics Act 1994*, which governs ethics and conduct in the Queensland Public Service. The Code of Conduct for the Queensland Public Service is based on the ethics principles and values outlined in the *Public Sector Ethics Act 1994* and ensures the public service demonstrates the highest ethical standards, integrity and accountability. All HWQld board members, subcommittee members and employees are expected to uphold the code of conduct and its applicability also extends to volunteers, students, contractors, consultants and anyone employed in any other capacity.

## Human rights

As a public entity, HWQld is bound by the *Human Rights Act 2019* and is committed to ensuring we consider human rights in making decisions. Equity encompasses and infiltrates everything HWQld does to promote and protect universal human rights. HWQld supports the aim of the *Human Rights Act 2019* to embed respect for human rights into the culture of the Queensland public sector and the objects of the *Human Rights Act 2019* to protect and promote human rights, help build a culture in the Queensland public sector that respects and promotes human rights and help promote a dialogue about the nature, meaning and scope of human rights. HWQld is committed to building inclusive cultures in the Queensland public sector that respect and promote human rights and diversity. HWQld received no human rights complaints during 2023–2024.

## Internal audit function and external scrutiny

HWQld's internal audit function is provided by the Queensland Government Corporate Administration Agency. The internal audit function assisted HWQld in reviewing internal controls and processes by providing an independent review and audit opinion. Reviews undertaken in 2023–2024 included Leave and Timesheets, and Contract Management. Outcomes of these reviews highlighted process improvements and better administrative practices.

HWQld has not been the subject of external scrutiny, independent review, or evaluation this reporting period.

# Glossary

Acronym /term	Definition
<b>ARRs</b>	Annual Reporting Requirements
<b>AO</b>	Officer of the Order of Australia
<b>BMI</b>	Body mass index
<b>CEO</b>	Chief Executive Officer
<b>CEQ</b>	Community Enterprise Queensland
<b>COPD</b>	Chronic Obstructive Pulmonary Disease
<b>COVID-19</b>	Coronavirus disease pandemic
<b>DAF</b>	Department of Agriculture and Fisheries
<b>DC</b>	Deadly Choices
<b>DTATSIPCA</b>	Department of Treaty, Aboriginal and Torres Strait Islander Partnerships, Communities, and the Arts
<b>DTS</b>	Department of Tourism and Sport
<b>ECHO</b>	Extension for Community Healthcare Outcomes
<b>EOI</b>	Expression of Interest
<b>FAA</b>	<i>Financial Accountability Act 2009</i>
<b>FARM Committee</b>	Finance, Audit and Risk Management Committee
<b>FPMS</b>	<i>Financial and Performance Management Standard 2019</i>
<b>FTE</b>	Full-time equivalent employees
<b>GAICD</b>	Graduate of Australian Institute of Company Directors
<b>GenQ</b>	Generation Queensland
<b>GST</b>	Goods and services tax
<b>GP</b>	General Practitioner
<b>HHBs</b>	Hospital and Health Boards
<b>HHSs</b>	Hospital and Health Services
<b>HWCRI</b>	Health and Wellbeing Centre for Research Innovation, UQ

Acronym /term	Definition
<b>HWQld</b>	Health and Wellbeing Queensland
<b>HWQld Act</b>	<i>Health and Wellbeing Queensland Act 2019</i>
<b>ISSR</b>	Institute of Social Science Research, UQ
<b>IUIH</b>	Institute for Urban Indigenous Health
<b>LGBTIQ+</b>	Lesbian, gay, bisexual, transgender, intersex, queer, asexual and other sexually or gender diverse
<b>MP</b>	Member of Parliament
<b>MRFF</b>	Medical Research Future Fund
<b>MSC</b>	Mornington Shire Council
<b>NOS</b>	National Obesity Strategy
<b>NRL</b>	National Rugby League
<b>OAM</b>	Medal of the Order of Australia
<b>RE-FRESH</b>	Centre of Research Excellence in Food Retail Environments
<b>PPEP</b>	Periods, Pain and Endometriosis Program
<b>PhD</b>	Doctor of Philosophy
<b>PSM</b>	Public Service Medal (Australia)
<b>QAST</b>	Queensland Association of School Tuckshops
<b>QCWA</b>	Queensland Country Women's Association
<b>QGEA</b>	Queensland Government Enterprise Architecture Information Licensing
<b>Queensland Health</b>	Department of Health and HHSs, collectively
<b>QUT</b>	Queensland University of Technology
<b>RAC</b>	Research Advisory Committee
<b>SDS</b>	Service Delivery Statement
<b>UQ</b>	The University of Queensland

# References

Please contact HWQld for a reference list.

# Compliance checklist

Summary of requirement		Basis for requirement	Annual report reference
<b>Letter of compliance</b>	A letter of compliance from the accountable officer or statutory body to the relevant Minister/s	ARRs – section 7	Pg ii
<b>Accessibility</b>	Table of contents	ARRs – section 9.1	Pg 1
	Glossary		Pg 52
	Public availability	ARRs – section 9.2	Inside front cover
	Interpreter service statement	Queensland Government Language Services Policy ARRs – section 9.3	Inside front cover
	Copyright notice	<i>Copyright Act 1968</i> ARRs – section 9.4	Inside front cover
	Information Licensing	QGEA – Information Licensing ARRs – section 9.5	Inside front cover
<b>General information</b>	Introductory Information	ARRs – section 10	Pg 2 to 7
<b>Non-financial performance</b>	Government’s objectives for the community and whole-of-government plans/specific initiatives	ARRs – section 11.1	Pg 47
	Agency objectives and performance indicators	ARRs – section 11.2	Pg 44 to 46
	Agency service areas and service standards	ARRs – section 11.3	Pg 48
<b>Financial performance</b>	Summary of financial performance	ARRs – section 12.1	Pg 49
<b>Governance – management and structure</b>	Organisational structure	ARRs – section 13.1	Pg 15
	Executive management	ARRs – section 13.2	Pg 13 to 14
	Government bodies (statutory bodies and other entities)	ARRs – section 13.3	Pg 8 to 9
	Public Sector Ethics	<i>Public Sector Ethics Act 1994</i> ARRs – section 13.4	Pg 51
	Human Rights	<i>Human Rights Act 2019</i> ARRs – section 13.5	Pg 51
	Queensland public service values	ARRs – section 13.6	Pg 15



Summary of requirement		Basis for requirement	Annual report reference
Governance – risk management and accountability	Risk management	ARRs – section 14.1	Pg 12
	Audit committee	ARRs – section 14.2	Pg 12 to 13
	Internal audit	ARRs – section 14.3	Pg 51
	External scrutiny	ARRs – section 14.4	Pg 51
	Information systems and recordkeeping	ARRs – section 14.5	Pg 51
	Information Security attestation	ARRs – section 14.6	N/A
Governance – human resources	Strategic workforce planning and performance	ARRs – section 15.1	Pg 49
	Early retirement, redundancy and retrenchment	Directive No.04/18 Early Retirement, Redundancy and Retrenchment ARRs – section 15.2	Pg 49
Open Data	Statement advising publication of information	ARRs – section 16	Inside front cover
	Consultancies	ARRs – section 33.1	<a href="https://data.qld.gov.au">https://data.qld.gov.au</a>
	Overseas travel	ARRs – section 33.2	<a href="https://data.qld.gov.au">https://data.qld.gov.au</a>
	Queensland Language Services Policy	ARRs – section 33.3	<a href="https://data.qld.gov.au">https://data.qld.gov.au</a>
Financial statements	Certification of financial statements	FAA – section 62 FPMS – sections 38, 39 and 46 ARRs – section 17.1	Pg 81
	Independent Auditor's Report	FAA – section 62 FPMS – section 46 ARRs – section 17.2	Pg 82 to 83

FAA *Financial Accountability Act 2009*

FPMS *Financial and Performance Management Standard 2019*

ARRs *Annual report requirements for Queensland Government agencies*



## **Financial Statements**

for the period ended 30 June 2024

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## Health and Wellbeing Queensland Financial Statements 2023-24

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Statement of Financial Position	59
Statement of Changes in Equity	60
Statement of Cash Flows	61
Notes to the Financial Statements	62–80
Management Certificate	81
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# Health and Wellbeing Queensland

## Statement of Comprehensive Income for the year ended 30 June 2024

		2024 Actual \$'000	2024 Original Budget \$'000	2024 Budget Variance* \$'000	2023 Actual \$'000
	Notes				
<b>Income</b>					
<b>Revenue</b>					
Grants and other contributions	4	41,987	38,251	(3,736)	40,276
Interest		1,293	150	(1,143)	761
Other revenue	5	23	-	(23)	11
<b>Total Revenue</b>		<b>43,303</b>	<b>38,401</b>	<b>(4,902)</b>	<b>41,048</b>
<b>Total Income</b>		<b>43,303</b>	<b>38,401</b>	<b>(4,902)</b>	<b>41,048</b>
<b>Expenses</b>					
Employee expenses	6	10,475	8,260	(2,215)	9,325
Supplies and services	7	7,183	29,851	22,668	4,627
Grants and subsidies	8	1,566	250	(1,316)	951
Depreciation	13	64	40	(24)	49
Amortisation	14	633	-	(633)	-
Service Procurement	9	22,001	-	(22,001)	22,131
Other expenses	10	642	-	(642)	652
<b>Total Expenses</b>		<b>42,564</b>	<b>38,401</b>	<b>(4,163)</b>	<b>37,735</b>
<b>Operating Result</b>		<b>739</b>	<b>-</b>	<b>(739)</b>	<b>3,313</b>
<b>Total Comprehensive Income</b>		<b>739</b>	<b>-</b>	<b>(739)</b>	<b>3,313</b>

\*An explanation of material variances is located at Note 22.

The accompanying notes form part of these statements.

# Health and Wellbeing Queensland

## Statement of Financial Position as at 30 June 2024

	Notes	2024 Actual \$'000	2024 Original Budget \$'000	2024 Budget Variance* \$'000	2023 Actual \$'000
<b>Current Assets</b>					
Cash and cash equivalents	11	9,428	7,509	(1,919)	9,271
Receivables	12	559	385	(174)	668
Prepayments		2,867	-	(2,867)	-
Other Current Asset		-	146	146	-
<b>Total Current Assets</b>		<b>12,854</b>	<b>8,040</b>	<b>(4,814)</b>	<b>9,939</b>
<b>Non Current Assets</b>					
Property, plant and equipment	13	253	242	(11)	273
Intangible Asset	14	1,721	969	(752)	2,019
<b>Total Non Current Assets</b>		<b>1,974</b>	<b>1,211</b>	<b>(763)</b>	<b>2,292</b>
<b>Total Assets</b>		<b>14,828</b>	<b>9,251</b>	<b>(5,577)</b>	<b>12,231</b>
<b>Current Liabilities</b>					
Payables	15	897	902	5	485
Accrued employee benefits	16	315	219	(96)	300
Other Liabilities	17	1,431	-	(1,431)	-
<b>Total Current Liabilities</b>		<b>2,643</b>	<b>1,121</b>	<b>(1,522)</b>	<b>785</b>
<b>Total Liabilities</b>		<b>2,643</b>	<b>1,121</b>	<b>(1,522)</b>	<b>785</b>
<b>Net Assets</b>		<b>12,185</b>	<b>8,130</b>	<b>(4,055)</b>	<b>11,446</b>
<b>Equity</b>					
Accumulated surplus		12,185	8,130	(4,055)	11,446
<b>Total Equity</b>		<b>12,185</b>	<b>8,130</b>	<b>(4,055)</b>	<b>11,446</b>

\*An explanation of material variances is located at Note 22.

The accompanying notes form part of these statements.



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## ***Health and Wellbeing Queensland***

### **Statement of Changes in Equity for the year ended 30 June 2024**

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	<b>2024</b>	<b>2023</b>
	<b>\$'000</b>	<b>\$'000</b>
<b>Balance as at 1 July 2023</b>	11,446	8,133
Operating Result	739	3,313
<b>Balance as at 30 June 2024</b>	<b>12,185</b>	<b>11,446</b>

*The accompanying notes form part of these statements.*

# Health and Wellbeing Queensland

## Statement of Cash Flows for the year ended 30 June 2024

		2024 Actual	2024 Original Budget	2024 Budget Variance*	2023 Actual
	Notes	\$'000	\$'000	\$'000	\$'000
<b>Cash flows from operating activities</b>					
<i>Inflows:</i>					
Grants and other contributions	4	41,987	38,251	(3,736)	40,276
GST collected from customers		87	150	63	-
GST input tax credits from ATO		823	-	(823)	(447)
Interest receipts		1,293	-	(1,293)	761
Other		53	-	(53)	(31)
<i>Outflows:</i>					
Employee expenses		(10,445)	(8,260)	2,185	(9,188)
Supplies and services		(9,564)	(29,851)	(20,287)	(4,921)
Grants and subsidies	8	(135)	(250)	(115)	(222)
GST paid to suppliers		(759)	-	759	174
GST remitted to ATO		(161)	-	161	-
Service Procurement	9	(22,001)	-	22,001	(22,131)
Other expenses		(642)	-	642	(1,381)
<b>Net cash provided by / (used in) operating activities</b>		<b>536</b>	<b>40</b>	<b>(496)</b>	<b>2,890</b>
<b>Cash flows from investing activities</b>					
<i>Outflows:</i>					
Payments for plant and equipment		(44)	-	44	-
Payments for intangibles		(335)	-	335	(1,050)
<b>Net cash provided by / (used in) investing activities</b>		<b>(379)</b>	<b>-</b>	<b>379</b>	<b>(1,050)</b>
<b>Net increase / (decrease) in cash held</b>		<b>157</b>	<b>40</b>	<b>(117)</b>	<b>1,840</b>
<b>Cash at beginning of financial year</b>		<b>9,271</b>	<b>7,469</b>	<b>(1,802)</b>	<b>7,431</b>
<b>Cash at end of financial year</b>	11	<b>9,428</b>	<b>7,509</b>	<b>(1,919)</b>	<b>9,271</b>

The accompanying notes form part of these statements.

	2024 \$'000	2023 \$'000
<b>Reconciliation of Operating Result to Net Cash from Operating Activities</b>		
Operating surplus	739	3,313
Depreciation expense	64	49
Amortisation expense	633	-
Changes in assets and liabilities:		
(Increase) / Decrease in receivables	109	(283)
(Increase) / Decrease in prepayments	(2,867)	147
Increase / (Decrease) in payables	412	(416)
Increase in accrued employee benefits	15	80
Increase in other liabilities	1,431	-
<b>Net cash provided by operating activities</b>	<b>536</b>	<b>2,890</b>

\*An explanation of material variances is located at Note 22.

The accompanying notes form part of these statements.

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# ***Health and Wellbeing Queensland***

## **Notes to the Financial Statements for the year ended 30 June 2024**

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**Section 1: How We Operate - Our Agency Objectives and Activities**

Note 1: General Information

Note 2: Objectives and Principal Activities of Health and Wellbeing Queensland

Note 3: Basis of Financial Statement Preparation

**Section 2: Notes about our Financial Performance**

Note 4: Grants and Other Contributions

Note 5: Other Revenue

Note 6: Employee Expenses

Note 7: Supplies and Services

Note 8: Grants and Subsidies

Note 9: Service Procurement Expense - Social Service

Note 10: Other Expenses

**Section 3: Notes about our Financial Position**

Note 11: Cash and Cash Equivalents

Note 12: Receivables

Note 13: Plant and Equipment and Depreciation Expense

Note 14: Intangible Asset and Amortisation expense

Note 15: Payables

Note 16: Accrued Employee Benefits

Note 17: Other Liabilities

**Section 4: Notes about Risk and Other Accounting Uncertainties**

Note 18: Commitments

Note 19: Contingencies

Note 20: Events Occurring after the Reporting Date

Note 21: Financial Risk Disclosures

**Section 5: Notes about our Performance Compared to Budget**

Note 22: Budgetary Reporting Disclosures

**Section 6: Other information**

Note 23: Key Management Personnel (KMP) Disclosures

Note 24: Related Party Transactions

Note 25: Accounting Standards Early Adopted

Note 26: Future Impact of Accounting Standards Not Yet Effective

Note 27: Climate Risk Disclosure

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# Health and Wellbeing Queensland

## Notes to the Financial Statements for the year ended 30 June 2024

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### 1. General Information

These financial statements cover Health and Wellbeing Queensland (HWQld), an independent statutory body established under the *Health and Wellbeing Queensland Act 2019*. The financial statements include all income, expenses, assets, liabilities and equity of HWQld. HWQld does not have any controlled entities. The entity is controlled by the state of Queensland which is the ultimate parent.

The head office and principal place of business is:

Milton Green  
Ground Floor, 139 Coronation Drive  
MILTON QLD 4064

For information relating to these financial statements please email [info@hw.qld.gov.au](mailto:info@hw.qld.gov.au)

### 2. Objectives and Principal Activities of Health and Wellbeing Queensland

HWQld was established on 1 July 2019 as a statutory body to improve the health and wellbeing of the population and reduce health inequities with an initial focus on reducing the risk factors that drive the chronic disease burden, such as poor nutrition, physical inactivity and obesity. HWQld has been given a mandate to develop a new way of working that requires innovation, partnerships and an element of risk taking that a statutory body is well positioned to deliver. While HWQld is accountable to government, and the broader community, HWQld is an independent agency that will work relentlessly to achieve outcomes that benefit the whole of Queensland.

### 3. Basis of Financial Statement Preparation

#### Compliance with Prescribed Requirements

HWQld has prepared these financial statements in compliance with section 39 of the *Financial and Performance Management Standard 2019*. The financial statements comply with Queensland Treasury's Minimum Reporting Requirements for reporting periods beginning on or after 1 July 2023.

HWQld is a not-for-profit entity and these general purpose financial statements are prepared on an accrual basis (except for the Statement of Cash Flows which is prepared on a cash basis) in accordance with Australian Accounting Standards and Interpretations applicable to not-for-profit entities.

#### Presentation

##### Currency and Rounding

Amounts shown in these financial statements may not add to the correct sub-totals or total due to rounding.

Amounts included in the financial statements are in Australian dollars and rounded to the nearest \$1,000 or, where that amount is \$500 or less, to zero, unless disclosure of the full amount is specifically required. Due to rounding, totals may not add exactly.

##### Comparatives

Comparative information reflects the audited 2022-23 financial statements.

##### Current/Non-Current Classification

Assets and liabilities are classified as either 'current' or 'non-current' in the Statement of Financial Position and associated notes.

Assets are classified as 'current' where their carrying amount is expected to be realised within 12 months after the reporting date. Liabilities are classified as 'current' when they are due to be settled within 12 months after the reporting date, or HWQld does not have an unconditional right to defer settlement to beyond 12 months after the reporting date.

All other assets and liabilities are classified as non-current.

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# ***Health and Wellbeing Queensland***

## **Notes to the Financial Statements for the year ended 30 June 2024**

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### **3. Basis of Financial Statement Preparation (continued)**

#### **Authorisation of Financial Statements for Issue**

The financial statements are authorised for issue by the Chief Executive Officer and the Board Chairperson at the date of signing the Management Certificate.

#### **Basis of Measurement**

Historical cost convention is used as the measurement basis in this financial report.

Under historical cost, assets are recorded at the amount of cash or cash equivalents paid or the fair value of the consideration given to acquire assets at the time of their acquisition. Liabilities are recorded at the amount of proceeds received in exchange for the obligation or at the amounts of cash or cash equivalents expected to be paid to satisfy the liability in the normal course of business.

# Health and Wellbeing Queensland

## Notes to the Financial Statements for the year ended 30 June 2024

	2024 \$'000	2023 \$'000
<b>4. Grants and Other Contributions</b>		
Grants from Government	41,977	40,276
Contributions from Industry	10	-
<b>Total</b>	<b>41,987</b>	<b>40,276</b>

### Accounting policy

Grants and Contributions arise from non-exchange transactions where the agency does not directly give approximately equal value to the grantor. The agency's grants do not contain sufficiently specific performance obligations, the transactions are accounted for under AASB 1058 *Income of 'Non-for-Profit' Entities*, whereby revenue is recognised upon receipt of the grant funding.

<b>5. Other Revenue</b>		
Other Revenue	23	11
<b>Total</b>	<b>23</b>	<b>11</b>

### 6. Employee Expenses

#### Employee Benefits

Wages and salaries	7,649	6,781
Annual leave levy	765	776
Long service leave levy	209	183
Employer superannuation contributions	1,102	901
Other Employee Benefits	30	24

#### Employee Related Expenses

Workers' compensation premium	49	31
Payroll tax	462	411
Other employee related expenses	209	218

<b>Total</b>	<b>10,475</b>	<b>9,325</b>
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The number of employees as at 30 June 2024, including both full time and part time employees, measured on a full time equivalent basis reflecting Minimum Obligatory Human Resource Information (MOHRI).

	2024 No.	2023 No.
Full-Time Equivalent Employees	62.18 <sup>^</sup>	55.55

<sup>^</sup> FTE data as at 30 June 2024 (based upon the fortnight ending 30 June 2024)

### Accounting policy

#### Wages, Salaries and Sick leave

Wages and salaries due but unpaid at reporting date are recognised in the Statement of Financial Position at the current salary rates. As HWQld expects such liabilities to be wholly settled within 12 months of reporting date, the liabilities are recognised at undiscounted amounts. As sick leave is non-vesting, an expense is recognised for this leave as it is taken.



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## Health and Wellbeing Queensland

### Notes to the Financial Statements for the year ended 30 June 2024

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#### 6. Employee Expenses (continued)

##### Annual Leave and Long Service Leave

Under the Queensland Government's Annual Leave Central Scheme and Long Service Leave Scheme HWQld is levied for the cost of employees' annual leave (including leave loading and on-costs) and long service leave (including on-costs). The levies are expensed in the period in which they are payable. Amounts paid to employees for annual leave and long service leave are claimed from the scheme quarterly in arrears.

No provision for annual leave and long service leave is recognised in HWQld's financial statements as the liability is held on a whole-of-government basis and reported in those financial statements pursuant to *AASB 1049 Whole of Government and General Government Sector Financial Reporting*.

##### Superannuation

Post-employment benefits for superannuation are provided through defined contribution (accumulation) plans or the Queensland Government's QSuper defined benefit plan (the former Qsuper defined benefits categories now administered by the Government Division of the Australian Retirement Trust) as determined by the employee's conditions of employment.

**Defined Contribution Plans** - Contributions are made to eligible complying superannuation funds based on the rates specified in the relevant EBA or other conditions of employment. Contributions are expensed when they are paid or become payable following completion of the employee's service each pay period.

**Defined Benefit Plan** - The liability for defined benefits is held on a whole-of-government basis and reported in those financial statements pursuant to *AASB 1049 Whole of Government and General Government Sector Financial Reporting*. The amount of contributions for defined benefit plan obligations is based upon the rates determined by the Treasurer on the advice of the State Actuary. Contributions are paid by HWQld at the specified rate following completion of the employee's service each pay period. HWQld's obligations are limited to those contributions paid.

##### Workers' Compensation Premiums

HWQld pays premiums to WorkCover Queensland in respect of its obligations for employee compensation. Workers' compensation insurance is a consequence of employing employees, but is not counted in an employee's total remuneration package. It is not employee benefits and is recognised separately as employee related expenses.

Key management personnel and remuneration disclosures are detailed in Note 23.

## Health and Wellbeing Queensland

### Notes to the Financial Statements for the year ended 30 June 2024

	2024 \$'000	2023 \$'000
<b>7. Supplies and Services</b>		
Property rental	479	446
Employment agency staff	233	392
Information technology	91	148
Minor plant and equipment	154	44
Legal fees	25	114
Supplies and consumables	1,498	651
Consultants and contractors	4,041	1,606
Corporate service charges	502	405
Communications	61	648
Sundry expenses	99	173
<b>Total</b>	<b>7,183</b>	<b>4,627</b>

#### Accounting policy – Distinction between grants and procurement

For a transaction to be classified as supplies and services, the value of goods or services received by the Agency must be of approximately equal value to the value of the consideration exchanged for those goods or services. Where this is not the substance of the arrangement, the transaction is classified as a grant.

#### Accounting policy - Property Rental

Payments for non-specialised commercial office accommodation under the Queensland Government Accommodation Office (QGAO) framework arise from non-lease arrangements with the Department of Housing, Local Government, Planning and Public Works, who has substantive substitution rights over the assets used within these schemes. Payments are expensed as incurred and categorised within property rental.

#### Accounting policy - Short-term leases and leases of low value assets

HWQld has elected to recognise lease payments for short-term leases of low value assets as expenses on a straight-line basis over the lease term, rather than accounting for them on the balance sheet.

#### 8. Grants and Subsidies

Grants and Subsidies	1,566	951
<b>Total</b>	<b>1,566</b>	<b>951</b>

#### Disclosures - Grants and Subsidies

Grant and Subsidies include payments for programs such as Pick of the Crop and GenQ Community Grants. The HWQld Board approves grant programs and the issuing of grants to eligible recipients.

#### 9. Service Procurement Expense - Social Service

Service Procurement Expense - Social Service	22,001	22,131
<b>Total</b>	<b>22,001</b>	<b>22,131</b>

#### Accounting policy - Social Services Procurement Expense

Service Procurement encompasses procurement of outsourced social services to deliver chronic disease prevention statewide through healthy lifestyle, health education and behaviour change programs.

#### 10. Other Expenses

Insurance	18	17
External audit fees for the audit of financial statements <sup>(1)</sup>	53	-
Sponsorships	571	635
<b>Total</b>	<b>642</b>	<b>652</b>

#### Audit Fees

(1) Total audit fees quoted by the Queensland Audit Office relating to the 2023-24 financial statements are \$27,800 (2022-23: \$25,200).

## Health and Wellbeing Queensland

### Notes to the Financial Statements for the year ended 30 June 2024

	2024 \$'000	2023 \$'000
<b>11. Cash and Cash Equivalents</b>		
Cash at bank	9,428	9,271
<b>Total</b>	<b>9,428</b>	<b>9,271</b>
<b>Accounting policy</b>		
For the purposes of the Statement of Financial Position and the Statement of Cash Flows, cash assets include all cash and cheques receipted but not banked at 30 June 2024.		
<b>12. Receivables</b>		
Trade debtors	13	43
GST receivable	393	457
Long service leave reimbursements	15	3
Annual leave reimbursements	138	165
<b>Total</b>	<b>559</b>	<b>668</b>
<b>Accounting policy - Receivables</b>		
Receivables are measured at amortised cost which approximates their fair value at reporting date.		
<b>Accounting policy - Impairment of receivables</b>		
HWQld's receivables are primarily from Queensland Government agencies or Australian Government agencies. No loss allowance is recorded for these receivables on the basis of materiality. Refer to Note 21 for HWQld's credit risk management policies.		
<b>13. Plant and Equipment and Depreciation Expense</b>		
<u>Closing Balance and Reconciliation of Carrying Amount</u>		
<b>Plant and Equipment at Cost</b>		
Gross (at cost)	446	402
Less: Accumulated depreciation	(193)	(129)
<b>Total</b>	<b>253</b>	<b>273</b>
Carrying amount at 1 July	273	322
Depreciation expense	(64)	(49)
<b>Carrying amount at 30 June</b>	<b>209</b>	<b>273</b>

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# Health and Wellbeing Queensland

## Notes to the Financial Statements for the year ended 30 June 2024

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### 13. Plant and Equipment (continued)

#### Accounting policy

##### Cost of Acquisition

Historical cost is used for the initial recording of all property, plant and equipment acquisitions. Historical cost is determined as the value given as consideration and costs incidental to the acquisition (such as architects' fees and engineering design fees), plus all other costs incurred in getting the assets ready for use.

Assets acquired at no cost or for nominal consideration, other than from another Queensland Government entity, are recognised at their fair value at date of acquisition.

Where assets are received free of charge from another Government entity (whether as a result of a machinery-of-government change or other involuntary transfer), the acquisition cost is recognised as the carrying amount in the books of the other entity immediately prior to the transfer.

##### Measurement using Historical Cost

Plant and equipment, is measured at historical cost in accordance with Queensland Treasury's Non-Current Asset Policies for the Queensland Public Sector. The carrying amounts for such plant and equipment is not materially different from their fair value.

Items of plant and equipment with a cost or other value equal to or in excess of \$5,000 are recognised in the year of acquisition. Items with a lesser value are expensed in the year of acquisition.

##### Depreciation Expense

Property, plant and equipment is depreciated on a straight-line basis so as to allocate the net cost or revalued amount of each asset, less any estimated residual value, progressively over its estimated useful life to HWQld.

**Key Judgement:** Straight line depreciation is used as that is consistent with the even consumption of service potential of these assets over their useful life to HWQld.

Depreciation rates for each class of depreciable asset (including significant identifiable components):

<i>Class</i>	<i>Rate%</i>
Plant and Equipment:	
Office Equipment	20%
Leasehold Improvement	10%

##### Impairment

All non-current physical assets are assessed for indicators of impairment on an annual basis. If an indicator of possible impairment exists, HWQld determines the asset's recoverable amount. Any amount by which the asset's carrying amount exceeds the recoverable amount is recorded as an impairment loss.

# Health and Wellbeing Queensland

## Notes to the Financial Statements for the year ended 30 June 2024

### 14. Intangible Asset and Amortisation expense

#### Closing Balance and Reconciliation of Carrying Amount

	Software at cost		WIP at cost		Total	
	2024	2023	2024	2023	2024	2023
	\$'000	\$'000	\$'000	\$'000	\$'000	\$'000
Gross (at cost)	2,354	-	-	2,019	2,354	2,019
Less: Accumulated amortisation	(633)	-	-	-	(633)	-
<b>Total</b>	<b>1,721</b>	<b>-</b>	<b>-</b>	<b>2,019</b>	<b>1,721</b>	<b>2,019</b>
Carrying amount at 1 July	-	-	2,019	969	2,019	969
Acquisitions	-	-	335	1,050	335	1,050
Transfers between asset classes	2,354	-	(2,354)	-	-	-
Amortisation expense	(633)	-	-	-	(633)	-
<b>Carrying amount at 30 June</b>	<b>1,721</b>	<b>-</b>	<b>-</b>	<b>2,019</b>	<b>1,721</b>	<b>2,019</b>

#### Accounting policy

Expenditure on research activities relating to internally-generated intangible assets is recognised as an expense in the period in which it is incurred. Costs associated with the internal development of the intangible assets is capitalised per *AASB 138 – Intangible Assets*. HWQld has developed a mobile application to promote healthy habits in Queenslanders. The application is internally generated and is expected to be fully amortised by February 2027.

## Health and Wellbeing Queensland

### Notes to the Financial Statements for the year ended 30 June 2024

	2024 \$'000	2023 \$'000
<b>15. Payables</b>		
Trade and other creditors	183	232
Accrued other supplies and services	714	252
Other Payables	-	1
Total	<b>897</b>	<b>485</b>

#### Accounting policy

Trade creditors are recognised upon receipt of the goods or services ordered and are measured at the nominal amount i.e. agreed purchase/contract price, gross of applicable trade and other discounts. Amounts owing are unsecured.

#### 16. Accrued Employee Benefits

Annual leave levy payable	256	246
Long service leave levy payable	59	54
Total	<b>315</b>	<b>300</b>

#### Accounting policy

No provision for annual leave or long service leave is recognised in HWQld's financial statements as the liability is held on a whole-of-government basis and reported in those financial statements pursuant to *AASB 1049 Whole of Government and General Government Sector Financial Reporting*.

#### 17. Other Liabilities

Unearned Revenue - Grant or Contribution	1,431	-
Total	<b>1,431</b>	<b>-</b>

#### Accounting policy

Unearned Revenue represents the amount of funds where cash has been received but specific obligations are yet to be met as required by *AASB 15 Revenue from Contracts with Customers*.

#### 18. Commitments

HWQld does not have any commitments as at 30 June 2024.

#### 19. Contingencies

HWQld does not have any contingencies as at 30 June 2024.

#### 20. Events Occurring after the Reporting Date

There were no significant events occurring after balance date.



# Health and Wellbeing Queensland

## Notes to the Financial Statements for the year ended 30 June 2024

### 21. Financial Risk Disclosures

#### (a) Financial Instrument Categories

Financial assets and financial liabilities are recognised in the Statement of Financial Position when HWQld becomes party to the contractual provisions of the financial instrument.

No financial assets and financial liabilities have been offset and presented net in the Statement of Financial Position.

#### (b) Risks Arising From Financial Instruments

Financial risk management is implemented pursuant to Queensland Government and HWQld's policies. These policies provide the principals for overall risk management as well as specific areas, and seek to minimise potential adverse effects on the financial performance of HWQld.

HWQld's activities expose it to a variety of financial risks as set out in the following table:

Risk Exposure	Definition	Exposure	Measurement Method	Risk Management Strategies
Credit Risk	Credit risk exposure refers to the situation where the entity may incur financial loss as a result of another party to a financial instrument failing to meet their obligations.	HWQld is exposed to credit risk in respect of its receivables (Note 12). No financial assets are past due or impaired.	Ageing analysis	HWQld manages credit risk by proactively pursuing the recoverability of monies owed to them.  Exposure to credit risk is monitored on an ongoing basis.
Liquidity Risk	Liquidity risk refers to the situation where HWQld may encounter difficulty in meeting obligations associated with financial liabilities that are settled by delivering cash or another financial asset.	HWQld is exposed to liquidity risk in respect of its contractual payables reported under Note 15 Payables.	Maturity Analysis	HWQld manages exposure to liquidity risk by ensuring sufficient funds are available to meet employee and supplier obligations at all times. This is achieved by ensuring minimum levels of cash are held within the bank account to match the expected duration of the various employee and supplier liabilities.
Market Risk	The risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market prices. Market risk comprises three types of risk: currency risk, interest rate risk and other price risk.  Interest rate risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in the market interest rates.	HWQld does not trade in foreign currency and is not materially exposed to commodity price changes or other markets.  Exposure to interest rate risk is limited to cash held in the CBA bank account. Refer to Note 11 Cash and Cash Equivalents.	Interest rate sensitivity analysis	HWQld does not undertake any hedging in relation to interest rate risk.  Interest rate risk is minimised through a passive investment management strategy to ensure the return of capital and at the same time, generate a return commensurate with the risk taken.  HWQld does not hold any equity instruments and therefore is not exposed to price risk.

# Health and Wellbeing Queensland

## Notes to the Financial Statements for the year ended 30 June 2024

### 22. Budgetary Reporting Disclosures

This section contains explanations of major variances between the Agency's actual 2023-24 financial results and the original budget presented to Parliament.

#### Statement of Comprehensive Income

		2024 Actual \$'000	2024 Original Budget \$'000	2024 Budget Variance \$'000	2023 Actual \$'000
	Variance Notes				
<b>Income from Continuing Operations</b>					
<b>Revenue</b>					
Grants and other contributions	1	41,987	38,251	(3,736)	40,276
Interest earned	2	1,293	150	(1,143)	761
Other revenue		23	-	(23)	11
<b>Total Income from Continuing Operations</b>		<b>43,303</b>	<b>38,401</b>	<b>(4,902)</b>	<b>41,048</b>
<b>Expenses from Continuing Operations</b>					
Employee expenses	3	10,475	8,260	(2,215)	9,325
Supplies and services	4	7,183	29,851	22,668	4,627
Grants and subsidies	5	1,566	250	(1,316)	951
Depreciation		64	40	(24)	49
Amortisation	6	633	-	(633)	-
Service Procurement	4	22,001	-	(22,001)	22,131
Other expenses	4	642	-	(642)	652
<b>Total Expenses from Continuing Operations</b>		<b>42,564</b>	<b>38,401</b>	<b>(4,163)</b>	<b>37,735</b>
<b>Operating Result from Continuing Operations</b>		<b>739</b>	<b>-</b>	<b>(739)</b>	<b>3,313</b>
<b>Total Comprehensive Income</b>		<b>739</b>	<b>-</b>	<b>(739)</b>	<b>3,313</b>

#### Explanations of Major Variances

- 1 *Grants and other contributions:* Additional grant funding was received during the year for costs associated with:
  - ratified Enterprise Bargaining Agreements;
  - Whole-of-Government non-government organisation indexation rate; and
  - function specific activities.
- 2 *Interest earned:* Variance is additional interest earned due to increasing interest rate environment.
- 3 *Employee expenses:* Employee expenses expenditure has increased due to both an increase in staffing to align with projects and Enterprise Bargaining Agreements ratified during the previous year.
- 4 *Supplies and services / Service Procurement / Other expenses:* The original supplies and services budget included service procurement and other expenses.
- 5 *Grants and subsidies:* The original supplies and services budget included grants and subsidies. Actuals include GenQ grants in addition to Pick of the Crop grants and support of Research grants.
- 6 *Amortisation:* Podsquad Application was launched in July 2023. The amortisation of this intangible asset was not included in the original budget.

# Health and Wellbeing Queensland

## Notes to the Financial Statements for the year ended 30 June 2024

### 22. Budgetary Reporting Disclosures (continued)

#### Statement of Financial Position

		2024 Actual \$'000	2024 Original Budget \$'000	2024 Budget Variance \$'000	2023 Actual \$'000
	Variance Notes				
<b>Current Assets</b>					
Cash and cash equivalents	1	9,428	7,509	(1,919)	9,271
Receivables		559	385	(174)	668
Prepayments	2	2,867	-	(2,867)	-
Other current assets		-	146	146	-
<b>Total Current Assets</b>		<b>12,854</b>	<b>8,040</b>	<b>(4,814)</b>	<b>9,939</b>
<b>Non Current Assets</b>					
Plant and equipment		253	242	(11)	273
Intangible assets	3	1,721	969	(752)	2,019
<b>Total Non Current Assets</b>		<b>1,974</b>	<b>1,211</b>	<b>(763)</b>	<b>2,292</b>
<b>Total Assets</b>		<b>14,828</b>	<b>9,251</b>	<b>(5,577)</b>	<b>12,231</b>
<b>Current Liabilities</b>					
Payables		897	902	5	485
Accrued employee benefits		315	219	(96)	300
Other liabilities	4	1,431	-	(1,431)	-
<b>Total Current Liabilities</b>		<b>2,643</b>	<b>1,121</b>	<b>(1,522)</b>	<b>785</b>
<b>Total Liabilities</b>		<b>2,643</b>	<b>1,121</b>	<b>(1,522)</b>	<b>785</b>
<b>Net Assets</b>		<b>12,185</b>	<b>8,130</b>	<b>(4,055)</b>	<b>11,446</b>
<b>Equity</b>					
Accumulated surplus		12,185	8,130	(4,055)	11,446
<b>Total Equity</b>		<b>12,185</b>	<b>8,130</b>	<b>(4,055)</b>	<b>11,446</b>

#### Explanations of Major Variances

- Cash and cash equivalents:** Increase from original budget is due to funding received from Queensland Health for specific activities, resulting in an operating result of \$739,000.
- Prepayments:** Actuals relate to contract milestone prepayments that were paid on 28 June 2024 to meet contractual obligations.
- Intangible assets:** Costs associated with the development of the Podsquad Application (Software as a cost) were included in the original budget for supplies and services.
- Other liabilities:** Grant funding received for function specific activities that was not expended by 30 June 2024.

# Health and Wellbeing Queensland

## Notes to the Financial Statements for the year ended 30 June 2024

### 22. Budgetary Reporting Disclosures (continued)

#### Statement of Cash Flows

		2024 Actual \$'000	2024 Original Budget \$'000	2024 Budget Variance \$'000	2023 Actual \$'000
	Variance Notes				
<b>Cash flows from operating activities</b>					
<i>Inflows:</i>					
Grants and other contributions	1	41,987	38,251	(3,736)	40,276
GST collected from customers		87	150	63	-
GST input tax credits from ATO		823	-	(823)	(447)
Interest receipts		1,293	-	(1,293)	761
Other		53	-	(53)	(31)
<i>Outflows:</i>					
Employee expenses	2	(10,445)	(8,260)	2,185	(9,188)
Supplies and services	3	(9,564)	(29,851)	(20,287)	(4,921)
Grants and subsidies		(135)	(250)	(115)	(222)
GST paid to suppliers		(759)	-	759	174
GST remitted to ATO		(161)	-	161	-
Service Procurement	3	(22,001)	-	22,001	(22,131)
Other expenses	3	(642)	-	642	(1,381)
<b>Net cash provided by / (used in) operating activities</b>		<b>536</b>	<b>40</b>	<b>(496)</b>	<b>2,890</b>
<b>Cash flows from investing activities</b>					
Payments for plant and equipment		(44)	-	44	-
Payments for intangibles		(335)	-	335	(1,050)
<b>Net cash provided by / (used in) investing activities</b>		<b>(379)</b>	<b>-</b>	<b>379</b>	<b>(1,050)</b>
<b>Net increase / (decrease) in cash held</b>		<b>157</b>	<b>40</b>	<b>(117)</b>	<b>1,840</b>
<b>Cash at beginning of financial year</b>		<b>9,271</b>	<b>7,469</b>	<b>(1,802)</b>	<b>7,431</b>
<b>Cash at end of financial year</b>		<b>9,428</b>	<b>7,509</b>	<b>(1,919)</b>	<b>9,271</b>

#### Explanations of Major Variances

- Grants and other contributions:* Additional grant funding was received during the year for costs associated with:
  - ratified Enterprise Bargaining Agreements;
  - Whole-of-Government non-government organisation indexation rate; and
  - function specific activities.
- Employee expenses:* Employee expenses expenditure has increased due to both an increase in staffing to align with projects and Enterprise Bargaining Agreements ratified during the previous year.
- Supplies and services / Service Procurement / Other expenses:* Combined actual expenditure across supplies and services, service procurement and other expenses totals \$32.2 million. The \$2.3 million variance is for contract milestone prepayments that were paid on 28 June 2024 to meet contractual obligations.

# Health and Wellbeing Queensland

## Notes to the Financial Statements for the year ended 30 June 2024

### 23. Key Management Personnel (KMP) Disclosures

#### Details of Key Management Personnel

The following details for non-Ministerial KMP reflect those positions that had authority and responsibility for planning, directing and controlling the activities of HWQld during 2023-24. Further information on these positions can be found in the body of the Annual Report under the section relating to Executive Management.

Position	Position Responsibility
Board Chairperson	Provides strategic leadership, guidance and effective oversight of management, operations and financial performance
Board Member	Provides strategic leadership, guidance and effective oversight of management, operations and financial performance
Chief Executive Officer	The Chief Executive Officer directs the overall efficient, effective and economical administration and guides the strategic direction of HWQld.
Deputy Chief Executive Officer	The Deputy Chief Executive Officer is responsible for executing the strategic direction of the organisation as determined by the HWQld Board, in conjunction with the Chief Executive Officer.
Chief Operating Officer	The Chief Operating Officer leads the enabling functions and services of HWQld, including business, corporate governance, communications and engagement, research and impact.
Senior Director, Health Promotion (since 12 March 2024)	The Senior Director, Health Promotion provides authoritative strategic and clinical leadership for the development, coordination, implementation and evaluation of complex preventive health policy and strategy to improve the health and wellbeing of Queenslanders.
Business and Governance Director (since 12 March 2024)	The Director, Business and Governance is responsible for leading the corporate services functions and ensuring that key human resources, financial, governance, business intelligence, information technology, knowledge management, performance monitoring and reporting functions are delivered across HWQld.

#### KMP remuneration policies

The responsible Minister is the Minister for Health, Mental Health and Ambulance Services and Minister for Women. Ministerial remuneration entitlements are outlined in the Legislative Assembly of Queensland's Members' Remuneration Handbook. HWQld does not bear any cost of remuneration of Ministers. The majority of Ministerial entitlements are paid by the Legislative Assembly, with the remaining entitlements being provided by Ministerial Services Branch within the Department of the Premier and Cabinet. As all Ministers are reported as KMP of the Queensland Government, aggregate remuneration expenses for all Ministers is disclosed in the Queensland General Government and Whole of Government Consolidated Financial Statements, which are published as part of Queensland Treasury's Report on State Finances.

The remuneration and terms of employment for policy for HWQld's Chief Executive Officer is set by Governor in Council and are equivalent to those set by the Queensland Public Sector Commission.

Remuneration policy for HWQld's Deputy Chief Executive Officer, Chief Operating Officer, Senior Director - Health Promotion and Business and Governance Director are set by the Queensland Public Sector Commission as provided for under the *Public Sector Act 2022*. Individual remuneration and other terms of employment (including motor vehicle entitlements and performance payments if applicable) are specified in employment contracts. Appointment to the Board is made by Governor in Council under s18 of the *Health and Wellbeing Queensland Act 2019*.

Remuneration expenses for those KMP comprise the following components:

#### Short term employee expenses, including:

- salaries, allowances and leave entitlements earned and expensed for the entire year, or for that part of the year during which the employee occupied a KMP position;
- non-monetary benefits - consisting of provision of vehicle together with fringe benefits tax applicable to the benefit.
- No performance payments were made during the financial year

Long term employee expenses include amounts expensed in respect of long service leave entitlements earned.

Post-employment expenses include amounts expensed in respect of employer superannuation obligations.

Termination benefits include payments in lieu of notice on termination and other lump sum separation entitlements (excluding annual and long service leave entitlements) payable on termination of employment or acceptance of an offer of termination of employment.

#### Performance Payments

No performance payments were made to the key management personnel of HWQld.

# Health and Wellbeing Queensland

Notes to the Financial Statements for the year ended 30 June 2024

## 23. Key Management Personnel (KMP) Disclosures (continued)

### Remuneration Expenses

The following disclosures focus on the expenses incurred by the agency attributable to non-Ministerial KMP during the respective reporting periods. The amounts disclosed are determined on the same basis as expenses recognised in the statement of comprehensive income.

#### 2023-2024

Position	Short Term Employee Expenses		Long Term Employee Expenses	Post-Employment Expenses	Termination Benefits	Total Expenses
	Monetary Expenses \$'000	Non-Monetary Benefits \$'000	\$'000	\$'000	\$'000	\$'000
Chief Executive Officer	303	6	8	35	-	352
Chief Operating Officer	214	-	5	31	-	250
Chief Operating Officer (Acting)	28	1	1	3	-	33
Deputy Chief Executive Officer	227	7	6	34	-	274
Senior Director, Health Promotion	67	2	1	8	-	78
Business and Governance Director	54	2	1	6	-	63
<b>Total Remuneration</b>	<b>893</b>	<b>18</b>	<b>22</b>	<b>117</b>	<b>-</b>	<b>1,050</b>

#### 2022-2023

Position	Short Term Employee Expenses		Long Term Employee Expenses	Post-Employment Expenses	Termination Benefits	Total Expenses
	Monetary Expenses \$'000	Non-Monetary Benefits \$'000	\$'000	\$'000	\$'000	\$'000
Chief Executive Officer	263	6	7	33	-	309
Chief Operating Officer	218	-	6	23	-	247
Executive Director	204	6	5	23	-	238
Executive Director (Acting)	32	1	1	3	-	37
<b>Total Remuneration</b>	<b>717</b>	<b>13</b>	<b>19</b>	<b>82</b>	<b>-</b>	<b>831</b>



# Health and Wellbeing Queensland

Notes to the Financial Statements for the year ended 30 June 2024

## 23. Key Management Personnel (KMP) Disclosures (continued)

2023-2024

### Board Remuneration

Position	Terms		Total remuneration	Out of Pocket expenses
	Date of initial appointment	Date of cessation	\$'000	\$'000
<b>Current Members</b>				
Ms Clare O'Connor <sup>^</sup> *	20/11/2020		-	-
Mr Stephen Ryan <sup>~</sup> #	1/07/2019		41	-
Ms Stella Taylor-Johnson	1/04/2020		17	-
Ms Anna Voloschenko	1/04/2020		17	-
Emeritus Professor Ian Lowe	1/04/2020		17	-
Ms Jane Williams <sup>~</sup>	1/04/2020		19	-
Mr Andrew Hopper <sup>^</sup> %	10/09/2022		-	-
Dr Shea Spierings	3/02/2022		17	-
Mr Michael Walsh <sup>^</sup> **	24/07/2023		-	-
<b>Former Member</b>				
Mr Shaun Drummond (as Acting Director-General, Department of Health) <sup>^</sup>	14/03/2022	23/07/2023	-	-
<b>Finance Audit and Risk Management Committee</b>				
Christopher Johnson <sup>^</sup> <sup>^</sup>	2/07/2020		3	-
<b>Total Remuneration</b>			<b>131</b>	<b>-</b>

<sup>^</sup> Officer of the Public Service - non-remunerated

<sup>~</sup> Additional \$2,000 p.a. remuneration as member of Finance Audit and Risk Management

\* This position is designated Chief Executive appointment for the Director-General, Department of Treaty, Aboriginal and Torres Strait Islander Partnerships, Communities and the Arts

\*\* This position is designated Chief Executive appointment for the Director-General, Queensland Health

% This position is designated Chief Executive appointment for the Director-General, Department of Tourism and Sport

<sup>^</sup><sup>^</sup> Chair of Finance, Audit and Risk Management Committee

# Chair of HWQld Board

# Health and Wellbeing Queensland

Notes to the Financial Statements for the year ended 30 June 2024

## 23. Key Management Personnel (KMP) Disclosures (continued)

2022-2023

### Board Remuneration

Position	Terms		Total remuneration	Out of Pocket expenses
	Date of initial appointment	Date of cessation	\$'000	\$'000
<b>Current Members</b>				
Ms Clare O'Connor <sup>^*</sup>	20/11/2020		-	-
Mr Stephen Ryan <sup>~#</sup>	1/07/2019		39	-
Ms Stella Taylor-Johnson	1/04/2020		15	-
Ms Anna Voloschenko	1/04/2020		15	-
Professor Ian Lowe	1/04/2020		15	-
Ms Jane Williams <sup>~</sup>	1/04/2020		19	-
Mr Andrew Hopper <sup>^%</sup>	10/09/2022		-	-
Mr Shea Spierings	3/02/2022		17	-
Mr Shaun Drummond (as Acting Director-General, Department of Health) <sup>^</sup>	14/03/2022		-	-
<b>Former Member</b>				
Mr John Lee <sup>^%</sup>	2/08/2021	9/09/2022	-	-
<b>Finance Audit and Risk Management Committee</b>				
Christopher Johnson <sup>^^</sup>	2/07/2020		3	-
<b>Total Remuneration</b>			<b>123</b>	<b>-</b>

<sup>^</sup> Officer of the Public Service - non-remunerated

<sup>~</sup> Additional \$2,000 p.a. remuneration as member of Finance Audit and Risk Management

<sup>\*</sup> This position is designated Chief Executive appointment for the Director-General, the former Department of Communities, Housing and Digital Economy

<sup>%</sup> This position is designated Chief Executive appointment for the Director-General, the former Department of Tourism, Innovation and Sport

<sup>^^</sup> Chair of Finance, Audit and Risk Management Committee

<sup>#</sup> Deputy chair from 2/08/2021

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## **Health and Wellbeing Queensland**

### **Notes to the Financial Statements for the year ended 30 June 2024**

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#### **24. Related Party Transactions**

##### ***Transactions with people/entities related to KMP***

The KMP declarations identified the Metro North Hospital and Health Service as a related entity. In 2023-2024, HWQld had a transaction to the value of \$161,000 only (with no balances remaining at end of year) to Metro North Hospital and Health Service for services received.

There were no transactions with people of entities related to our KMP in 2022-2023.

##### ***Transactions with other Queensland Government-controlled entities***

HWQld received funding from Queensland Health. (refer Note 4)

HWQld received funding from the Department of Tourism and Sport as co-contribution toward project specific activities (refer Note 17).

HWQld transacts with the Department of Housing, Local Government, Planning and Public Works for accommodation services (Queensland Government Accommodation Office) (refer Note 7 – Property Rental).

HWQld has a service level agreement with the Corporate Administration Agency (refer Note 7 - Corporate service charges).

Insurance services are provided through the Queensland Treasury Queensland Government Insurance Fund and WorkCover Queensland.

HWQld optimises interest earning capacity through a Queensland Treasury Corporation Capital Guaranteed Investment Account.

#### **25. Accounting Standards Early Adopted**

No Australian Accounting Standards have been early adopted for 2023-24.

#### **26. Future Impact of Accounting Standards Not Yet Effective**

At the date of authorisation of the financial report, Australian accounting standards and interpretations with future effective dates are either not applicable to HWQld's activities or have no material impact.

#### **27. Climate Risk Disclosure**

The State of Queensland has published a wide range of information and resources on climate related risks, strategies and actions accessible via <https://www.energyandclimate.qld.gov.au/climate>

The Queensland Sustainability Report (QSR) outlines how the Queensland Government measures, monitors and manages sustainability risks and opportunities, including governance structures supporting policy oversight and implementation. To demonstrate progress, the QSR also provides time series data on key sustainability policy responses. The QSR is available via Queensland Treasury's website at <https://www.treasury.qld.gov.au/programs-and-policies/queensland-sustainability-report>

No adjustments to the carrying value of assets held by the foundation were recognised during the financial year as a result of climate-related risks impacting current accounting estimates and judgements. No other transactions have been recognised during the financial year specifically due to climate-related risks impacting the foundation.

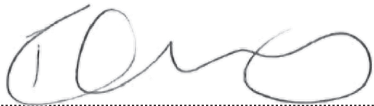
The statutory body continues to monitor the emergence of material climate-related risks that may impact the financial statements of the statutory body, including those arising under the Queensland Government's Queensland 2035 Clean Economy Pathway, and other Queensland Government climate-related policies and directives.

**Management Certificate  
for Health and Wellbeing Queensland (HWQld)**

These general purpose financial statements have been prepared pursuant to section 62(1) of the *Financial Accountability Act 2009* (the Act), section 39 of the *Financial and Performance Management Standard 2019* and other prescribed requirements. In accordance with section 62(1)(b) of the Act we certify that in our opinion:

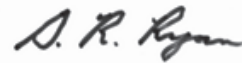
- (a) the prescribed requirements for establishing and keeping the accounts have been complied with in all material respects; and
- (b) the financial statements have been drawn up to present a true and fair view, in accordance with prescribed accounting standards, of the transactions of HWQld for the financial year ended 30 June 2024 and of the financial position of HWQld at the end of that year; and

We acknowledge responsibility under section 7 and section 11 of the *Financial and Performance Management Standard 2019* for the establishment and maintenance, in all material respects, of an appropriate and effective system of internal controls and risk management processes with respect to financial reporting throughout the reporting period.



Name: Dr Robyn Littlewood  
Title: Chief Executive Officer

Date: 28 August 2024



Name: Mr Stephen Ryan  
Title: Board Chairperson

Date: 28 August 2024

## INDEPENDENT AUDITOR'S REPORT

To the Board of Health and Wellbeing Queensland

### Report on the audit of the financial report

#### Opinion

I have audited the accompanying financial report of Health and Wellbeing Queensland.

The financial report comprises the statement of financial position as at 30 June 2024, the statement of comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, notes to the financial statements including material accounting policy information, and the management certificate.

In my opinion, the financial report:

- a) gives a true and fair view of the entity's financial position as at 30 June 2024, and its financial performance and cash flows for the year then ended; and
- b) complies with the *Financial Accountability Act 2009*, the Financial and Performance Management Standard 2019 and Australian Accounting Standards.

#### Basis for opinion

I conducted my audit in accordance with the *Auditor-General Auditing Standards*, which incorporate the Australian Auditing Standards. My responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Report* section of my report.

I am independent of the entity in accordance with the ethical requirements of the Accounting Professional and Ethical Standard's Boards APES 110 *Code of Ethics for Professional Accountants (including independence standards)* (the Code) that are relevant to my audit of the financial report in Australia. I have also fulfilled my other ethical responsibilities in accordance with the Code and the *Auditor-General Auditing Standards*.

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my opinion.

#### Responsibilities of the entity for the financial report

The Board is responsible for the preparation of the financial report that gives a true and fair view in accordance with the *Financial Accountability Act 2009*, the Financial and Performance Management Standard 2019 and Australian Accounting Standards, and for such internal control as the Board determines is necessary to enable the preparation of the financial report that is free from material misstatement, whether due to fraud or error.

The Board is also responsible for assessing the entity's ability to continue as a going concern, disclosing, as applicable, matters relating to going concern and using the going concern basis of accounting unless it is intended to abolish the entity or to otherwise cease operations.

### **Auditor's responsibilities for the audit of the financial report**

My objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes my opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with the Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this financial report.

A further description of my responsibilities for the audit of the financial report is located at the Auditing and Assurance Standards Board website at:

[https://www.auasb.gov.au/auditors\\_responsibilities/ar4.pdf](https://www.auasb.gov.au/auditors_responsibilities/ar4.pdf)

This description forms part of my auditor's report.

### **Statement**

In accordance with s.40 of the *Auditor-General Act 2009*, for the year ended 30 June 2024:

- a) I received all the information and explanations I required.
- b) I consider that, the prescribed requirements in relation to the establishment and keeping of accounts were complied with in all material respects.

### **Prescribed requirements scope**

The prescribed requirements for the establishment and keeping of accounts are contained in the *Financial Accountability Act 2009*, any other Act and the Financial and Performance Management Standard 2019. The applicable requirements include those for keeping financial records that correctly record and explain the entity's transactions and account balances to enable the preparation of a true and fair financial report.



30 August 2024

D J Toma  
as delegate of the Auditor-General

Queensland Audit Office  
Brisbane



