

ANNUAL REPORT

2024-2025

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 Queensland Language Services and overseas travel for the 2024–2025 reporting period. HWQld has no data to report on consultancies or Charter of Victims' Rights.

Public availability statement

Where possible, readers are encouraged to visit the HWQld website at <https://hw.qld.gov.au/> and download the annual report at <https://hw.qld.gov.au/about-us/performance/annual-report/>. HWQld's website ensures content is available to as many users as possible, including people who may use assistive technology, in compliance with the *Queensland Government's Information Standard 26: Internet*.

Where this is not possible, printed copies are available using one of the contact options below:

Office address: 139 Coronation Drive,
Milton Green, Milton,
Queensland 4064
(entry via Little Cribb Street)

Postal address: PO Box 1419
Milton Qld 4064

General phone: 0467 830 979

Office hours: 9am to 5pm, Monday to Friday

General email: info@hw.qld.gov.au



Interpreter Service Statement

The Queensland Government is committed to providing accessible services to Queenslanders from all culturally and linguistically diverse backgrounds. If you have difficulty in understanding this annual report, you can contact us on telephone 13 QGOV (13 74 68) or freecall 1800 512 451 and we will arrange an interpreter to effectively communicate the report to you.

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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.

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 *Multicultural Recognition Act 2016* and Multicultural Queensland Charter 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 its establishment in July 2019, Health and Wellbeing Queensland (HWQld) has prioritised Aboriginal and Torres Strait Islander health equity. Our programs and community partnerships have strengthened, culminating in the endorsement of the Reflect Reconciliation Action Plan (RAP) by Reconciliation Australia and the HWQld Board in October 2023.

The Reflect RAP formalises our commitment to reconciliation and health equity, aligning HWQld with over 2700 organisations nationally. It outlines 13 actions across relationships, respect, opportunities, and governance. By 30 June 2025, over 30 deliverables were completed or embedded as ongoing practice.

Key achievements include:

- Conducting an internal cultural capability survey to guide training and development.
- Active participation in National Reconciliation Week and NAIDOC Week by RAP Working Group members.
- Investigating Supply Nation membership and engagement with First Nations-owned businesses and suppliers.
- Enhancing staff understanding of cultural protocols such as Acknowledgement of Country and Welcome to Country.

Aligned with HWQld's *Strategic Plan 2023–2027*, the RAP strengthens our foundation to reduce chronic disease risk factors and improve health outcomes for all Queenslanders. We acknowledge and thank all contributors supporting our reconciliation journey.

Letter of Compliance



29 August 2025

The Honourable Timothy Nicholls MP
Minister for Health and Ambulance Services
GPO Box 48
BRISBANE QLD 4001

Email: ministerial@health.qld.gov.au

Dear Minister Nicholls

I am pleased to submit for presentation to the Parliament the Annual Report 2024–2025 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 50–51 of this annual report.

Yours sincerely

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

Mr Stephen Ryan
Board Chairperson
Health and Wellbeing Queensland

making healthy happen

Ground Floor
139 Coronation Drive, Milton Green
PO Box 1419 Milton QLD 4064
Telephone +61 467 830 979
Website www.hw.qld.gov.au
ABN 95 443 756 818

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

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Year in review

From the Board Chairperson

The health and wellbeing of Queenslanders remains our unwavering priority.

With a new Queensland Government comes new opportunities to align with evolving priorities, deeper and new partnerships, and a reimagined way we work across sectors. The point of difference for our agency has always been our action-focus, boots-on-the-ground, work on the frontline in prevention.

Since our inception in 2019, Health and Wellbeing Queensland has grown into a leading public health agency. This past year has again demonstrated the strength of our unique model, one that connects policy with practice, brings innovation to prevention, and positions us to work across all levels of government, community, and industry. It is a model that continues to deliver for Queenslanders.

As an inaugural member since Health and Wellbeing Queensland's bipartisan establishment, I have seen first-hand the dedication and expertise that have shaped our first five years, and set the tone for the future. We are now entering a new chapter with renewed purpose and momentum.

I wish to thank The Honourable David Crisafulli MP, Premier; The Honourable Timothy Nicholls MP, Minister for Health and Ambulance Services; and Her Excellency The Honourable Dr Jeannette Young PSM, Governor of Queensland, for their continued support of this incredible agency.

To our Chief Executive Officer, Dr Robyn Littlewood, thank you for your visionary leadership, strategic clarity, and tireless energy. Under your guidance, Health and Wellbeing Queensland has continued to pioneer bold, evidence-based solutions that support healthier lifestyles for Queenslanders of every age and background.

I acknowledge the commitment and contributions of our board members, particularly our three ex-officio members: Queensland Health Director-General Dr David Rosengren, Department of Sport, Racing and Olympic and Paralympic Games Director-General Mr Andrew Hopper (Deputy Chairperson), and Department of Women, Aboriginal and Torres Strait Islander Partnerships and Multiculturalism Director-General Ms Natalie Wilde.

I also thank our non-executive directors for their knowledge, integrity, and passion, which enrich our decision-making and accountability: Emeritus Professor Ian Lowe, Dr Shea Spierings, Ms Stella Taylor-Johnson, Ms Anna Voloschenko, and Ms Jane Williams.

What defines our board is not just governance, but a shared commitment to legacy. That legacy is visible in the enduring partnerships we are building across sectors, and in the strategic reforms we support to reduce chronic disease and health inequity in Queensland.

Our workplace culture is one of the agency's greatest strengths. In the 2024 Working for Queensland survey, our staff again expressed pride and belief in their work's impact. This speaks volumes about the environment we have created, collaborative, purposeful, and values-driven.

The pages of this report highlight the depth and diversity of our work, from community-led health initiatives prioritising rural, regional, and remote Queenslanders, to targeted programs aimed at preventing type 2 diabetes, the fastest-growing chronic condition in the nation.



One standout example is Logan Healthy Living, a significant change for a community identified as a diabetes hotspot, where more than 23,000 residents are living with the condition. This four-year pilot has delivered measurable outcomes, with evaluation results showing clear improvements when comparing participant data from the 12 months prior to the program with the 12 months during its implementation.

All our initiatives are grounded in meaningful partnerships, co-design, community engagement, research, and evaluation. This is how we ensure our work is relevant, effective, and built to last.

As we step confidently into our sixth year, I remain incredibly optimistic. Health and Wellbeing Queensland is well-positioned to continue influencing, innovating, and leading preventive health in this state for decades to come.

We do this because the people of Queensland deserve nothing less.

Mr Stephen Ryan
Chairperson of the Board

Year in review

From the Chief Executive Officer

2025 is the year of delivery and outcomes. We said we would collect the data, invest in the right community at the right time and showcase the impact. Here it is.

Health and Wellbeing Queensland is a trusted, high-performing public health agency, delivering innovative prevention programs and shaping policies that improve the lives of Queenslanders. That didn't just happen.

Created with support from all sides of government, Health and Wellbeing Queensland stands as one of the state's most significant investments in sustainable health for Queenslanders.

In 2025, we mark six years since our founding as Queensland's first dedicated prevention agency, a milestone that reflects both our stability, our momentum and our commitment.

With the election of a new Queensland Government in 2024, we welcomed the opportunity to align with new priorities and deepen our partnerships across government, industry, and community. While the priorities may shift, our purpose remains constant.

This past year reaffirmed the power of our approach: combining evidence with lived experience, policy with practice, and prevention with partnership. We remain focused on delivering meaningful, measurable outcomes and on creating a healthier, more equitable Queensland for all.

Our model is grounded in prevention, strengthened by collaboration, and defined by a singular focus: improving health equity for all. We know many communities across Queensland continue to face entrenched barriers to good health. We recognise these challenges, and we are more determined than ever to respond with compassion, rigour, and urgency.

We remain grass roots, community-led and focused, resulting in quick outcomes and significant impact for Queenslanders today. With our clinician leadership and approach, we remain a connected, relevant and supportive actor within the system, ensuring the next generation of Queenslanders live the healthier and longer life they expect and deserve.

Health and Wellbeing Queensland is here for the long term. Together, with our partners and the communities we serve, we are committed to shaping a healthier, fairer Queensland for generations to come.

Our organisation's success has been guided by our highly skilled board, many of whom have been with us since our establishment. The Board Chairperson, Mr Stephen Ryan, has been 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 guidance, and I thank each of them for how they conduct themselves and lead us.

Everything we have achieved 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.

I wish to thank The Honourable David Crisafulli MP, Premier, and The Honourable Timothy Nicholls MP, Minister for Health and Ambulance Services for their dedication to our organisation.

Health and Wellbeing Queensland 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 Senior Director Ms Judy Nean, 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.

This year, we also bid farewell to our Chief Operating Officer, Mr Mark Tuohy. Mr Tuohy has been with Health and Wellbeing Queensland since the very beginning.

Mr Tuohy joined with a clear purpose: to successfully establish a new and innovative agency dedicated to improving the health of Queenslanders. With that mission accomplished, he leaves behind a legacy, the well-respected and impactful organisation we now have in place.

I also thank our directors and staff who bring expertise, experience, passion, and commitment to our agency.

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. In just six years, Health and Wellbeing Queensland has increased its reach through community engagement, public health campaigns, partnerships and health programs.

I'd like to acknowledge the incredible work of our funded prevention program partners: Deadly Choices, My health for life, 10,000 Steps, Queensland Country Women's Association Country Kitchens, Queensland Association of School Tuckshops' Healthier Tuckshops, and Life Education Queensland.

This year, Health and Wellbeing Queensland was proud to commit renewed funding to these partners, recognising their continued success in helping Queenslanders live healthier lives no matter where they live.

Since 2021, these programs have already supported more than 352,000 Queenslanders to take positive steps toward better health and that number is growing every day.

We know that prevention isn't an add-on, it takes partnership, commitment, respect, and time. But the results speak for themselves: our partners' programs are making a meaningful impact.

I'm so proud of the Health and Wellbeing Queensland team. The pages of this report highlight the depth and diversity of our work, from community-led health initiatives prioritising rural, regional, and remote Queenslanders, to targeted programs aimed at preventing type 2 diabetes, the fastest-growing chronic condition in the nation.

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.

This is called Health Legacy and we started to build this for Queensland six years ago.

Dr Robyn Littlewood
Chief Executive Officer

Our achievements

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

Logan Healthy Living

Logan Healthy Living is a game-changer for a community identified as a diabetes hotspot, where more than 23,000 residents are living with the condition.

This four-year pilot has delivered measurable outcomes, with evaluation results showing clear improvements when comparing participant data from the 12 months prior to the program with the 12 months during its implementation.

Making Healthy Happen 2032 – A strategy for preventing obesity in Queensland

We continue to deliver on the objectives outlined in Making Healthy Happen – 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.

- Developed strategies to create healthy environments and empower people to stay as healthy as they can be.
- Better embedded prevention, early intervention and treatment into our healthcare system.

Gather + Grow 2023–2032 – Queensland Remote Food Security Strategy

We continued to deliver on the Queensland Government's strategy to improve food security in remote Aboriginal and Torres Strait Islander communities. The strategy was developed through partnerships across sectors.

- Established the delivery of four actions related to logistics and supply chain that work towards reducing cost and optimising supply.
- Coordinated a logistics and supply chain technical working group.
- Supported the delivery of Frog Gully and Horn Aquaponics, to help empower communities to grow their own.

A Better Choice

Queenslanders have told us they want access to easily available, reasonably priced, healthier food and drink options when eating out of home. Through the A Better Choice initiative we are helping them to make healthier choices in schools, hospital and healthcare settings, sporting venues and workplaces.

Under Queensland Health's Healthier Food and Drink Supply Directive, the program has been implemented across Queensland Health facilities, including: vending machines, cafés and catering.

- A recent report on the program, has seen several Hospital and Health Services (HHSs) not only met key performance targets but, in some cases, exceeded them.
- More hospital food retail outlets and vending machines than ever are now meeting the required targets for the healthiest food and drink options, including improved access to freely available water across hospitals.



Healthy eating campaign

Our annual healthy eating campaign with Outdoor Media Association (OMA) and AusVeg – the nation's peak body for the vegetable industry – *Fresh Veg, deliciously affordable*, received a record \$10.6 million in donated advertising space.

- This is the fifth year Health and Wellbeing Queensland has partnered with OMA to deliver the campaign.
- Creative reached more than 10 million Australians.
- Of those that recall the creative billboards and signage, 92% of parents were prompted to add more veg, and 72% were inspired to visit the campaign website.

Clinician's Guide to the First 2000 days

This nine-episode podcast from Health and Wellbeing Queensland was developed to support health professionals in guiding parents from preconception through to the preschool years.

Building on the success of *Clinician's Guide to Healthy Kids*, *Clinician's Guide to the First 2000 days* emphasises the vital role of prevention in the early years, helping lay the foundation for lifelong health and reducing the risk of chronic diseases such as cancer, heart disease and type 2 diabetes.

Wellness my Way

Wellness my Way is a community-driven program bringing practical, accessible support for healthier living to rural and regional communities across South West Queensland. Launched in August 2024, it empowers locals to take charge of their health and wellbeing through prevention, connection, and tools tailored to the realities of rural life, delivered right where people live and work.

- Recorded 526 online health checks in its first 11 months.
- A total of 262 referrals have been initiated across 12 different prevention programs.
- Participants have set more than 1300 personal health goals.
- Successfully reaching participants early in their health journey. While 67% of participants do not have a chronic condition, 91% have been identified as at risk.

Message from our Patron



GOVERNOR OF QUEENSLAND

Message from the Governor of Queensland

As Governor and Patron, I am once again pleased to acknowledge the outstanding work of Health and Wellbeing Queensland in supporting Queenslanders to lead healthier, more active lives. It is heartening to see this dedicated agency continue to strengthen its role as a leader in preventive health across our state.

Over the past year, Health and Wellbeing Queensland has continued to deliver innovative programs and partnerships that respond to the unique health needs of Queenslanders. The ongoing implementation of *Making Healthy Happen 2032* demonstrates a long-term commitment to addressing obesity, while *Gather + Grow* continues to shine a light on the issues of food security and nutrition for remote Aboriginal and Torres Strait Islander communities.

I'm pleased to see established programs such as *Pick of the Crop* continue to encourage thousands of Queensland primary school students to eat healthily. Meanwhile, *A Better Choice* continues to support healthier retail food environments, making nutritious options more accessible for Queenslanders. In advancing its mission to reduce the burden of chronic disease, Health and Wellbeing Queensland continues to prioritise support for populations at greater risk. Programs such as *Logan Healthy Living and Wellness my Way* deliver tailored, community-based interventions for those susceptible to chronic conditions, including Type 2 diabetes.

As part of my commitment to encouraging a healthy and active Queensland, I have continued co-hosting community walks both at Government House and regionally, that have drawn wonderful community participation. These walks are a simple yet powerful reminder of the value of preventive health at every age and stage of life.

I remain deeply impressed by the ongoing efforts of Health and Wellbeing Queensland to tackle complex challenges with practical, community-driven solutions. I commend the organisation for its vision, energy and commitment to improving the health of all Queenslanders.

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

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

About Health and Wellbeing Queensland

Health and Wellbeing Queensland (HWQld) is committed to our vision of making healthy happen for all Queenslanders by embedding prevention in Queensland communities and in the broader healthcare system.

Building on its foundational work, HWQld is delivering strong returns for the healthcare system by continuing to invest in prevention programs and upskilling the health workforce. At the same time, it is creating a healthier future for all Queenslanders.

By addressing the risk factors for chronic disease, HWQld is contributing to a stronger health system and a healthier Queensland.

Strong foundations have been built in the first six years. This includes two Government strategies in *Making Healthy Happen 2032* and *Gather + Grow 2023–2032*,

and in partnership with the Queensland Mental Health Commission, a blueprint to improve mental health and wellbeing outcomes in Thriving Lives, Connected Communities. The Strengthening Prevention Framework was also developed, providing an innovative approach to reducing chronic disease rates.

The need for prevention is clear and its benefits have been demonstrated. It delivers positive outcomes for individuals, families, communities and the economy. HWQld's evidence-based prevention initiatives help ensure that every Queenslanders, regardless of their circumstances, or where they live, can thrive.

Our people

Health and Wellbeing Queensland Board

Health and Wellbeing Queensland (HWQld) is the state's prevention agency, an independent statutory body established under the *Health and Wellbeing Queensland Act 2019* (HWQld Act). The agency 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.

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	<p>HWQld Board has the following functions under the HWQld Act:</p> <ul style="list-style-type: none">• to ensure the proper, efficient and effective performance of HWQld's functions• to decide the objectives, strategies and policies to be followed by HWQld• to ensure HWQld complies with its obligations under the Act or another law• any other function given to the board, under the HWQld Act or another Act
Achievements	<p>Approval of:</p> <ul style="list-style-type: none">• 2023–2024 financial statements and 2024–2025 and 2025–2026 budgets.• GenQ Grant Scheme.• HWQld Risk Management Framework and Risk Register.• Negotiations to be conducted with program partners for extensions of HWQld-funded prevention programs and to extend funding of the Logan Healthy Living program.• HWQld <i>Strategic Plan 2023–2027</i>.• New appointment of Mr Michael Dillon to the Finance, Audit and Risk Management Committee.• CEO's overseas travel request to Copenhagen be progressed for government approval in accordance with the Queensland Government Air Travel Policy.
Financial reporting	<p>The Finance, Audit and Risk Management Committee provides independent advice, assurance and assistance to the HWQld Board in the areas of risk, control, audit, performance management and compliance frameworks.</p> <p>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 HWQld Board after each Finance, Audit and Risk Management Committee meeting.</p> <p>The HWQld Board acts in accordance with the <i>Financial Accountability Act 2009</i>, adheres to the <i>Financial and Performance Management Standard 2019</i> and contributes to the Queensland Health budget and service delivery statements.</p>

Health and Wellbeing Queensland Board					
Remuneration					
Position	Name	Meeting 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	\$37,000
Director-General Member and Deputy Chairperson	Mr Andrew Hopper	1	Not applicable as chief executive	Not applicable	Not applicable
	Ms Sarah Vandersee, Deputy Director-General, Corporate, Department of Sport, Racing and Olympic and Paralympic Games attended five of the six board meetings as proxy for Mr Hopper.				
Director-General Member	Ms Natalie Wilde	2	Not applicable as chief executive	Not applicable	Not applicable
Director-General Member	Ms Kathy Parton	2	Not applicable as chief executive	Not applicable	Not applicable
Director-General Member	Ms Clare O'Connor	1	Not applicable as chief executive	Not applicable	Not applicable
	Mr Jason Kidd, Deputy Director-General, Communities, Department of Treaty, Aboriginal and Torres Strait Islander Partnerships, Communities and the Arts attended the 28 August 2024 board meeting as proxy for Ms O'Connor.				
Director-General Member	Dr David Rosengren	1	Not applicable as chief executive	Not applicable	Not applicable
	Ms Colleen Jen, then Deputy Director-General, Corporate Services, Department of Health attended the 26 November 2024 board meeting as proxy, while Dr Heidi Carroll, then Chief Health Officer, Department of Health attended the 23 April 2025 and 18 June 2025, board meetings as proxy for Mr Rosengren.				
Director-General Member	Mr Michael Walsh	0	Not applicable as chief executive	Not applicable	Not applicable
	Ms Colleen Jen, then Deputy Director-General, Corporate Services, Department of Health attended the 28 August 2024 and 9 October 2024 board meetings as proxy for Mr Walsh.				
Member	Emeritus Professor Ian Lowe	5	\$15,000 per annum	Not applicable	\$15,000
Member	Dr Shea Spierings	5	\$15,000 per annum	Not applicable	\$15,000
Member	Ms Stella Taylor-Johnson	4	\$15,000 per annum	Not applicable	\$15,000
Member	Ms Anna Voloschenko	6	\$15,000 per annum	Not applicable	\$15,000
Member	Ms Jane Williams	5	\$15,000 per annum	\$2,000 per annum	\$17,000
No. scheduled meetings	Six meetings being 28 August 2024, 9 October 2024, 26 November 2024, 26 February 2025, 23 April 2025 and 18 June 2025.				
Total out of pocket expenses	N/A				

Finance, Audit and Risk Management Committee

The Finance, Audit and Risk Management Committee (FARM) 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 met four 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	To provide independent advice, assurance and assistance to the HWQld Board in the areas of: <ul style="list-style-type: none">• Risk, control, audit, performance management and compliance frameworks.• 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>.				
Achievements	<ul style="list-style-type: none">• Monitored the 2024–2025 budget.• Endorsed the 2023–2024 financial statements.• Endorsed progress on the Internal Audit Charter, 2024–2027 Internal Audit Plan, and 2025–2028 Internal Audit Plan.• Monitored the External Audit Plan.• Monitored the Risk Register.• Provided guidance on the long-term budget position.• Updated the board with advice on financial governance, risk management and cyber risk.				
Financial reporting	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, and monitor financial performance including approval of annual financial reports.				
Remuneration					
Position	Name	Meeting attendance	Approved annual, sessional or daily fee	Approved sub-committee fees if applicable	Actual fees received
Chair	Mr Christopher (Chris) Johnson	4	\$3,000 per annum	Not applicable	\$3,000
Member	Mr Stephen (Steve) Ryan	4	\$2,000 per annum	Not applicable	*\$2,000
Member	Ms Jane Williams	2	\$2,000 per annum	Not applicable	*\$2,000
No. scheduled meetings	Four meetings were held during the reporting period being 12 August 2024, 20 November 2024, 25 February 2025 and 17 June 2025.				
Total out of pocket expenses	N/A				

*This fee is also included in the Board reporting table under the approved sub-committee fees (page 11).

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 (up until 29 June 2025)
- Senior Director – Health Promotion: Ms Judy Nean
- Director – Business and Governance: Ms Jennifer Kenny.

Organisational structure and workforce profile

As of 30 June 2025, HWQld employed 82 staff (67.55 FTE), reflecting growth from establishment in 2019–2020 to a mature, implementation-focused workforce. Permanent roles constitute 87.8% of FTEs, with temporary positions making up 12%. Women hold 78% of managerial roles (Administration Officer level 7 and above), demonstrating strong gender representation in leadership.

HWQld's multidisciplinary workforce includes dietitians, public health nutritionists, nurses, health promotion officers, researchers, policy experts, communications specialists, digital and data analysts, and administration officers, skills essential for effective delivery of its broad mandate.

The organisation operates under Queensland Public Service values, driving employee behaviour and decision-making.

Seven functional streams deliver HWQld's programs:

- **Business and Governance:** Provides corporate services including financial and human resource management, grants, contracts and procurement services, risk and information management, and board support.

- **Communications and Engagement:** Leads statewide social marketing, campaigns, community sponsorships, and partnerships to promote healthy choices.
- **Equity and Communities:** Implements healthy food environments, physical activity strategies, and food security initiatives, partnering with local government, health services, and academia.
- **Policy:** Coordinates strategic planning and whole-of-agency policy development, aligning outputs with government priorities, supported by the Project Management Office.
- **Prevention Systems:** Integrates chronic disease prevention and early intervention across health and education sectors, supported by digital solutions and evaluation.
- **Research and Impact:** Develops evidence-based policy and program guidance to improve population health and reduce inequities.
- **Strategic Partnerships:** Engages corporate and philanthropic partners to amplify program impact and innovation.

Organisational structure as at 30 June 2025



Prevention with Purpose:

Delivering systems-level impact for Queensland

More than 53% of Queenslanders live with one or more modifiable chronic conditions¹, contributing to an estimated \$40 billion annual economic impact across Australia². Without intervention, this growing burden will escalate health system pressures, increase costs, and strain the workforce.

Effective prevention is key. Nearly 40% of Australia's disease burden is preventable by addressing risk factors such as poor diet and physical inactivity³. Every \$1 invested in preventive health in Australia saves approximately \$14.30 in healthcare and related costs⁴, underscoring prevention as a cost-effective cornerstone of Queensland's health system.

Health and Wellbeing Queensland (HWQld), as the state's dedicated prevention agency, leads these efforts.

A prime example is the Logan Healthy Living (LHL) program, a community-based chronic disease reduction initiative delivered by UQ Health Care in partnership with HWQld and allied organisations including Griffith University, Metro South Health, Brisbane South Primary Health Network, and Logan City Council.

Evaluation of LHL demonstrates significant health system benefits⁵:

- 10% reduction in hospital admissions
- 10% fewer hospital bed days
- 30% fewer emergency presentations
- Nearly 40% reduction in individuals with at least one hospitalisation.

Participants also report increased physical activity, improved fruit and vegetable intake, greater diabetes management confidence, and enhanced quality of life.

Economic analysis shows LHL delivers an 82% return on investment, generating \$1.82 in value for every \$1 spent, effectively easing pressure on Queensland's health system.

The Logan Healthy Living initiative demonstrates the power of prevention in action.

In 2024, for the first time, overweight and obesity became the leading risk factor for total disease burden in Australia, overtaking tobacco use⁶. Prevention for the future requires an innovative response.

At HWQld, prevention is no longer a future aspiration, it's embedded in how we deliver impact now. Our approach activates practical, coordinated action across individuals, communities, and service systems. Strategic priorities are designed to enable access, strengthen partnerships, amplify knowledge, and drive cross-sector collaboration to reduce chronic disease and ease long-term pressure on the health system.

In 2024, HWQld administered more than \$55.4 million in funding to advance strategic initiatives, capability building, research, communications, and community-led action. This investment integrates prevention into the core services Queenslanders rely on, strengthening today's systems while preventing costly downstream interventions.

The release of the *GenQ Impact Report 2019–2024* (<https://hw.qld.gov.au/about-us/performance/genq-report/>) marked a significant milestone, capturing five years of statewide effort to embed prevention and drive generational change in health and wellbeing. Grounded in the Generation Queensland (GenQ) vision, our focus has remained clear: every child born today should have the opportunity to live a healthier life than the generations before them.

GenQ has been HWQld's platform for whole-of-system prevention, working to reduce childhood overweight and obesity, support healthy development in the first 2000 days, and enable place-based prevention led by communities.

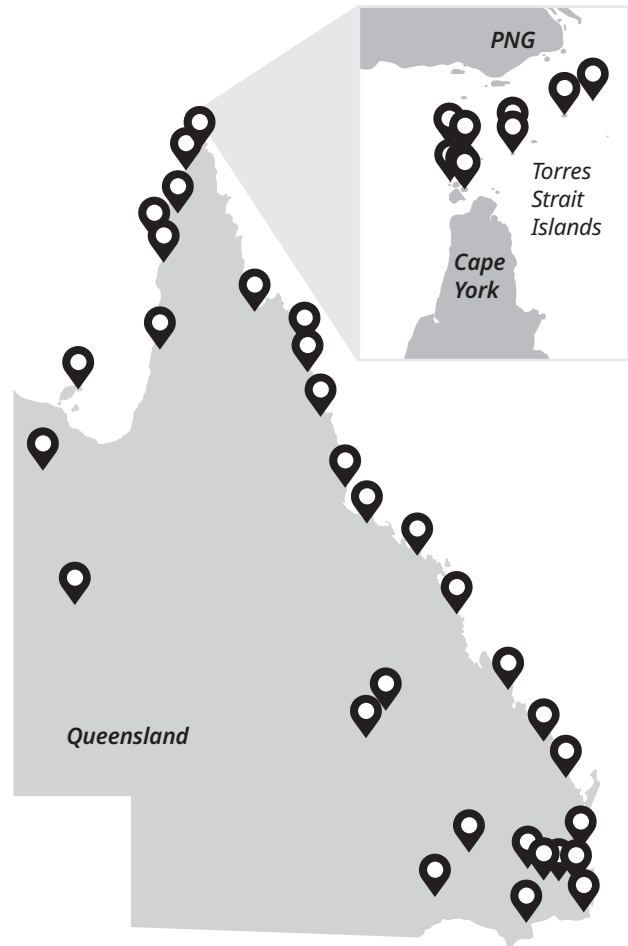
The GenQ Impact Report demonstrates HWQld's unique role in translating evidence into action at scale, through systems partnerships, local innovation and statewide leadership.

- \$89 million invested in prevention initiatives, reaching more than 119,000 Queenslanders.
- Rollout of flagship programs including Pick of the Crop, Podsquad, Gather + Grow, A Better Choice, and Logan Healthy Living.
- Launch of the GenQ Grants Program, funding 25 community-led projects and 2 research impact grants.
- Deep partnerships across government, communities, academia, and industry to embed prevention into everyday systems and settings.

HWQld continues to build on this foundation, working across sectors to deliver targeted, equitable and sustainable prevention initiatives. From schools and hospitals to local councils and sports clubs, we are embedding prevention into the settings where Queenslanders live, learn, work and play. This integrated approach is central to protecting health, reducing system burden, and ensuring every Queenslander has the opportunity to thrive.

Partnerships are central to Health and Wellbeing Queensland's approach to prevention. Through targeted funding and collaborative leadership, HWQld enables the delivery of high-impact programs that improve health outcomes for Queenslanders across the state.

By coordinating cross-government governance and investing in shared accountability, HWQld ensures policies, strategies and actions reflect the needs and voices of local



communities. These partnerships bring together diverse knowledge, expertise and resources, delivering innovative, community-informed solutions with measurable impact.

Research partnerships are embedded throughout our work, ensuring that prevention initiatives are evidence-based and outcomes-driven.

Through this integrated model, HWQld is driving long-term reductions in chronic disease and contributing to a more sustainable, equitable health system for all Queenslanders, now and into the future.

The map (above) represents the locations of HWQld's activities and initiatives across Queensland in 2024–2025, strengthened by digital resources, media campaigns and social marketing.

1. Queensland Remote Food Security

Health and Wellbeing Queensland (HWQld) is improving food security in Far North Queensland, and has shown the impact of coordinated and community informed action through 25 remote food stores and targeted action plans for 19 discreet communities.

HWQld data highlights that healthy food remains unaffordable for many Queenslanders, with the greatest impact felt in remote communities. Gather + Grow (<https://hw.qld.gov.au/gather-grow/>) is HWQld's strategy which provides a targeted, multi-sector approach to improve food affordability and security in these regions.

The strategy's framework and insights hold relevance beyond Far North Queensland, offering valuable lessons that can inform scalable solutions for other areas facing similar challenges across the state.

Gather + Grow Remote Food Security

HWQld is leading the Queensland Government's response to food insecurity in remote Far North Queensland through the *Gather + Grow Remote Food Security Strategy 2023–2032* and its accompanying Action Plan (2023–2026). It represents Queensland's first coordinated, whole-of-system response to food insecurity in remote communities, initially focused on the Far North and Lower Gulf regions.

Led by HWQld, and developed in partnership with community, all tiers of government and multiple sectors, the strategy is structured around four priority areas:

- **Logistics and supply chain**
- **Local food production**
- **Healthy Communities**
- **Healthy Homes.**

Coordinated, cross-sector implementation

HWQld established two multi-agency Technical Working Groups (TWGs) to coordinate delivery of logistics and local food production actions. These groups, involving six government departments, drive cross-sector collaboration and monitor progress toward system-wide solutions.

A Steering Committee, with representatives from local, state and federal governments, provides strategic oversight.

To support data-informed decision making, HWQld has:

- Collected two years of food affordability data across 35 remote communities, establishing a baseline for future evaluation
- Initiated the Gather + Grow Measuring Change Framework to evaluate the impact of aligned actions across sectors.

HWQld's work has contributed to the development of the forthcoming National Remote First Nations Food Security Strategy, providing expert advice and supporting national consultation processes.

Logistics and supply chain: enhancing food access

Food delivery to Far North communities can take more than eight days, challenged by distance, infrastructure and climate.

To strengthen supply chains, HWQld is working with:

- Department of Primary Industries
- Queensland Health
- Department of Transport and Main Roads.

Together with seven other agencies, partners are progressing four strategic actions focused on:

- Remote freight subsidy design
- Supply hub optimisation
- Infrastructure planning
- Sector-wide engagement, including retailers and freight providers.

Local food production: building community resilience

Remote communities have identified local food production as essential for resilience and economic and nutritional wellbeing. HWQld is collaborating with five departments to deliver four actions that support:

- Place-based planning
- Sustainable food systems
- Local economic development.

Key investments include:

- \$75,315 to each of 19 Aboriginal and Torres Strait Islander councils, supporting infrastructure planning for improved food access and/or active living. Nine councils are focusing specifically on food security.
- \$320,000 in partnership with Torres Shire Council, funding:
 - A sustainable Aquaponics system on Horn Island
 - Upgrades to the Frog Gully community garden on Thursday Island.

These initiatives foster local growing capability and community ownership.

HWQld and partners are also co-designing a multi-criteria framework to guide future investment in local food production, grounded in community readiness and impact potential.



Healthy Communities

HWQld is partnering with remote communities, schools, and local governments to strengthen community-driven food security and wellbeing outcomes.

Community-led action planning

In collaboration with Apunipima Cape York Health Council and Torres Strait Island Regional Council, HWQld delivered Stage 1 of Gather + Grow across 26 communities in Cape York and the Torres Strait. This stage involved:

- Extensive local consultation to identify food security challenges
- Development of community-led action plans to guide investment and implementation from July 2025.

Healthy Stores: supporting better choices

HWQld's Healthy Stores project, in partnership with 25 Community Enterprise Queensland (CEQ) remote food stores, is improving in-store environments to promote healthier food and drink choices.

Interventions included:

- Store layout redesign
- Targeted in-store promotions.

Early results show positive shifts in purchasing behaviour, and a new two-year contract commenced in June 2025 to continue momentum and scale impact.

Expanding Pick of the Crop in the Far North

The Pick of the Crop (POTC) program has expanded to 18 primary schools across Far North Queensland, delivering:

- Culturally responsive food and cultural gardens
- Healthy food promotions
- Sustainability education.

Program design is tailored to reflect the unique cultural and environmental context of participating communities.

Strategic partnership with Cook Shire Council

In 2025, HWQld signed a Memorandum of Understanding (MoU) with Cook Shire Council, formalising collaboration on shared priorities. A joint initiatives plan focuses on:

- Community engagement
- Nutrition and cooking skills
- Physical activity opportunities
- Food security for children and young people.

The partnership supports delivery of aligned goals under both organisations' strategic plans and strengthens place-based public health infrastructure in the region.

Healthy Homes

Healthy Homes are fundamental to food security, providing families the means to safely store, prepare, and cook nutritious food. Health and nutrition outcomes are undermined by overcrowding, barriers to home gardening and limited access to reliable appliances, electricity and water.

Collaborative action to strengthen Healthy Homes

HWQld partners with Queensland Health, Department of Housing and Public Works, Department of Environment, Tourism, Science and Innovation, Community Enterprise Queensland, and the Torres Strait Regional Authority to deliver four strategic actions under the Gather + Grow Healthy Homes priority.

Enhancing healthy food utilisation

Action 4.1, delivered with Queensland Health and Housing, leverages insights from the Healthy Housing Pilot Program in Yarrabah and Badu. This work deepens understanding of factors impacting healthy food use in homes and informs integrated food security and service delivery models.

Yarrabah Foodcubes Project: home gardening pilot

In partnership with the University of Sunshine Coast (UniSC) and Yarrabah Aboriginal Shire Council, HWQld is piloting the Yarrabah Foodcubes Project, a community-driven home gardening initiative designed to strengthen household food security and wellbeing.

- Phase 1 launched June 2024, funded by a UniSC LAUNCH Partnership Grant, included:
 - 12 Foodcubes
 - Employment of a community project assistant and garden mentor
- Two Foodcubes were planted at a community site to raise awareness
- 10 Foodcubes were allocated to households via a Council-led expression of interest process in August 2024
- HWQld funded an additional 12 Foodcubes planted in December 2024 to meet demand.

Post-project evaluation and community feedback are currently underway to guide future scaling.

2. Making Healthy Happen

Making Healthy Happen 2032 and Action Plan 2024–2026 (<https://hw.qld.gov.au/making-healthy-happen>), is a cross-government strategy taking a whole-of-system approach to prevent, reduce and treat obesity.

Making Healthy Happen 2032 is a nine-year strategy (2024–2032) with an initial three-year Action Plan for 2024–2026. It focuses on three ambitions:

- creating supportive, sustainable and healthy environments
- empowering people to stay healthy
- enabling access to prevention, early intervention, and supportive healthcare.

In 2024–2025, the first Making Healthy Happen Action Plan commenced. With new data showing that overweight and obesity overtook tobacco in 2024⁶ as the leading contributor to disease burden in Australia, sustained action to address this growing health and economic challenge remains essential.

The Action Plan establishes strong foundations for change by building collaboration and strong partnerships.

Implementation of the 40 actions continued throughout 2024–2025, being led or supported by 11 government agencies. As at March 2025, 23 actions are complete.

Health and Wellbeing Queensland continues to lead implementation of flagship projects across healthy schools, healthy food environments and healthy communities. Outcomes from these projects under Making Healthy Happen are detailed in this section. Measuring change has also remained a priority. Evaluation and progress reporting is used to identify what is working, inform learning and adaptation and support coordinated efforts to prevent, reduce and treat obesity.

Healthy schools

Pick of the Crop

Pick of the Crop (<https://hw.qld.gov.au/pick-of-the-crop/>) continues to expand its footprint across Queensland, encouraging more primary school students to learn about and eat more vegetables and fruit. Since launching in 2021, the initiative has reached over 242 schools and 54,000 students, delivering positive experiences and feedback from educators, students and communities alike.

In 2024–2025, 189 schools across six Department of Education regions participated in Pick of the Crop, reaching 36,677 students. The initiative expanded into Central Queensland (Mackay Local Government Area) for the 2025 school year, broadening its reach and ensuring more Queensland students benefit.

To support schools, \$259,000 in grant funding was distributed to 47 new and 44 returning schools, with tailored support provided to 15 new Far North Queensland schools, including additional investment for remote and discrete communities.

A 2024 Term 4 review involving 138 schools highlighted strong results:

- 93% rated their Pick of the Crop experience as *excellent or good*
- 99% would recommend the initiative to other schools
- 84% saw strong improvement in student vegetable and fruit consumption opportunities.

Regional coordinators reported meaningful impacts, including:

- Stronger whole-school approaches to health and wellbeing
- Higher student engagement through hands-on learning
- Deeper community connections
- Enhanced nutrition education
- Positive behaviour changes among disengaged students
- Sustained momentum for health across school communities.

To support continued growth and long-term sustainability, the University of Newcastle's National Centre of Implementation Science began a review of the model. Its recommendations will inform future delivery and scaling across Queensland.

Pick of the Crop schools also continue to lead the way in local promotion and engagement, supported by online resources, social media, and networking events, ensuring healthy messages reach beyond the school gate.



Healthy food environments

A Better Choice

A Better Choice (<https://hw.qld.gov.au/a-better-choice/>) is a comprehensive public health initiative aimed at enhancing access to healthy food and drink options outside the home. Based on the Australian Guide to Healthy Eating, it uses a traffic light system to classify foods by nutritional value. In 2024–2025, HWQld advanced implementation of the A Better Choice Strategy across Hospital and Health Services (HHSs) and sport and recreation facilities.

Healthcare sector progress

Health and Wellbeing Queensland (HWQld) supports HHSs to comply with the Health Service Directive: Healthier Food and Drinks in Healthcare Facilities through the A Better Choice Food and Drink Supply Strategy. Compliance improved from 59% in 2023 to 68% in 2024 across retail outlets and vending machines.

- Five HHSs achieved 100% of food and drink targets
- 12 HHSs made significant improvements
- 95% of vending machines met healthy drink minimums
- 92% removed sugary drinks.

For the first time, HHS-level compliance data was publicly released to enhance transparency and support strategy adoption.

School settings: Smart Choices transition

HWQld is partnering with the Department of Education to transition the Smart Choices school food strategy into A Better Choice for school settings. Funding has been secured for a dedicated Nutritionist, with a Project Oversight Group established and activities underway.

Sport and recreation facilities

HWQld continues to collaborate with key partners, Department of Sport, Racing and Olympic and Paralympic Games, QSport, and state sporting bodies, to boost healthy food availability in clubs and venues.

Key venues engaged include:

- Nissan Arena and Sleeman Sports Complex (with Stadiums Queensland)
- State Hockey Centre (with Hockey Queensland)
- Coomera Indoor Sports Centre (with City of Gold Coast)
- South Pine Indoor Sports Centre (with Belgravia Leisure).

'Pick Me for Kids' campaign

Informed by insights from over 100 Queensland children, HWQld developed the 'Pick Me for Kids' campaign to help young people identify healthy choices at sport and recreation venues. Promotional materials were showcased at the Australian and New Zealand Obesity Society Conference in October 2024.

Healthy communities

ConnectingQ

ConnectingQ (<https://hw.qld.gov.au/connectingq/>) is HWQld's digital platform and collaborative network, designed to strengthen cross-sector efforts that shape and deliver effective policies and local action to support active, healthy communities.

Since its launch 18 months ago, ConnectingQ has grown to 305 members across Queensland, representing state and local government, NGOs, academia, business, health and community sectors. This diverse network shares a common goal: advancing prevention and creating environments that enable Queenslanders to thrive.

ConnectingQ integrates the Project ECHO® Learning Series, a proven virtual knowledge-sharing model that builds workforce capacity through interactive learning, mentoring and communities of practice.

In the past year, seven ECHO® sessions were delivered, offering participants an engaging forum to share expertise, explore local initiatives, and exchange ideas on embedding prevention into daily practice. The sessions focused on real-world case studies that demonstrated the power of place-based collaboration and community leadership, including:

- A community-led initiative in Bundaberg
- A citizen science project on active travel in Toowoomba
- Innovative responses to health inequity in Logan
- A co-designed approach for migrant and refugee communities in Springfield and Redbank Plains.

These examples highlighted how ConnectingQ supports local action by facilitating access to practical knowledge and fostering peer learning.

The platform itself was co-designed with multiple stakeholders and continues to be shaped by a dedicated cross-sector working group, ensuring it remains responsive to the needs of Queensland's diverse communities.

Do Your Thing (Bundaberg)

Launched in 2022, *Do Your Thing* (DYT) is a place-based, community-led initiative driving tailored health and wellbeing improvements across Bundaberg. The initiative originally led by HWQld has been delivered over three phases and concluded in January 2025, with the finalisation of the transition and legacy phase. The program continues to be led by a local community network to remove barriers and build capacity among local organisations involved in service delivery, infrastructure, planning and policy.

Commissioned by HWQld, Evidn embedded behavioural science into DYT's design, delivery, and evaluation to maximise impact.

The successful achievement of project objectives provides encouraging evidence of its longer-term integration into the Bundaberg community, beyond the support from HWQld and Evidn. this is demonstrated by:

- Increased engagement in local health and wellbeing activities.
- Formation of a leadership group with leaders from local organisations including community-based and private providers that specialised in physical activity and healthy eating as well as aged care, early childhood and disability support, mental health and wellbeing support.
- Enhanced integration and capacity of service providers through targeted workshops on collaboration, health behaviour change, data use, and grant applications.

- Launch of the Do Your Thing, Our Bundaberg Region digital platform to unify community engagement.
- Development of resource packs supporting data collection, management, and evaluation of regional health outcomes.

While program awareness and event attendance remain opportunities for growth, these results demonstrate sustainable community integration beyond HWQld and Evidn's support.

Learnings and insights from this project will be used to inform development of future community support models for place-based, community-led health and wellbeing initiatives across Queensland.

3. Thriving Lives, Connected Communities – Queensland Government Mental Health and Wellbeing Commitment

From 2018 to 2024, the average number of mentally unhealthy days for adult Queenslanders in the past 30 days increased by 1.2 days, from an average of 4.5 to 5.6 mentally unhealthy days⁷.

Thriving Lives, Connected Communities: Queensland's Commitment to Mental Health and Wellbeing (<https://hw.qld.gov.au/thriving-lives-connected-communities/>) was developed to improve mental health outcomes by supporting wellbeing. Released in September 2024,

Thriving Lives, Connected Communities was developed in response to recommendation 19 of the Mental Health Select Committee, Report No. 1 of the 57th Parliament – *Inquiry into the Opportunities to Improve Mental Health Outcomes for Queenslanders*.

Thriving Lives, Connected Communities highlighted evidence-based areas for action to improve mental health and wellbeing.

4. Queensland Equity Framework

The Equity Framework (<https://hw.qld.gov.au/equity-framework/>) was published on the HWQld website in September 2024, in line with HWQld's legislative remit under *Health and Wellbeing Queensland Act 2019* to address health inequity. Developed through community and Government consultation, the Framework is a guideline, providing information about the causes of inequity and

ways to support equitable outcomes in Queensland. It includes a guide for policy makers.

Publication of the Equity Framework delivered on a commitment under the *Communities 2032 Action Plan 2022–25* (Action 21).

5. Clinical Prevention

Strengthening Prevention in Integrated Care Systems

In May 2025, Health and Wellbeing Queensland (HWQld) launched the Strengthening Prevention in Integrated Care Systems Framework (<https://hw.qld.gov.au/strengthening-prevention/>), developed through comprehensive review and consultation with over 630 stakeholders and consumers across Queensland.

The Framework reflects a shift to a strengths-based, collaborative approach that unites action within and beyond the health system. It aims to establish a world-leading, integrated prevention ecosystem by fostering coordinated, cross-sector efforts to reduce preventable chronic disease.

Designed to build Integrated Care Systems, the Framework outlines guiding principles and foundational components that enable health, community, and social care partners to collectively strengthen prevention. It calls on organisational leaders influencing community health and wellbeing to drive system-wide transformation focused on proactive, sustainable prevention.

Achieving this vision requires multi-agency collaboration, workforce engagement, and meaningful community involvement. The Framework advocates for leadership that transcends day-to-day system demands to champion transformative, long-term change in chronic disease prevention.

Podsquad

Podsquad (<https://hw.qld.gov.au/podsquad>) is a free, play-based wellbeing app supporting Queensland children aged 5–12 and their families to develop healthy habits in nutrition, physical activity, and sleep. Through interactive animations, games, quizzes, and quests, the app improves children's health literacy and encourages sustainable behaviour change. It also equips parents and carers to foster healthy home environments.

Promotion and engagement

In 2024–2025, HWQld delivered targeted campaigns via general practice clinics, digital platforms, and community events across South East, South West, and Far North Queensland, including partnerships with Cook Shire Council and local schools. A redesigned Podsquad website improved user experience and scalability. The Podsquad Explorer Kit was trialled to support community-led outreach.

Program enhancements

Content expansion included new recipe videos and play-based physical activities to engage children indoors and outdoors. Inclusive design research advanced through a PhD project tailoring the app for children with autism and ADHD, with further testing planned for 2025–2026. A feasibility study conducted in partnership with The University of Queensland examined parent and child engagement, informing ongoing improvements.

Usage and reach

- 5374 new downloads (21,830 total)
- 2391 new family accounts (10,600 total)
- 3269 new child profiles (15,401 total)
- 2683 active or completed quests (3246 total)
- 34,137 new interactions with animations/games (188,947 total).

Health sector integration

Podsquad was trialled in clinical settings through partnerships with Queensland Children's Hospital and Mackay Hospital and Health Service. Feedback highlighted its potential to support paediatric patients. Podsquad was also promoted at key industry events, with new clinician resources under development for 2025–2026.

Logan Healthy Living

Logan Healthy Living (<https://hw.qld.gov.au/logan-healthy-living/>) continued to deliver strong outcomes in 2024–2025, marking the completion of the four-year pilot in December 2024, and continued investment and service delivery through to the end of the financial year.

Logan Healthy Living is a community-based, integrated approach to chronic disease prevention and management, with a focus on supporting those at risk of, or living with, type 2 diabetes.

The cornerstone of Logan Healthy Living is a Lifestyle Management Program for people over 16 years old who have a type 2 diabetes diagnosis. The eight-week program includes group education workshops and physical activity sessions delivered by interprofessional healthcare workers and a student-infused allied health workforce.

Outcome evaluation

Logan Healthy Living has been underpinned by a strong research and evaluation approach led by the Health and Wellbeing Centre for Research Innovation at The University of Queensland. Key findings⁵ of the pilot from 1 July 2021 to 31 December 2024 include:

- Over 10,000 occasions of service delivered to over 700 participants, with a completion rate of 78% (defined as attending six or more sessions)
- Significant improvements in behaviour change at 12 months, including a 13.4% increase in physical activity, 21% increase in fruit intake, and 5.1% increase in vegetable intake
- Improvements in diabetes related distress, quality of life and motivation
- Very high satisfaction with 100% of participants indicating they would recommend the program to a friend or family member
- 450 students were supported to complete learning and research activities
- Significant research outputs, including three published research articles, eight local, national and international conference presentations, \$4.1 million in grant funding applications, and more than 10 research projects and publications in the pipeline for completion over the next 12–24 months.

Economic evaluation

An independent economic analysis of Logan Healthy Living, over the pilot period demonstrates:

- For every \$1 invested in the program, \$1.82 of value was generated, representing an 82% return on investment
- 10% reduction in the total number of hospital admissions (any cause)
- 10% reduction in the total number of hospital bed days (any cause)
- 30% reduction in the total number of people presenting to emergency (any cause)
- An almost 40% reduction in the number of people with at least one hospitalisation (any cause).

Wellness my Way

Wellness my Way (<https://hw.qld.gov.au/wellnessmyway/>) is a Queensland Government pilot initiative designed to identify individuals with modifiable risk factors for chronic disease and connect them to free or low-cost preventive health programs. Piloted in the South West Hospital and Health Service region from August 2024 to June 2025, the initiative is delivered in partnership with Health and Wellbeing Queensland, Queensland Health's Health Contact Centre, South West HHS, and the Health and Wellbeing Centre for Research Innovation at The University of Queensland.

Participants access the program through a digital health assessment, followed by a personalised telephone coaching session, where trained coaches support behaviour change and facilitate referrals to programs delivered virtually, by phone, or in the community.

To drive community participation, three key implementation strategies were deployed:

- **Localised Marketing:** A place-based campaign, shaped through community consultation and featuring familiar local voices and stories, increased awareness and encouraged residents to prioritise their health.
- **Community Connectors:** 11 health and community organisations across the Maranoa region championed Wellness my Way, embedding the program into their networks and participating in four implementation workshops to strengthen delivery and collaboration.
- **Waitlist Invitations:** Individuals on Queensland Health waitlists received SMS invitations, offering timely support to adopt healthier behaviours while awaiting clinical appointments.

Results from August 2024 to June 2025:

- 366 digital health assessments completed
- 179 participants progressed through the full model of care, representing a 33.9% conversion rate
- 1267 health goals identified in personalised Wellbeing Action Plans, targeting key risk factors including smoking, alcohol, nutrition, physical activity and emotional wellbeing
- 255 referrals made to prevention programs
- High participant satisfaction with both digital assessments and coaching sessions.

Backed by strong collaboration between health system partners, the program is continuing in the South West region for a further 12 months. The next phase focuses on deepening local integration, expanding reach, and informing opportunities for broader system-level sustainability.



Move and Measure It!

Move and Measure It! is a physical activity cascade of care initiative introduced in Queensland Health's *Multimorbidity Quality Improvement Strategy* (the strategy), released in July 2024. The strategy aims to improve the healthcare outcomes of mental health alcohol and other drugs (MHAOD) service consumers with or at risk of multimorbidity and includes initiatives using a cascade of care model to monitor and guide the collective progress through stages of care for a specific condition.

The Move and Measure It! initiative provides MHAOD care teams with an eight-step process to assist them when engaging with consumers in providing evidence-informed interventions that increase physical activity levels to improve health and wellbeing and to reduce the risk for chronic disease.

HWQld in collaboration with The University of Queensland and the MHAOD Branch, Queensland Health, developed a five-part Move and Measure It! Project ECHO® series aimed to upskill the mental health workforce to embed physical activity screening and brief intervention into routine healthcare practices.

Prevention program partners

Deadly Choices

Deadly Choices (<https://deadlychoices.com.au>), the flagship health promotion initiative of the Institute for Urban Indigenous Health (IUIH), continued to deliver a broad suite of culturally responsive programs aimed at improving the health and wellbeing of Aboriginal and Torres Strait Islander communities across Queensland. Supported by Health and Wellbeing Queensland (HWQld), the program takes a strengths-based approach to building individual and community capacity to make healthier choices, focusing on nutrition, physical activity, leadership, and preventive health care.

Between 1 July 2024 and 30 June 2025, Deadly Choices delivered 617 health promotion programs with 6852 participant completions. Additionally, Deadly Choices delivered 127 community events, with 20,571 attendees.

Key components of program delivery included:

- 272 Deadly Choices Healthy Lifestyle Education programs
- 160 Good Quick Tukka (cooking and nutrition) programs
- 185 Traditional Indigenous Games programs.

The program achieved strong reach across the state:

- 341 of all activities were delivered outside Southeast Queensland
- 54% of participants came from outside Southeast Queensland

- 1174 participants (46%) identified as male, reflecting balanced gender representation.
- A central aim of the Deadly Choices program is to increase the uptake of the 715 Annual Health Check, in partnership with local Aboriginal Community Controlled Health Services (ACCHSs).

Between 1 July 2024 and 30 June 2025:

- 2543 participants received a 715 Annual Health Check
- 884 (35%) occurred outside of Southeast Queensland.

These checks serve as a gateway for engaging participants in regular health monitoring and broader preventive care.

Deadly Choices continues to expand its influence through its high-profile Broncos, Cowboys, Titans and Dolphins (BCTD) NRL Partnership. This partnership promotes Deadly Choices messages through community events and incentivises health checks.

Key outcomes for 2024–2025 include:

- Social media reach of 3,273,364 from the media coverage of Broncos, Titans, Cowboys, Dolphins partnership activities on all social media platforms.

My health for life

My health for life (MH4L) (<https://myhealthforlife.com.au>) is a free, evidence-based lifestyle program supporting Queenslanders aged 18 and over to reduce their risk of chronic disease. Delivered by Diabetes Australia and the Healthier Queensland Alliance, MH4L tailors support for priority populations, including Aboriginal and Torres Strait Islander peoples and culturally and linguistically diverse communities.

Participants complete a digital health risk assessment, followed by tailored coaching sessions or group programs that focus on sustainable behaviour change, such as healthy eating, physical activity, and improved sleep.

Between 1 July 2024 and 30 June 2025:

- 16,520 health risk assessments completed
- 11,225 participants identified as high risk
- 2994 commenced the intensive program
- 1266 personalised health goals set
- 253 program referrals issued.

MH4L has engaged participants from all 16 Hospital and Health Services, with notable reach across rural and remote areas (11%), Aboriginal and Torres Strait Islander communities (4%), and low socio-economic areas (15%).

Key outcomes for program completers:

- 61.2% reduced waist circumference
- 47.3% met physical activity guidelines
- 13.5% achieved over 5% weight loss
- 98% satisfaction rating.

Equity remains central, with automatic eligibility now available to all Aboriginal and Torres Strait Islander peoples over 18. A First Nations Strategy is being implemented statewide, alongside a dedicated First Nations Engagement Toolkit and new culturally safe digital content.

MH4L continues to innovate, expanding Men's Shed partnerships, piloting postpartum support for women with gestational diabetes, and launching a refreshed brand and engagement strategy to strengthen reach and impact.

QCWA Country Kitchens

Country Kitchens (CK) (<https://qcwacountrykitchens.com.au>) is a statewide community program delivered by the Queensland Country Women's Association (QCWA), aiming to improve food and nutrition literacy across regional, rural and remote Queensland.

Using a strengths-based approach, CK trains QCWA volunteer members through a structured six-level PATHway, building their confidence and skills to deliver health promotion and nutrition education in their local communities.

Between 1 July 2024 and 30 June 2025:

- 32 volunteer facilitators progressed through Levels 4 and 5, enabling them to deliver practical workshops in schools and communities
- 1426 local activities were delivered, including cooking demos, recipe promotions and nutrition workshops
- 291 trained facilitators are embedded across 150 branches in 20 QCWA Divisions, with 68% of branches now having at least one trained facilitator.

CK continues to amplify its five key messages: Get more fruit and veg, Cook at home, Check your portions, Be aware of sugar in drinks, and Sit less, move more. To date, over 29,000 Queenslanders have engaged with the program.

Key achievements this year include:

- Launch of the 'Supermarket Superheroes' pilot, promoting healthy choices in local stores
- 'Hero the Veg' campaign, showcasing volunteer tips and recipes, reaching over 100,000 people and increasing social media followers by 132%
- Strengthened collaboration with Pick of the Crop, including a tailored school webinar and integration of CK workshops in 12 schools.

Participant satisfaction remains consistently high, with 100% of facilitators reporting positive community feedback.

10,000 Steps

10,000 Steps (<https://10000steps.org.au>), delivered by CQUniversity, is a digital behaviour change initiative that encourages Queenslanders to move more each day. Through step tracking, team challenges and personalised goal setting, the program supports individuals, workplaces and communities to overcome barriers to physical activity.

Between 1 July 2024 and 30 June 2025, more than 8083 Queenslanders actively participated, with 35% averaging at least 10,000 steps per day. The program continues to engage women (69% of users) and young adults aged 18–34 (35%), with 100% of active users setting a personal step goal.

Program satisfaction remains strong:

- 91% would recommend to others
- Over 90% reported a positive impact on physical and mental wellbeing.

Since July 2024, over 19,297 Queenslanders across 406 postcodes logged over 14 billion steps. Notably:

- 66% of new users were insufficiently active at registration
- 28% lived in rural or remote communities
- 4% identified as Aboriginal and/or Torres Strait Islander
- The mobile app was downloaded 44,440 times.

Workplaces remain a key driver of engagement:

- 106 new organisations registered
- 251 Tournaments and 1 Health Challenge were delivered
- 15,290 participants in 2354 teams logged over 4.7 billion steps.

To support long-term engagement, the platform introduced enhancements including automated welcome emails, tailored campaigns, and improved resources, ensuring participants feel supported, informed, and motivated to stay active.



Healthier Tuckshops program

Delivered by the Queensland Association of School Tuckshops (QAST) (<https://qast.org.au>), the **Healthier Tuckshops Program** supports tuckshop convenors, school staff and volunteers to provide healthier food and drink options aligned with Queensland's Smart Choices strategy.

The program offers practical tools, training, and peer support through a mix of online resources, network meetings and professional development opportunities.

Between 1 July 2024 and 30 June 2025, QAST engaged schools across Queensland through:

- 12 online network meetings with 117 participants from 94 schools, including 62 new schools
- 381 online video views and a face-to-face network meeting in Hervey Bay
- 2465 recipients of project e-newsletters (33% open rate, 15% click-through)
- 150 tuckshop suppliers engaged via newsletters (44% click-through).

QAST's online hub continued to grow, with:

- 20 new recipes added (total now over 340)
- Over 22,000 recipe downloads and 6660 resource downloads in 12 months
- Two new podcast episodes released.

The 2024 Recipe of the Year competition, supported by HWQld, drew 23 entries, with the winning school featured across national and state media reaching over 238,000 people. The featured recipe was viewed 8793 times, and the demo video had 7856 views.

Survey results (n=157) showed:

- 80% of schools improved their menus
- 75% improved knowledge and 70% reported increased confidence to offer healthy options.

QAST also launched a new self-paced Healthy Menu Planning course, with 61 registrations and 34 completions, supporting long-term tuckshop improvement.

Life Education

Health and Wellbeing Queensland partners with **Life Education Queensland** (Life Ed Qld) (<https://lifeeducationqld.org.au/>) to support the delivery of curriculum-aligned wellbeing education to primary school students across the state. Delivered on a fee-for-service basis, Life Ed Qld's programs include Talk About It and Healthy Harold modules, focusing on respectful relationships, identity, development and protective behaviours.

With an emphasis on early intervention, these modules are supported by educational tools and resources for parents, carers and teachers. Funded delivery prioritises access for children who may benefit most, including First Nations children, culturally and linguistically diverse communities, students from low socio-economic backgrounds, and schools outside major metropolitan centres.

Between 1 July 2024 and 30 June 2025, HWQld-funded sessions reached:

- 146,396 primary school students
- 7288 teachers across Queensland.

Program delivery focused on equitable access, with:

- 67% of sessions (4902) delivered outside Brisbane, Gold Coast and Sunshine Coast regions
- 15,371 students (14%) identifying as Aboriginal and/or Torres Strait Islander
- 36,179 students (25%) attending schools in educationally disadvantaged areas (ICSEA <950).

Educators continue to receive positive feedback for their ability to create inclusive, age-appropriate learning environments that support children's confidence and understanding of health and wellbeing.

Clinicians Hub

Clinicians Hub (<https://hw.qld.gov.au/hub/>) provides up-to-date information and resources to empower health professionals in delivering high-quality, evidence-based preventive care to Queenslanders. It supports clinicians to confidently engage in conversations about positive health behaviour change across the lifespan and at all levels of healthcare.

Health professionals play a vital role in prevention, including managing modifiable risk factors for chronic disease and supporting people living with overweight and obesity.

To assist health professionals, Clinicians Hub brings together trusted, evidence-based resources and advice for health professionals in one convenient location including:

- Guides for accurate measurements and assessments
- Tips for respectful and effective conversations
- Resources for patient education
- Referral pathways to prevention programs.

Motivate + Activate

Motivate + Activate is a pilot project delivered in partnership by Health and Wellbeing Queensland and Children's Health Queensland's School Based Youth Health Nurses Network.

Recognising the power of youth voice in shaping meaningful and relatable health messaging, the Motivate + Activate pilot was developed to give young people the opportunity to co-design messages that resonate with their peers.

Two interactive workshops were held in August 2024, with year 10 students from Kelvin Grove State College and Woodridge State High School. Students explored key motivators and barriers to physical activity among young people and reflected on their own experiences and those of their peers, unpacking the social and environmental factors that influence movement behaviours in their daily lives.

Preconception Health Promotion Trial (Putting Queensland Kids First)

The Preconception Health Promotion Trial (PHPT) is a multi-strategy public health campaign piloted in Mackay and West Moreton Hospital and Health Services as part of the Supporting Healthier Pregnancy Initiative under the Queensland Government Putting Queensland Kids First plan.

PHPT aims to increase awareness of modifiable health behaviours among prospective parents, improve access to supportive resources and pathways, and promote health and wellbeing prior to conception.

Guided by Queensland Health's Local Area Needs Assessments and pregnancy-related health service data, the trial focuses on targeted interventions within the two regions.

In 2024–2025, Health and Wellbeing Queensland (HWQld) delivered key activities to inform PHPT development and rollout:

- **Workforce Capability:** Engagement with community and primary care health professionals, including a workforce survey, identified gaps in preconception health knowledge and local referral pathways. Health professionals highlighted the need for concise, factual consumer resources to support preventive care discussions.
- **Consumer Campaign Co-design:** Four workshops with 30 consumers aged 18–45 in the target regions shaped campaign messaging and content. Early findings show a preference for authentic imagery and practical health behaviour advice that resonates with men and women planning pregnancy.

Gestational Diabetes Mellitus Project

The Healthy Horizons study, delivered in partnership with The University of Queensland's Health and Wellbeing Centre for Research Innovation and Diabetes Australia's My Health for Life (MH4L) program, co-designed a health behaviour program tailored for women post-gestational diabetes mellitus (GDM).

In 2024–2025, ethics approval was obtained and recruitment commenced in October 2024. Eligibility criteria included Queensland residence, prior GDM diagnosis, having a child aged two years or younger, and access to phone and computer.

Of 789 women who consented, 469 (60%) met eligibility requirements. Among eligible participants, 170 (36%) completed an initial health assessment and were randomly assigned to either a digital or telephone-based MH4L intervention.

Participant feedback was collected via surveys at mid-point and study completion. Of the 170 enrolled, 65 (38%) completed both surveys, with 19 (29%) contributing further through focus groups or one-on-one interviews to deepen insights on user experience.

Springfield Healthy Hearts Alliance

Springfield Healthy Hearts Alliance is designed to transform how cardiovascular disease (CVD) is prevented, managed and studied.

HWQld is part of the Alliance, led by Professor Lauren Ball from the Centre for Community Health and Wellbeing at The University of Queensland and that includes the public health sector (West Moreton Hospital and Health Service), private sector (Mater Misericordia), primary care (Darling Downs and West Moreton Primary Health Network), and not-for-profit (Heart Foundation), as well as the Springfield City Group.

Considered as a world-first, Springfield Healthy Hearts comprises two key components:

- **Demonstration of coordinated action in the Living Lab of Springfield.** Here, multiple overlapping city-wide initiatives will take place that target residual risk for CVD alongside a longitudinal observation of CVD risk factors and broader health outcomes.
- **A collaborative research platform that attracts global researchers, industry and policy leaders ready to utilise the Living Lab to advance their strategic priorities.** The project's vision is to position Queensland as the global research epicentre for CVD prevention – and equip Australia with a unique piece of Living Research Infrastructure on heart health.

Enablers

Health and Wellbeing Queensland's (HWQld) point of difference is established and embedded organisational enablers that provide the foundations to execute its strategic goals and deliver value for system change.

1. Health promotion communications

Health and Wellbeing Queensland (HWQld) delivers strategic, evidence-informed communications that empower Queenslanders to make healthier choices. Through integrated statewide campaigns, targeted behaviour change initiatives, community sponsorships and corporate partnerships, HWQld connects with diverse audiences to promote lasting improvements in health and wellbeing.

Campaign and partnership highlights

Fresh Veg, Deliciously Affordable

In early 2025, HWQld partnered with the Outdoor Media Association and AUSVEG to deliver the national *Fresh Veg, Deliciously Affordable* campaign. Aimed at debunking the myth that healthy food is costly, the campaign spotlighted the affordability and nutritional value of in-season vegetables.

- Generated over \$10.6 million in advertising value through pro bono outdoor media support across Australia.
- Delivered in-market from 25 January to 23 February 2025.
- Reached 730,000 social media impressions and over 55,400 website views.
- Post-campaign survey of 1204 respondents found:
 - 80% were encouraged to make healthier eating choices
 - 88% of parents were motivated to include vegetables in meals, lunchboxes, or snacks
 - 77% saw vegetables as a convenient way to support health.

ABS data shows over 93% of Australians do not meet daily vegetable intake guidelines. The campaign reframed vegetables as both affordable (average \$0.65 per serve) and achievable, supporting everyday healthy habits.

Queensland Prevention Symposium

The 2024 *Queensland Prevention Symposium* convened more than 640 delegates from across Australia and internationally. Co-hosted by HWQld and Queensland Health, the event highlighted multi-sector efforts to embed prevention across clinical and community settings.

- Featured global and local speakers including the International Network of Health Promotion Foundations (INHPF).
- Sessions addressed systems change, community-led action, and the integration of prevention into care.
- Delivered a platform for knowledge exchange across policymakers, practitioners, educators, and community leaders.

Sponsorships and community engagement

Health and Wellbeing Queensland (HWQld) actively sponsors and delivers events that build community connection, promote active lifestyles, and amplify prevention messages:

- **Murri Rugby League Carnival:** In partnership with the Department of Sport, Racing and Olympic and Paralympic Games, HWQld supported this smoke, alcohol, drug and sugar-free event, which draws over 50,000 attendees and champions school attendance and health for First Nations youth
- **Bridge to Brisbane Fun Run:** Engaged over 35,000 participants and promoted HWQld's Podsquad wellbeing app through eight-page Sunday Mail advertorials and fresh fruit giveaways
- **Governor's Community Walks:** In partnership with Her Excellency the Honourable Dr Jeannette Young AC PSM, monthly community wellbeing walks were hosted at Government House, later expanded to Townsville and Cairns to boost regional participation in physical activity
- **Key Conferences:** HWQld presented and exhibited at the 2025 Public Health Association of Australia Conference and Dietitians Australia Conference, sharing insights and progress on flagship prevention programs.

Digital engagement and reach

HWQld continues to grow its digital footprint through a targeted, insights-led strategy across social media, email, and web content.

- Achieved 13.8 million digital impressions, nearly doubling reach year-on-year
- Maintained a strong 3.4% engagement rate, outperforming industry benchmarks
- Delivered efficient campaign visibility with a \$4.02 CPM (cost per thousand impressions)
- Used expert-led content to promote nutritious eating, active living and mental wellbeing.

Through data-driven, high-reach initiatives and partnerships, HWQld continues to shift health behaviours and attitudes at scale, helping Queenslanders live healthier lives while reducing long-term system burden.

2. Strategic partnerships

In March 2025, HWQld established the temporary role of Director, Strategic Partnerships, for a six-month period. The function of the role is to strengthen engagement with external stakeholders across the corporate and philanthropic sectors. This includes:

- Establishing partnerships with corporate organisations to:
 - Generate new revenue streams
 - Leverage corporate channels to extend the reach of HWQld programs
- Securing support from philanthropic Trusts and Foundations aligned to HWQld's core priorities, including:
 - Public health initiatives
 - Food security
 - First Nations health
 - Children and young people.

Progress to date includes:

Corporate partnerships

- Development of a draft Stakeholder Engagement Plan to guide engagement with priority corporate entities.
- Ongoing engagement with a diverse range of corporates across key sectors.

Philanthropic trusts and foundations

- Development of a draft Stakeholder Engagement Plan targeting foundations with demonstrated interest in public health outcomes.
- Initial outreach conducted to several Queensland-based and national philanthropic organisations.

3. Impact and evaluation

Research underpins and informs all Health and Wellbeing Queensland (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

Strategy for evidence-informed prevention

In 2024–2025, Health and Wellbeing Queensland inaugurated the *Strategy for Evidence-Informed Prevention 2025–2027*, providing a clear framework to guide how research and evidence are applied to support activities to prevent illness, reduce the burden of chronic diseases, and promote the health and wellbeing of Queenslanders.

It sets out a plan for embedding robust, evidence-informed approaches across projects, programs, service and investment to ensure prevention efforts are targeted, effective and sustainable.

The Strategy identifies four strategic priorities for implementation:

- Evidence and knowledge translation: applying evidence to inform policy, programs and practice, and supporting continuous improvement.
- Build research capacity, capability and resources: growing internal capability to use evidence and strengthening governance frameworks.
- Create and foster partnerships: enabling cross-sector collaboration and leveraging co-investment to support prevention.
- Advance prevention through a learning health system approach: embedding continuous learning, community and stakeholder feedback loops, and innovation to strengthen prevention delivery and outcomes.

The Strategy defines HWQld's point of difference as an organisation that empowers and translates evidence into actions to ensure practical health improvements.

Research Advisory Committee

The HWQld Research Advisory Committee (RAC) provides independent, strategic advice to the HWQld Chief Executive Officer on research priorities, funding, partnerships and opportunities that support HWQld's mission and prevention agenda. The RAC guides HWQld's use of evidence, alignment with community need, and decisions on research investment to support impactful prevention.

Current members of the RAC include:

- Ms Helen Darch OAM (Chair)
- Laureate Professor Clare Collins AO
- Professor Sharon Goldfeld AM
- Mr Ray Kelly (appointed early 2025 as the First Nations RAC member)
- Distinguished Professor Anthony Okely
- Dr Robyn Littlewood (ex-Officio Member, HWQld)
- Dr Sandra Pavey (ex-Officio Member, HWQld).

In 2024, HWQld completed the first two-year evaluation of the RAC. The evaluation confirmed the RAC's role as a high-impact advisory body, with key strengths in delivering independent advice, structured decision-making, and oversight of HWQld's research funding, partnerships and strategy. The RAC's contributions have positively shaped HWQld's research direction, strengthened governance of grant programs, and supported the alignment of research investment with HWQld's strategic objectives.

Health and Wellbeing Centre for Research Innovation

HWQld partnered with The University of Queensland (UQ) in December 2021 to establish the *Health and Wellbeing Centre for Research Innovation* (HWCRI), an innovative research centre designed to advance prevention and health promotion in Queensland. The HWCRI is jointly funded by HWQld and UQ, with a combined investment of \$2.95 million.

HWCRI provides targeted, high-impact research to inform HWQld's programs and activities. Its work helps ensure prevention initiatives are guided by robust evidence to reduce health inequities and improve health and wellbeing outcomes.

HWCRI has secured over \$7 million (2021–2025) in external funding to advance prevention research, with an additional >\$600,000 in research contracts and consultancy projects. HWCRI supports 60 research students and has delivered more than 212 research publications and 65 active research projects, targeting critical areas such as physical activity, nutrition, health behaviours, and chronic disease prevention across diverse populations.

The Centre has also fostered stronger collaboration across government, academia, healthcare and community sectors, while providing real-world training opportunities for students and early career researchers to build capacity in the prevention workforce.

GenQ Health and Wellbeing Grants Program

GenQ Health and Wellbeing Community Grants

Health and Wellbeing Queensland (HWQld) GenQ Community Grants support locally driven initiatives targeting improved nutrition, physical activity, sleep, wellbeing, and health equity, with emphasis on infants, children, and young people. In 2023, 25 grants were awarded to empower communities to address specific local needs and contribute to healthier futures across Queensland and HWQld has continued to support these through-out 2024–2025.

The funded projects reflected the diversity of Queensland's communities and prevention priorities. Initiatives included programs promoting physical activity and social connection for young people with disability, community gardens and cooking classes enhancing healthy eating and food security, sleep education for parents, culturally tailored wellbeing initiatives for First Nations communities, and school-based projects fostering children's health and inclusion through outdoor play and learning environments.

HWQld amplified the reach and impact of these projects through targeted communications and media campaigns, raising awareness of local prevention efforts and celebrating community leadership in health promotion. In 2025, recipients who successfully completed their community grant projects from the 2023 round became eligible to apply for the GenQ Accelerator Grants, to provide competitive funding to support the expansion and/or scaling.

GenQ Health and Wellbeing Impact Grants

HWQld also launched the GenQ Health and Wellbeing Impact Grants in 2023, investing in high-impact research to generate evidence that informs and improves prevention strategies statewide. The following two projects continued and research commenced in June 2024, focusing on priority populations and advancing health equity.

Queensland Family Cohort – capturing the data on GenQ “The health and wellbeing of Queensland families”

This research project addresses critical gaps in early life data for Queensland children, particularly during the first 2000 days when no comprehensive health records exist unless a child accesses emergency or hospital services. The *Queensland Family Cohort* (QFC / Indigenous-QFC) collects valuable longitudinal data not typically found in medical records, including information on nutrition, sleep, stress, anxiety, depression, pollution exposure, and social networks.

Assessing and supporting First Nations students' wellbeing in Queensland High Schools

This research project focuses on implementing *What Matters to Youth* (WM2Y) into Queensland high schools to support the wellbeing of First Nations adolescents. First Nations young people in Queensland experience disproportionately high levels of disadvantage compared to their non-Indigenous peers, and existing biomedical wellbeing measures do not capture First Nations holistic understandings of wellbeing. WM2Y provides a culturally relevant tool to assess wellbeing over time, enabling schools to better understand, support and respond to the needs of their First Nations students.

Research partnerships

In 2024–2025, HWQld continued to foster research collaborations that advance knowledge and generate evidence to inform effective prevention and improve health outcomes for Queenslanders. During the year, we partnered with researchers to support competitive grant applications and secure funding for projects aligned with our prevention priorities.

Throughout the year, three successful grant applications below were awarded funding totalling \$10.4 million. HWQld contributed \$78,407 in in-kind support and \$10,000 in cash contributions to these successful applications. These projects reflect HWQld's collaborative approach to partnering with universities and research organisations to generate new knowledge and insights that can inform prevention policy, programs and practice.

Active Choices for Springfield: A veteran-led digital program to support physically active and connected lifestyles in a priority regional Australian community, led by Associate Professor Nicholas Gilson from The University of Queensland.

Transformative synergies: Using Learning Health Systems for Chronic Disease Prevention, led by Professor Luke Wolfenden from the University of Newcastle.

Untapping the potential of sleep health to improve prevention and management of mental health problems in First Nations Children, led by Professor Fatima Yaqoot from the University of the Sunshine Coast.

Data management and evaluation

Significant progress has been made to enhance how data and evidence inform strategic decisions, investment, and program delivery. Internal systems for data management, governance, and evaluation have been strengthened, ensuring activities are underpinned by consistent, reliable insights across programs and portfolios.

The Measuring Change Framework has been operationalised, to guide more consistent, systems-aware evaluation practices. This is already guiding evaluations and improving the ability to measure and demonstrate impact across initiatives.

The data management and evaluation function also contributes to the coordination and use of evidence generated through individual initiatives, supporting greater visibility of progress and shared learning across the prevention system.

Education and training

HWQld's Education and Training Program aims to build capability and capacity across both the emerging (university-based student training), and existing preventive health workforce in Queensland. It encompasses a statewide university student placement program, training and development for HWQld staff, and a wide range of engagement opportunities across six university partners, including student placements, teaching contributions and adjunct appointments.

HWQld provides distinctive workplace-based learning opportunities, enabling students to apply their knowledge and develop skills in real-world settings. In turn, HWQld staff contribute to university teaching, strengthening the bridge between academic learning and practical application. Work continues on expanding partnerships with additional Queensland-based universities in the future.

Between 1 July 2024 and 30 June 2025, HWQld engaged with 49 students through placements and project supervision from Bond University, Griffith University, James Cook University, The University of Queensland, Queensland University of Technology, and University of the Sunshine Coast. By the end of 2025, HWQld will have supported more than 100 students across six disciplines including nutrition and dietetics, public health, health science, psychology, business (economics and digital health) pharmacy and medicine.

HWQld staff also play a pivotal role in bridging the gap between academic learning and practical application, delivering 10 lectures across four universities and contributing to teaching programs. These efforts strengthen partnerships with universities and ensure that Queensland's future health workforce is equipped to address the state's most pressing health challenges.

Strategic advocacy

Through its strategic advocacy at the state and national level, HWQld articulates the case for preventive health approaches to improve the health of all Queenslanders now and into the future. Throughout 2024–2025, HWQld welcomed the opportunity to provide written submissions to several Australian and Queensland government inquiries and reviews on a range of important public health matters.

Inquiry into the health impacts of alcohol and other drugs in Australia

In December 2024, HWQld provided input to the Queensland Mental Health Commission's submission to the Standing Committee on Health, Aged Care and Sport's *Inquiry into the health impacts of alcohol and other drugs in Australia*. HWQld's input focused on the public health impact of alcohol consumption. HWQld provided information on the high energy content in alcohol and its contribution to overweight and obesity, as well as its links to poor nutrition and detriment to overall health. The submission recognised the importance of warning labels, particularly in reducing levels of Fetal Alcohol Spectrum Disorder. HWQld further highlighted the public health need for a coordinated and strengthened regulatory approach to the marketing and advertising of alcohol.

Inquiry into Energy, Food and Water Security in Northern Australia

HWQld provided a submission to the Joint Select Committee on Northern Australia's Inquiry into Energy, Food and Water Security in December 2024. The submission emphasised the need to enhance food security and focus on health outcomes. HWQld noted the significant drivers of food insecurity in Far North Queensland remote communities and the impact this has on health equity. To improve outcomes, HWQld provided several recommendations including empowering local communities, enhancing policy coherence, improving food affordability and enhancing data collection.

National Strategy for Food Security in Remote First Nations Communities

HWQld worked with the National Indigenous Australians Agency on the draft National Strategy for Food Security in Remote First Nations Communities. This included a significant submission made in September 2024 which focused on potential areas to strengthen the national response, including insights from *Gather + Grow 2023–2032: Queensland's Remote Food Security Strategy* to improve strategic outcomes.

Draft Clinical Guidelines for the Management of Overweight and Obesity in Adults

As an action under *Making Healthy Happen 2032: A strategy for preventing obesity in Queensland*, HWQld provided a submission on the draft Clinical Guidelines for the Management of Overweight and Obesity in Adults, Adolescents, and Children in Australia, developed by Deakin University. The submission focused on improvements to the clinical guidelines through reframing the approach to management of overweight and obesity and addressing weight stigma; improving consistency of recommendations for intervention and weight management; and practical translation to clinical practice.

Inquiry into delivering quality care more efficiently

In June 2025, HWQld made a submission to the Australian Productivity Commission in relation to its Inquiry into Delivering quality care more efficiently.

Health Star Rating and reviewing the Nutrition Information Panel

In December 2024, HWQld provided input into the Queensland Health-led Queensland Government response to a Food Standards Australia New Zealand call for information on preparatory work to mandate the Health Star Rating and review the Nutrition Information Panel on food labels. The submission advocated for expediting the introduction of a mandatory Health Star Rating, given it has been 14 years since a front-of-pack label of this type was originally recommended by food ministers, and uptake by industry has not been adequate.

Packaged foods for infants and young children

In August 2024, HWQld contributed to the Queensland Health-led Queensland Government response to the Food Regulation Standing Committee Consultation Regulation Impact Statement: *Improving commercial foods for infants and young children*. This submission highlighted the poor nutritional quality of many commercial foods currently available for infants and young children. It supported a regulatory framework which addresses issues such as the predominance of foods that are sweet/high in sugar; have low nutrient content (such as iron and zinc); are an inappropriate texture for development; and which have misleading labelling.

Marketing in Australia of Infant Formulas: Manufacturers and Importers Agreement (MAIF Agreement) Review

In July 2024 and October 2024, HWQld provided submissions to the Australian Competition and Consumer Commission supporting the need to replace the industry-led voluntary MAIF Agreement with a legislative framework for infant formula marketing that implements the World Health Organization 1981 International Code of Marketing of Breastmilk Substitutes and subsequent World Health Assembly resolutions. This submission recognised the importance of protecting and promoting breastfeeding

by creating supportive environments that consider the commercial influences that can impact breastfeeding decisions.

100-day Review into Brisbane 2032 Infrastructure

As part of its work to harness the opportunity of the Brisbane 2032 Olympic and Paralympic Games to drive improved health and wellbeing outcomes for all Queenslanders, HWQld made a submission to the *100-day Review into Brisbane 2032 Infrastructure*. The submission highlighted the importance of planning and designing infrastructure that supports health outcomes. The submission also recommended providing healthier food and drink options in Games venues.

What does 2032 mean for you?

In June 2025, HWQld provided input to the Department of Sport, Racing and Olympic and Paralympic Games in response to the *What does 2032 mean for you?* discussion paper. HWQld noted the potential benefits of promoting movement that can be easily integrated into peoples' everyday lives and supporting physical literacy to help get children get involved in sport.

Conference presentations

HWQld staff have contributed to 15 conference presentations (11 as speakers, four as co-authors) for nine conferences, all held in Australia except for one in New Zealand, in the field of health services, preventive health, obesity, nutrition, physical activity, and social marketing.

List of conferences:

- Dietitians Australia Conference, 18–20 August 2024, Brisbane QLD
- Australasian Diabetes Congress, 20–22 August 2024, Gold Coast QLD
- Australian & New Zealand Obesity Society, 16–18 October 2024, Sydney NSW
- 13th Health Services Research Conference, 4–6 December 2024, Brisbane QLD
- Public Health Association Australia Screening Conference 2025, 4–5 March 2025, Sydney NSW
- Preventive Health Conference 2025, 28–30 April 2025, Canberra ACT
- The Royal Australian & New Zealand College of Psychiatrists (RANZCP) 2025 Congress, 4–8 May 2025, Gold Coast QLD
- International Social Marketing Conference, 14–15 May 2025, Canberra ACT
- International Society of Behavioural Nutrition and Physical Activity, 11–14 June 2025, Auckland, New Zealand. Two presentations were delivered by research partners from HWCRI.

List of presentations:

- *Partnering for Purpose: Advancing Public Health Through Government, Industry, and Research Collaboration*
- *Logan Healthy Living: A Case Study of the development of a Multi-Sector partnership to deliver a Community Allied Health Service for people living with Type 2 Diabetes*
- *Wellness my Way: A health promotion campaign with community at the centre*
- *Physical activity (PA) interventions within mental health alcohol and other drugs (MHAOD) services: a guide to their use and improvement implementation strategies for services*
- *Strengthening Prevention in Queensland: End-user perspectives on a draft framework*
- *Wellness my Way: A digitally-enhanced, consumer-led chronic disease prevention model of care*
- *Digital preventive health interventions for obesity and chronic disease prevention*
- *Pick me for kids: children's perspectives on healthy food and drink marketing in sport and recreation facilities.*
- *Making Healthy Happen – a whole-of-government commitment to a healthier Queensland*
- *The development, delivery and evaluation of a health promotion campaign to drive healthy habits in families*
- *Developing a framework to enable clinical health promotion across the healthcare system in Queensland, Australia*
- *An evaluation of a school nutrition program to improve accessibility to and consumption of vegetables and fruit among primary school students in Queensland, Australia: From 'What's this?' to 'I grew it!'*
- *Evaluating the impact of a community delivered lifestyle management program for people living with or at risk of type 2 diabetes*
- *Clinician's Guide to Healthy Kids Podcast Series; building prevention capability in healthcare.*
- *The development of a statewide framework to provide direction for improving service level prevention, intervention, and management of chronic diseases.*

Publications

Health and Wellbeing Queensland (HWQld) is committed to supporting and enabling the use of robust evidence to drive prevention efforts across Queensland. As part of this commitment, HWQld staff actively contribute to the evidence base through high-quality research that informs policy, programs and practice. These contributions reflect HWQld's role in applying and translating evidence to improve health outcomes and reduce inequities.

In 2024–2025, HWQld's research outputs achieved a strong reach and influence, with HWQld publications cited in more than 115 journal papers internationally. Over the last 12 months, HWQld staff contributed to five scientific journal publications across obesity, nutrition, public health, and health equity:

- *Raising the Topic: Clinical Needs Assessment and Co-Design of Targeted Clinical Resources for Primary Healthcare Practitioners to Prevent and Manage Childhood Obesity.*
<https://doi.org/10.1002/hpja.70033>
- *Development and Impact of a Community-Delivered, Multisectoral Lifestyle Management Service for People Living With Type 2 Diabetes (Logan Healthy Living): Protocol for a Pragmatic, Single-Arm Intervention Study.*
<https://doi.org/10.2196/69477>
- *What is the Role of Primary Prevention of Obesity in an Age of Effective Pharmaceuticals?*
<https://doi.org/10.1007/s13679-025-00632-0>
- *What have equity and human rights got to do with dietetics?*
<https://doi.org/10.1111/1747-0080.12904>
- *Benchmarking for healthy food stores: protocol for a randomised controlled trial with remote Aboriginal and Torres Strait Islander communities in Australia to enhance adoption of health-enabling store policy and practice.*
<https://doi.org/10.1186/s12889-024-19277-0>

These publications demonstrate HWQld's commitment to contributing to prevention and ensuring that research insights are translated into meaningful health outcomes for Queenslanders.

Our objectives and measures

Health and Wellbeing Queensland (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*:

- **Make a healthier Queensland:** Implement innovative solutions to improve all Queenslanders' health and 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:

Strategic objective: Make a healthier Queensland	
Performance measure	Strategies
Initiatives are evidence informed, demonstrated through: <ul style="list-style-type: none">• Use of data to prioritise efforts.	<ul style="list-style-type: none">• Work with partners to implement comprehensive, data-informed actions to improve population health and wellbeing.• Collaborate to advance health equity for Aboriginal and Torres Strait Islander peoples.• Focus the delivery of equity-informed actions to respond to population groups with the greatest capacity to benefit.• Use data and research to help target preventive health activities to reduce pressure on the health system.

<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"> • Promotion and coordination of prevention initiatives, programs and services. • Advocacy that drives policy change and collaboration to support health and wellbeing. • Investment in prevention initiatives, learning and development. 	<ul style="list-style-type: none"> • Drive a policy agenda to create healthier environments where Queenslanders live, learn, work, and play. • Partner with the health system to embed prevention using innovative service delivery strategies. • Empower, inspire and engage people and communities to access evidence-based programs, resources, campaigns and initiatives. • Build prevention capability across health and other sectors through education, training and resources. • Strengthen the network of prevention stakeholders to integrate efforts and share learnings across communities and sectors. • Proactively advocate and contribute to the national prevention agenda. • Explore innovative funding models which support and incentivise prevention.

<i>Strategic objective: Drive systems change</i>	
Performance measure	Strategies
<p>The value and contribution of preventive health is communicated and understood. We have strong partnerships which deliver improved health and wellbeing outcomes, demonstrated through:</p> <ul style="list-style-type: none"> • Purposeful engagement with leaders, influences and partners. • Connections made across sectors support collaboration, including sharing of resources, skills and data. • Robust engagement and strong partnerships with communities to shape and support action. 	<ul style="list-style-type: none"> • Strengthen cross-sector governance and partnerships to facilitate shared action and investment in prevention. • Understand and invest in stakeholder relationships across sectors, industry and community as a vehicle for systems change and concrete action to promote the health and wellbeing of Queenslanders. • Mobilise and empower the Queensland community to build capacity and connection to drive improved health and wellbeing outcomes.

<i>Strategic objective: Commit to impact</i>	
Performance measure	Strategies
<p>There are appropriate approaches to monitoring, evaluation, learning and reporting across programs to support evidence-based decision making and action, demonstrated through:</p> <ul style="list-style-type: none"> • Developing and implementing a shared and coordinated research and evaluation agenda. • Broad sharing of qualitative data, quantitative data, evaluation findings and promising practice. • Increased engagement with communities and consumers to develop, deliver and evaluate initiative. 	<ul style="list-style-type: none"> • Identify and share evidence to inform the delivery of impactful solutions to boost health and wellbeing. • Listen to the Queensland community, including the experience and aspirations of Aboriginal and Torres Strait Islander peoples. • Work with communities and priority population groups to co-design and evaluate local solutions that promote health and wellbeing. • Leverage the expertise of the research community to translate evidence into policy and practice. • Invest in partnerships to generate and lead evidence-based and innovative initiatives that emphasis prevention • Deliver robust and comprehensive evaluations to measure the impact of our work.
<i>Strategic objective: Thrive together</i>	
Performance measure	Strategies
<p>We have the right organisational enablers to work on highly complex issues, demonstrated through:</p> <ul style="list-style-type: none"> • A culture of continuous improvement. • Staff who are engaged, empowered and are supported to prioritise wellbeing. • A workforce that is skilled and accountable for delivery of our functions. 	<ul style="list-style-type: none"> • Ensure efficient investment of time, expertise and resources to maximise impact for Queenslanders. • Build an inclusive workplace culture that celebrates the diversity of workforce experience, skills and perspectives that reflects the Queensland communities we serve. • Strengthen the cultural capability of our organisation and partners. • Foster a thriving workplace environment by supporting and investing in the wellbeing, capability and development of our staff.

Statement of the government's broad objectives for the community

The Queensland Government's Objectives for the Community reflect the government's vision for Queensland. The objectives are:

- Safety where you live
- Health services when you need them
- A better lifestyle through a stronger economy
- A plan for Queensland's future.

Health and Wellbeing Queensland's (HWQld) *Strategic Plan 2023–2027* (<https://hw.qld.gov.au/about-us/performance/strategic-plan/>) supports the government's objectives of 'Health services where you need them' and 'A plan for Queensland's future'.

HWQld contributes to the Government's objectives for the community by working to provide health services when you need them. HWQld does this by working to strengthen and upskill Queensland's health workforce in preventive health, and by providing evidence-based, high quality preventive health services that help to reduce hospital demand.

The agency's work contributes to the Government's objective of planning for Queensland's future by maintaining a focus on the long-term need for chronic disease prevention, delivering preventive health policy and initiatives to reduce chronic disease in the long term, keeping Queenslanders healthy. HWQld does this by working across government, communities, and other sectors outside of Government to create sustainable long-term health improvements that support Queensland's future. This 'dual approach' will help ensure a world-class, sustainable health system for all Queenslanders.

Service areas and service standards

Service area objective

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

Health and Wellbeing Queensland (HWQld) works in partnership with communities, public and private sector and government agencies to drive population change that will prevent chronic disease.

Service standards	2024–2025 Target/Est.	2024–2025 Est. Actual
Effectiveness measures		
Percentage of the Queensland population who consume recommended amounts of ^{1,2}		
• fruits	47.6%	45.7%
• vegetables	6.4%	5.8%
Percentage of the Queensland population who engaged in levels of physical activity for health benefit ^{1,2}		
• Persons	58.4%	55.5%
• Male	61.0%	59.0%
• Female	55.9%	52.1%
Percentage of adults and children with a body mass index (BMI) in the normal weight category ³		
• Adults	30.1%	29.2%
• Children	67.5%	58.3%
Efficiency measure		
Not identified		

Notes:

1. These survey standards 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+ years) based on age-standardised measured BMI is from the Australian Bureau of Statistics (ABS) 2022 National Health Survey.
3. The most recent available data for children (5–17 years) based on measured BMI is from the ABS 2022 National Health Survey.

Finance, risk management and accountability

Financial performance

The operating result for Health and Wellbeing Queensland (HWQld) for the 2024–2025 financial year was \$7.991 million.

Strategic workforce planning, performance and separation

HWQld continues to evolve our workforce planning to stay ahead of changing priorities. By focusing on flexibility and forward-thinking strategies, we ensure our people, organisational structure, and capabilities are well positioned to meet both current objectives and emerging government directions.

This approach is reflected in HWQld's current review of internal functions and structure, designed to ensure continued alignment with our strategic direction and priorities. Building on the organisational restructure implemented in July 2023, this current review reinforces commitment to agility, innovation, and flexible service delivery, positioning us to respond effectively to emerging needs and opportunities.

A high-performing, motivated workforce sits at the heart of HWQld's success. HWQld is proud to foster a culture of continuous improvement, accountability, and pride in the work. Results from the most recent culture survey highlight this commitment, with 79% of staff reporting strong engagement in their roles and 80% expressing motivation to help the organisation achieve its goals. These outcomes reflect a workforce that is not only passionate about the agency's mission but energised by the positive impact made in the community.

To ensure HWQld remains adaptable in a dynamic environment, it also supplements the core workforce with contingent workers, including short-term agency contractors. These individuals help meet immediate staffing needs, bring in hard to source specialist expertise, and contribute to the delivery of critical projects. This flexible staffing model supports the agency to remain responsive and maintain momentum across key areas of work. HWQld further optimises workforce effectiveness by engaging Research Fellows, as well as PhD, undergraduate, and postgraduate students across a range of disciplines.

Attracting and retaining the right people is critical to HWQld's continued success. Recruitment practices prioritise both capability and cultural alignment, ensuring each appointment contributes meaningfully to the organisation's goals and values. A considered and strategic approach is taken toward hiring, focused on building teams that are skilled, purpose driven, and collaborative.

HWQld's investment in people extends beyond recruitment. In 2024–2025, a focus on team development was expanded through the delivery of the Hermann Brain Dominance Instrument (HBDI) program. This initiative provided staff with valuable insights into their cognitive preferences and supported stronger, more empathetic and effective working relationships across teams through Whole Brain Thinking workshops.

Flexibility continues to be a cornerstone of our employee experience. As at 30 June 2025, all staff had accessed some form of flexible work arrangement, such as hybrid working arrangements, with 24% of the workforce working part-time. This approach supports wellbeing, encourages work-life balance, and enhances productivity at all levels of the organisation.

Early retirement, redundancy and retrenchment

Early retirement schemes may be offered in limited circumstances and where approved by authorising bodies. HWQld must first consider government policy on organisational restructure and ensure any proposed scheme is aimed at rationalising or reorganising the agency's operations, in full compliance with relevant requirements.

In line with government policy and our commitment to employment security, all reasonable efforts are made to retain staff. HWQld must comply with the directive on supporting employees affected by workplace change, with redundancy and retrenchment only considered in exceptional circumstances and after all reasonable redeployment options have been exhausted.

No redundancy, early retirement, retrenchment packages were paid during the period.

Workforce profile data

As at the fortnight ending 30 June 2025, the total FTE for HWQld, including both full-time and part-time employees and measured on a full-time equivalent basis in accordance with the Minimum Obligatory Human Resource Information (MOHRI) data, is 67.55.

HWQld maintains a core-funded and ongoing establishment of 69 FTE positions.

HWQld's workforce comprises a broad mix of roles that support strategic policy, program design, research, engagement, and operational delivery. The largest proportion of the workforce is made up of Administration Officers, representing 54.3% of the total FTE. Health Practitioners account for 29.3%, contributing key specialist skills and clinical insights. Senior Officers and Senior Executives represent 10.4% and 4.4%, respectively, providing organisational leadership and strategic direction. Nursing Practitioners, while a small segment at 0.9%, play an important role in supporting key health initiatives.

HWQld maintains a predominantly permanent workforce, ensuring continuity of expertise and delivery.

As of 30 June 2025, the agency had a permanent-to-temporary ratio of approximately 7.2 to 1, reflecting the organisation's stability and long-term workforce planning.

HWQld's workforce is strongly represented by women, who make up 87.7% of total staff. As of 30 June 2025, the agency had a female-to-male ratio of 7.1 to 1. This reflects broader sector trends and demonstrates HWQld's inclusive employment practices.

HWQld remains committed to cultivating a diverse, inclusive, and culturally safe workplace. The agency supports diversity across gender, age, cultural background, and continues to align its practices with whole of government public sector inclusion targets. Key focus areas include increasing Aboriginal and Torres Strait Islander participation, fostering LGBTIQ+ inclusion, and improving access and support for employees with disability.

Diversity training, flexible work options, and culturally responsive recruitment practices are embedded across the employee lifecycle.

Target group data¹

Gender	Number (headcount)	Percentage of total workforce (calculated on headcount)
Woman	65	87.7%
Man	9	12.2%
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 – speak a language at home other than English including Aboriginal and Torres Strait Islander/Australian South Sea Islander languages	<5	

Women in leadership roles ²	Number (headcount)	Percentage of total Leadership Cohort (calculated on headcount)
Senior Officers (Classified, s122 and s155 equivalent combined)	6	60%
Senior Executive Service, High-level senior executives and Chief Executives (Classified, s122 and s155 combined)	<5	

Notes:

1. To ensure privacy, in tables where there are fewer than 5 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

HWQId’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. HWQId 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 2023* 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, HWQId is required to comply with the *Public Sector Ethics Act 1994*, which sets the standards for ethical behaviour and conduct in the Queensland Public Sector. The *Code of Conduct for the Queensland Public Service*, developed under this Act, promotes the highest standards of integrity, accountability, and ethical decision making. All HWQId board members, subcommittee members, and employees are expected to uphold the Code. These same standards also apply to anyone performing work for or on behalf of HWQId including volunteers, students, contractors, consultants, and anyone employed in any other capacity.

All HWQId employees complete mandatory Code of Conduct training on an annual basis.

Human rights

As a public entity, HWQId is bound by the *Human Rights Act 2019* and is committed to ensuring that it considers human rights when making decisions and taking actions in all aspects of its work.

Fundamental to the work of HWQId, is supporting Queenslanders to have fair and equitable access to services and programs to help them to live a healthier life, playing an important role in promoting and protecting human rights.

Over the past 12-months, HWQId has undertaken activities, including tailored human rights training, to support staff in considering human rights in their work, and to continue build a culture of human rights within the agency. HWQId is committed to building inclusive cultures in the Queensland public sector that respects and promotes human rights, diversity and equality. HWQId received no human rights complaints during 2024–2025.

Internal audit function and external scrutiny

HWQId’s internal audit function is provided by the Queensland Government Corporate Administration Agency. The internal audit function assisted HWQId in reviewing internal controls and processes by providing an independent review and audit opinion.

Reviews undertaken in 2024–2025 included Budget Planning, and Records Management. Outcomes of these reviews both celebrated existing robust processes, and highlighted process improvements and better administrative practices. HWQId has not been the subject of external scrutiny, independent review, or evaluation this reporting period.

Appendix A

HWQld Board, FARM and key management profiles

Board members

Chairperson and member:	Mr Stephen Ryan
Appointed:	1 July 2019
Current term:	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 was also a board member of the Queensland Government Residential Tenancies Authority Queensland between 2016–2025 and its chairperson from 2022–2025. 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.

Deputy Chairperson and Director-General member: Director-General, Department of Sport, Racing and Olympic and Paralympic Games (ex-officio)	
Appointed:	1 July 2021
Current term:	1 July 2023 to 30 June 2026
Current office holder:	Mr Andrew Hopper

As Director-General, Department of Sport, Racing and Olympic and Paralympic Games since September 2022, Mr Hopper is leading the Government's objectives to drive grassroots sports participation across the State; strengthening the integrity, viability, while maintaining high animal welfare standards in the racing industry; and ensure every part of Queensland benefits from the 2032 Olympic and Paralympic Game. 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 in the public and private sector. He is recognised for his leadership skills, strategic thinking, commercial acumen and communication skills.

Director-General member: Director-General, Department of Women, Aboriginal and Torres Strait Islander Partnerships and Multiculturalism (ex-officio)	
Appointed:	1 July 2019
Current term:	1 July 2023 to 30 June 2026
Current office holder:	Ms Natalie Wilde

Ms Wilde is a distinguished leader with a career spanning over 23 years in the Queensland Public sector. Her extensive experience includes developing and implementing policy reforms, particularly in areas related to economic and regional development, local government, infrastructure, property, and land use planning. After completing a Bachelor of Public Health from the Queensland University of Technology, she gained a Master in Business Administration from the University of Queensland; has undertaken the Company Directors Course through the Australian Institute of Company Directors, and been the recipient of the Premier's Award for Excellence in Public Service Delivery on two occasions. Ms Wilde commenced as the Director-General, Department of Women, Aboriginal and Torres Strait Islander Partnerships and Multiculturalism on 22 April 2025.

Director-General member: Director-General, Queensland Health (ex-officio)	
Appointed:	1 July 2019
Current term:	1 July 2024 to 30 June 2028
Current office holder:	Dr David Rosengren

Dr Rosengren commenced as Director-General, Queensland Health on 1 November 2024. He is a Senior Staff Specialist in Emergency Medicine with more than 20 years' clinical and leadership experience in both public and private hospital sectors. While continuing to work as a clinician, he has also undertaken executive roles where he has overseen the delivery and performance of acute public hospital services at a large scale. This includes as Chief Operating Officer for Queensland Health, Executive Director of Royal Brisbane and Women's Hospital and as Chief Operating Officer for Metro North Hospital and Health Service. He has also been Acting Executive Director of Organisational Development at Gold Coast Hospital and Health Service. Dr Rosengren has held several representative roles with the Australasian College for Emergency Medicine and oversaw the Metropolitan Emergency Department Access Initiative project in 2012. He was the Chair of the Queensland Clinical Senate between 2012 and 2019.

Member:	Emeritus Professor Ian Lowe AO
Appointed:	1 April 2020
Current term:	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 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.

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

Dr Spierings is a proud Gaangulu man and is the Director of the Knowledge and Research Centre for the IUIH Network in South East Queensland, Australia's first Aboriginal community controlled research centre. Here he leads a network-wide program of research, monitoring, and evaluation in partnership with key stakeholders across South East Queensland. Dr Spierings is also an experienced company director with two other current appointments: he serves as Chair of Country to Coast Queensland, responsible for ensuring primary healthcare access for 900,000 people across Central Qld, Wide Bay and the Sunshine Coast; he is also a Board member of Australia's largest hospital service, Metro North Hospital and Health service, which has an annual budget of \$4.2 billion, employs over 25,000 staff and services approximately 1 million people. He has previously worked across a variety of sectors including Academia, Foreign Policy, Construction and Security. Dr Spierings holds a Bachelor of Arts (Hons) and Doctor of Philosophy (PhD) from the University of Queensland, and is a Graduate of the Australian Institute of Company Directors.

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

Mrs Taylor-Johnson is a proud Kamilaroi woman and 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 previously held 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. Throughout her career Mrs Taylor-Johnson held leadership roles and chair positions, which provided the opportunity to build on the further establishment of the Murri Independent Community School in Brisbane, Queensland Trachoma and Eye Health and the Queensland Police Service Aboriginal and Torres Strait Islander Recruitment Strategy. Mrs Taylor-Johnson is a current board director for Health Workforce Queensland and undertakes consulting and project work in the health sector.

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

Ms Voloschenko is a health professional with more than 40 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 training for workforce, both nationally and at a state level. Through her involvement and participation in many health-related organisations and committees she continues to advocate for health equity and inclusion for all. For many years, Ms Voloschenko has championed disease prevention and early detection by improving health literacy in many communities and healthcare organisations. As a result of her efforts, Ms Voloschenko was awarded an Outstanding Individual Achiever Award by Multicultural Queensland in 2019.

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

Ms Williams is an experienced Board Chair and Director with a strong commitment to improving health equity and outcomes for rural, remote and First Nations communities. Based in Barcaldine, Jane brings lived experience and a deep understanding of the unique challenges and opportunities facing Queenslanders outside metropolitan areas. With a background in nursing and qualifications in management and community engagement, Jane holds leadership roles across the health, water and not-for-profit sectors. She currently serves as Chair of the Central West Hospital and Health Service, and is a director on the boards of SunWater, The Royal Flying Doctor Service (Queensland Section) and Checkup Australia. She brings strong governance, community insight, and a focus on practical, equitable health solutions.

Former board members

Director-General member: Director-General, Queensland Health (ex-officio)	
Former office holder:	Mr Michael Walsh

Mr Walsh was the Director-General, Queensland Health, until 31 October 2024.

Director-General member: Acting Director-General, Department of Women, Aboriginal and Torres Strait Islander Partnerships and Multiculturalism (ex-officio)	
Former office holder:	Ms Kathy Parton

Ms Parton was the Acting Director-General, Department of Women, Aboriginal and Torres Strait Islander Partnerships and Multiculturalism until 21 April 2025.

Director-General member: Director-General, Department of Treaty, Aboriginal and Torres Strait Islander Partnerships, Communities and the Arts (ex-officio)	
Former office holder:	Ms Clare O'Connor

Ms O'Connor was the Director-General, Department of Treaty, Aboriginal and Torres Strait Islander Partnerships, Communities and the Arts until 31 October 2024.

FARM members

Independent External Chairperson: Mr Christopher (Chris) Johnson	
Appointed:	Appointed: 2 July 2020
Current term:	1 July 2023 to 30 June 2026

Mr Johnson possesses over 30 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.

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

Mr Ryan is a HWQld board member. Refer to [page 42](#) for biography.

FARM member: Ms Jane Williams	
Appointed:	2 July 2020
Current term:	1 July 2023 to 30 June 2025

Ms Williams is a HWQld board member. Refer to [page 44](#) for biography.

HWQld Executive Leadership Team

Chief Executive Officer, Dr Robyn Littlewood

Dr Robyn Littlewood is the Chief Executive Officer of Health and Wellbeing Queensland, the state's prevention agency dedicated to creating lasting impact on the health of Queenslanders and strengthening the health system.

She leads a dedicated team committed to improving health outcomes and reducing the burden of chronic disease for all Queenslanders.

Harnessing the agility of a statutory body, Dr Littlewood champions strategic partnerships across government, community and industry to tackle the underlying factors that contribute to chronic ill-health through collaborative, evidence-based and community-focused action.

With more than 25 years' experience across clinical care, research and education, Dr Littlewood has made significant contributions to paediatric healthcare. She is recognised as a leader who challenges traditional thinking, championing innovation, research and the use of data intelligence to advance prevention and healthcare reform.

Through Health and Wellbeing Queensland, Dr Littlewood is working closely with the health system to reduce the impact of chronic disease and seize new opportunities to elevate prevention — including national reforms and the Brisbane 2032 Olympic and Paralympic Games legacy. Dr Littlewood is relentless about achieving a Health Legacy for Queensland, something that has not been achieved by a host city, throughout the history of the games.

Dr Littlewood holds a Bachelor of Science, Postgraduate Diploma in Nutrition and Dietetics, Master of Medical Science, Master of Business Administration and a PhD, alongside a Postgraduate Diploma in Business Administration and Graduate Certificate in Executive Leadership. Robyn remains proud of her decades of clinical experience in healthcare.

She is a Fellow of Dietitians Australia, a member of the Australian Institute of Company Directors, and Adjunct Professor at The University of Queensland, Queensland University of Technology and Griffith University.

Her outstanding contribution to the profession has been recognised with the Barbara Chester Award and QUT Health Alumni of the Year.

Deputy Chief Executive Officer, Ms Gemma Hodgetts

The Deputy Chief Executive Officer leads the planning, direction and management 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.

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.



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

Ms Nean is a public health professional with over 30 years' experience spanning state, regional, and local government sectors.

As the Senior Director of Health Promotion at HWQld, she leads the Research and Impact team as well as 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 Finance, Audit and Risk Management sub-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 completed the Queensland Health Executive Leaders Program in November 2024.

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.

Glossary

Acronym /term	Definition
ABS	Australian Bureau of Statistics
AC	Companion of the Order of Australia
ACCHS	Aboriginal Community Controlled Health Services
AO	Officer of the Order of Australia
BCTD	Broncos, Cowboys, Titans and Dolphins National Rugby League partnership
BMI	Body Mass Index
CEO	Chief Executive Officer
CEQ	Community Enterprise Queensland
CK	Country Kitchens
CPM	Cost per thousand impressions
CSC	Cook Shire Council
CVD	Cardiovascular disease
DYT	Do Your Thing
ECHO	Extension for Community Healthcare Outcomes
FARM	Finance, Audit and Risk Management
Foodcubes	A community-driven home gardening initiative using Australian-made raised garden beds for sustainable, high-performance food production, which is designed to strengthen household food security and wellbeing
FTE	Full-time equivalent
GAICD	Graduate of the Australian Institute of Company Directors
GDM	Gestational Diabetes Mellites
GenQ	Generation Queensland
HBDI	Herrmann Brain Dominance Instrument program
HHS	Hospital and Health Service
HCWRI	Health and Wellbeing Centre for Research Innovation
HWQId	Health and Wellbeing Queensland
INHPF	International Network of Health Promotion Foundations
IPAA	Institute of Public Administration Australia

Acronym /term	Definition
IUIH	Institute for Urban Indigenous Health
LGBTIQA+	Lesbian, gay, bisexual, transgender, intersex, queer/questioning, and asexual
LHL	Logan Healthy Living
MAIF	Manufacturers and Importers Agreement
MH4L	My Health for Life
MHAOD	Mental health, alcohol and other drugs
MOHRI	Minimum Obligatory Human Resource Information
MoU	Memorandum of Understanding
MP	Member of Parliament
NAIDOC	National Aboriginal and Islanders Day Observance Committee
NGO	Non-government organisations
NRL	National Rugby League
OMA	Outdoor Media Association
PA	Physical Activity
PhD	Doctor of Philosophy
PHPT	Preconception Health Promotion Trial
PoTC	Pick of the Cop
PSM	Public Service Medal (Australia)
QAST	Queensland Association of School Tuckshops
QCWA	Queensland Country Women's Association
QFC	Queensland Family Cohort
QH	Queensland Health – Department of Health and HHSs, collectively
QUT	Queensland University of Technology
RAC	Research Advisory Committee
RAP	Reconciliation Action Plan
SMS	Short Message Service
TWG	Technical Working Group
UniSC	University of Sunshine Coast
UQ	University of Queensland
WM2Y	What Matters to Youth

References

Please contact Health and Wellbeing Queensland for a reference list.

Compliance checklist

Summary of requirement		Basis for requirement	Annual report reference
Letter of compliance	A letter of compliance from the accountable officer or statutory body to the relevant Minister/s	ARRs – section 7	Pg ii
Accessibility	Table of contents	ARRs – section 9.1	Pg 1
	Glossary		Pg 48
	Public availability	ARRs – section 9.2	Inside front cover
	Interpreter service statement	<i>Queensland Government Language Services Policy</i> ARRs – section 9.3	Inside front cover
	Copyright notice	<i>Copyright Act 1968</i> ARRs – section 9.4	Inside front cover
	Information Licensing	<i>QGEA – Information Licensing</i> ARRs – section 9.5	Inside front cover
General information	Introductory Information	ARRs – section 10	Pg 2 to 7 and 9
Non-financial performance	Government's objectives for the community and whole-of-government plans/specific initiatives	ARRs – section 11.1	Pg 37
	Agency objectives and performance indicators	ARRs – section 11.2	Pg 34 to 36
	Agency service areas and service standards	ARRs – section 11.3	Pg 38
Financial performance	Summary of financial performance	ARRs – section 12.1	Pg 39
Governance – management and structure	Organisational structure	ARRs – section 13.1	Pg 13
	Executive management	ARRs – section 13.2	Pg 42 to 47
	Government bodies (statutory bodies and other entities)	ARRs – section 13.3	Pg 10
	Public Sector Ethics	<i>Public Sector Ethics Act 1994</i> ARRs – section 13.4	Pg 41
	Human Rights	<i>Human Rights Act 2019</i> ARRs – section 13.5	Pg 41
	Queensland public service values	ARRs – section 13.6	Pg 13

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
	Internal audit	ARRs – section 14.3	Pg 41
	External scrutiny	ARRs – section 14.4	Pg 41
	Information systems and recordkeeping	ARRs – section 14.5	Pg 41
	Information Security attestation	ARRs – section 14.6	N/A
Governance – human resources	Strategic workforce planning and performance	ARRs – section 15.1	Pg 39
	Early retirement, redundancy and retrenchment	<i>Directive No.04/18 Early Retirement, Redundancy and Retrenchment</i> ARRs – section 15.2	Pg 39
Open Data	Statement advising publication of information	ARRs – section 16	Inside front cover
	Consultancies	ARRs – section 31.1	https://data.qld.gov.au
	Overseas travel	ARRs – section 31.2	https://data.qld.gov.au
	Queensland Language Services Policy	ARRs – section 31.3	https://data.qld.gov.au
	Charter of Victims' Rights	<i>VCSVRB Act 2024</i> ARRs – section 31.4	https://data.qld.gov.au
Financial statements	Certification of financial statements	FAA – section 62 FPMS – sections 38, 39 and 46 ARRs – section 17.1	Pg 52 to 77
	Independent Auditor's Report	FAA – section 62 FPMS – section 46 ARRs – section 17.2	Pg 78 to 79

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 2025

Health and Wellbeing Queensland Financial Statements 2024-25

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Health and Wellbeing Queensland

Statement of Comprehensive Income for the year ended 30 June 2025

		2025 Actual \$'000	2025 Original Budget \$'000	2025 Budget Variance* \$'000	2024 Actual \$'000
	Notes				
Income					
Revenue					
Grants and other contributions	4	53,456	49,868	(3,588)	41,987
Interest		1,842	500	(1,342)	1,293
Other revenue	5	66	-	(66)	23
Total Revenue		55,364	50,368	(4,996)	43,303
Total Income		55,364	50,368	(4,996)	43,303
Expenses					
Employee expenses	6	12,113	11,999	(114)	10,475
Supplies and services	7	7,062	35,454	28,392	7,183
Grants and subsidies	8	3,553	2,091	(1,462)	1,566
Depreciation	13	46	680	634	64
Amortisation	14	641	-	(641)	633
Service Procurement	9	23,677	-	(23,677)	22,001
Other expenses	10	281	144	(137)	642
Total Expenses		47,373	50,368	2,995	42,564
Operating Result		7,991	-	(7,991)	739
Total Comprehensive Income		7,991	-	(7,991)	739

*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 2025

		2025 Actual	2025 Original Budget	2025 Budget Variance*	2024 Actual
	Notes	\$'000	\$'000	\$'000	\$'000
Current Assets					
Cash and cash equivalents	11	20,179	10,629	(9,550)	9,428
Receivables	12	530	668	138	559
Prepayments		21	-	(21)	2,867
Total Current Assets		20,730	11,297	(9,433)	12,854
Non Current Assets					
Property, plant and equipment	13	230	193	(37)	253
Intangible Asset	14	1,080	739	(341)	1,721
Total Non Current Assets		1,310	932	(378)	1,974
Total Assets		22,040	12,229	(9,811)	14,828
Current Liabilities					
Payables	15	633	484	(149)	897
Accrued employee benefits	16	404	299	(105)	315
Other Liabilities	17	827	-	(827)	1,431
Total Current Liabilities		1,864	783	(1,081)	2,643
Total Liabilities		1,864	783	(1,081)	2,643
Net Assets		20,176	11,446	(8,730)	12,185
Equity					
Accumulated surplus		20,176	-	(20,176)	12,185
Total Equity		20,176	11,446	(8,730)	12,185

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

The accompanying notes form part of these statements.

Health and Wellbeing Queensland

Statement of Changes in Equity for the year ended 30 June 2025

	2025	2024
	\$'000	\$'000
Balance as at 1 July 2024	12,185	11,446
Operating Result	7,991	739
Balance as at 30 June 2025	20,176	12,185

The accompanying notes form part of these statements.

Health and Wellbeing Queensland

Statement of Cash Flows for the year ended 30 June 2025

		2025 Actual	2025 Original Budget	2025 Budget Variance*	2024 Actual
	Notes	\$'000	\$'000	\$'000	\$'000
Cash flows from operating activities					
<i>Inflows:</i>					
Grants and other contributions		53,302	49,868	(3,434)	41,987
GST collected from customers		115	500	385	87
GST input tax credits from ATO		3,356	-	(3,356)	823
Interest receipts		1,842	-	(1,842)	1,293
Other revenue		66	-	(66)	53
<i>Outflows:</i>					
Employee expenses		(12,091)	(11,999)	92	(10,445)
Supplies and services		(4,495)	(35,454)	(30,959)	(9,564)
Grants and subsidies		(4,157)	(2,091)	2,066	(135)
GST paid to suppliers		(3,106)	-	3,106	(759)
GST remitted to ATO		(100)	-	100	(161)
Service Procurement		(23,677)	-	23,677	(22,001)
Other expenses		(281)	(144)	137	(642)
Net cash provided by operating activities		10,774	680	(10,093)	536
Cash flows from investing activities					
<i>Outflows:</i>					
Payments for plant and equipment		(23)	-	23	(44)
Payments for intangibles		-	-	-	(335)
Net cash provided by / (used in) investing activities		(23)	-	23	(379)
Net increase / (decrease) in cash held		10,751	680	(10,070)	157
Cash at beginning of financial year		9,428	9,949	521	9,271
Cash at end of financial year	11	20,179	10,629	(9,550)	9,428

The accompanying notes form part of these statements.

	2025 \$'000	2024 \$'000
Reconciliation of Operating Result to Net Cash from Operating Activities		
Operating surplus	7,991	739
Depreciation expense	46	64
Amortisation expense	641	633
Changes in assets and liabilities:		
Decrease in receivables	29	109
(Increase) / Decrease in prepayments	2,846	(2,867)
Increase / (Decrease) in payables	(264)	412
Increase in accrued employee benefits	89	15
Increase / (Decrease) in other liabilities	(604)	1,431
Net cash provided by operating activities	10,774	536

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

The accompanying notes form part of these statements.

Health and Wellbeing Queensland

Notes to the Financial Statements for the year ended 30 June 2025

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

Health and Wellbeing Queensland

Notes to the Financial Statements for the year ended 30 June 2025

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

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 2024.

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 2023-24 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 the right at the end of the reporting period to defer settlement to beyond 12 months after the reporting date.

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

Health and Wellbeing Queensland

Notes to the Financial Statements for the year ended 30 June 2025

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 2025

	2025 \$'000	2024 \$'000
4. Grants and Other Contributions		
Grants from Government	53,438	41,977
Contributions from Industry	18	10
Total	53,456	41,987

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.

5. Other Revenue

Other Revenue	66	23
Total	66	23

6. Employee Expenses

Employee Benefits

Wages and salaries	8,838	7,649
Annual leave levy	942	765
Long service leave levy	236	209
Employer superannuation contributions	1,235	1,102
Other Employee Benefits	30	30

Employee Related Expenses

Workers' compensation premium	50	49
Payroll tax	535	462
Other employee related expenses	247	209

Total	12,113	10,475
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The number of employees as at 30 June 2025, including both full time and part time employees, measured on a full time equivalent basis reflecting Minimum Obligatory Human Resource Information (MOHRI).

	2025 No.	2024 No.
Full-Time Equivalent Employees	67.55	62.18

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.

Health and Wellbeing Queensland

Notes to the Financial Statements for the year ended 30 June 2025

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 2025

	2025 \$'000	2024 \$'000
7. Supplies and Services		
Property rental	529	479
Employment agency staff	171	233
Information technology	139	91
Minor plant and equipment	89	154
Legal fees	76	25
Supplies and consumables	993	1,498
Consultants and contractors	4,342	4,041
Corporate service charges	567	502
Communications	50	61
Sundry expenses	106	99
Total	7,062	7,183

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 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	3,553	1,566
Total	3,553	1,566

Disclosures - Grants and Subsidies

Grant and Subsidies include payments for programs such as Discrete Communities Planning Funding Program, Pick of the Crop and Research Partnerships.

9. Service Procurement Expense - Social Service

Service Procurement Expense - Social Service	23,677	22,001
Total	23,677	22,001

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	18
External audit fees for the audit of financial statements ⁽¹⁾	30	53
Sponsorships	233	571
Total	281	642

Audit Fees

(1) Total audit fees quoted by the Queensland Audit Office relating to the 2024-25 financial statements are \$30,420 (2023-24: \$27,800).

Health and Wellbeing Queensland

Notes to the Financial Statements for the year ended 30 June 2025

	2025 \$'000	2024 \$'000
11. Cash and Cash Equivalents		
Cash at bank	20,179	9,428
Total	20,179	9,428

Accounting policy

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 2025.

12. Receivables

Trade debtors	167	13
GST receivable	144	393
Long service leave reimbursements	22	15
Annual leave reimbursements	197	138
Total	530	559

Accounting policy - Receivables

Receivables are measured at amortised cost which approximates their fair value at reporting date.

Accounting policy - Impairment of receivables

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.

13. Plant and Equipment and Depreciation Expense

Closing Balance and Reconciliation of Carrying Amount

Plant and Equipment at Cost

Gross (at cost)	469	446
Less: Accumulated depreciation	(239)	(193)
Total	230	253
Carrying amount at 1 July	253	273
Acquisitions	23	-
Depreciation expense	(46)	(64)
Carrying amount at 30 June	230	209

Health and Wellbeing Queensland

Notes to the Financial Statements for the year ended 30 June 2025

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 2025

14. Intangible Asset and Amortisation expense

Closing Balance and Reconciliation of Carrying Amount

	Software at cost		WIP at cost		Total	
	2025 \$'000	2024 \$'000	2025 \$'000	2024 \$'000	2025 \$'000	2024 \$'000
Gross (at cost)	2,354	2,354	-	-	2,354	2,354
Less: Accumulated amortisation	(1,274)	(633)	-	-	(1,274)	(633)
Total	1,080	1,721	-	-	1,080	1,721
Carrying amount at 1 July	2,354	-	-	2,019	2,354	2,019
Acquisitions	-	-	-	335	-	335
Transfers between asset classes	-	2,354	-	(2,354)	-	-
Amortisation expense	(641)	(633)	-	-	(641)	(633)
Carrying amount at 30 June	1,713	1,721	-	-	1,712	1,721

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 2025

	2025 \$'000	2024 \$'000
15. Payables		
Trade and other creditors	374	183
Accrued other supplies and services	259	714
Total	633	897

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

Salary and wages related	34	-
Annual leave levy payable	300	256
Long service leave levy payable	65	59
Superannuation	5	-
Total	404	315

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	827	1,431
Total	827	1,431

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 2025.

19. Contingencies

HWQld does not have any contingencies as at 30 June 2025.

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 2025

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 2025

22. Budgetary Reporting Disclosures

This section contains explanations of major variances between the Agency's actual 2024-25 financial results and the original budget presented to Parliament.

Statement of Comprehensive Income

		2025 Actual \$'000	2025 Original Budget \$'000	2025 Budget Variance \$'000	2024 Actual \$'000
	Variance Notes				
Income from Continuing Operations					
Revenue					
Grants and other contributions	1	53,456	49,868	(3,588)	41,987
Interest earned	2	1,842	500	(1,342)	1,293
Other revenue		66	-	(66)	23
Total Income from Continuing Operations		55,364	50,368	(4,996)	43,303
Expenses from Continuing Operations					
Employee expenses	3	12,113	11,999	(114)	10,475
Supplies and services	4	7,062	35,454	28,392	7,183
Grants and subsidies	5	3,553	2,091	(1,463)	1,566
Depreciation		46	680	634	64
Amortisation	6	641	-	(641)	633
Service Procurement	4	23,677	-	(23,677)	22,001
Other expenses	4	281	144	(137)	642
Total Expenses from Continuing Operations		47,373	50,368	2,995	42,564
Operating Result from Continuing Operations		7,991	-	(7,991)	739
Total Comprehensive Income		7,991	-	(7,991)	739

Explanations of Major Variances

- 1 *Grants and other contributions:* Additional grant funding was received during the year for costs associated with:
 - Whole-of-Government non-government organisation indexation rate; and
 - function specific activities.
- 2 *Interest earned:* Variance is a result of 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 a previous year.
- 4 *Supplies and services / Service Procurement / Other expenses:* The original supplies and services budget included service procurement. Variance is due to actively managing outyear fiscal limits by delaying the commencement of function specific activities to 2025/26 and the outyears.
- 5 *Grants and subsidies:* Increased actuals include expenses associated with the additional funds received for the delivery of function specific activities.
- 6 *Amortisation:* The original depreciation budget included amortisation expenses.

Health and Wellbeing Queensland

Notes to the Financial Statements for the year ended 30 June 2025

22. Budgetary Reporting Disclosures (continued)

Statement of Financial Position

		2025	2025	2025	2024
		Actual	Original	Budget	Actual
	Variance Notes	\$'000	Budget	Variance	\$'000
			\$'000	\$'000	
Current Assets					
Cash and cash equivalents	1	20,179	10,629	(9,550)	9,428
Receivables		530	668	138	559
Prepayments		21	-	(21)	2,867
Total Current Assets		20,730	11,297	(9,433)	12,854
Non Current Assets					
Plant and equipment		230	193	(37)	253
Intangible assets	2	1,080	739	(341)	1,721
Total Non Current Assets		1,310	932	(378)	1,974
Total Assets		22,040	12,229	(9,811)	14,828
Current Liabilities					
Payables		633	484	(149)	897
Accrued employee benefits		404	299	(105)	315
Other liabilities	3	827	-	(827)	1,431
Total Current Liabilities		1,864	783	(1,081)	2,643
Total Liabilities		1,864	783	(1,081)	2,643
Net Assets		20,176	11,446	(8,730)	12,185
Equity					
Accumulated surplus		20,176	-	(20,176)	12,185
Total Equity		20,176	11,446	(8,730)	12,185

Explanations of Major Variances

- 1 *Cash and cash equivalents:* Increase from original budget is due to the identification of function specific activities to be delivered in 2025/26.
- 2 *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.
- 3 *Other liabilities:* Grant funding received for function specific activities that was not expended by 30 June 2025.

Health and Wellbeing Queensland

Notes to the Financial Statements for the year ended 30 June 2025

22. Budgetary Reporting Disclosures (continued)

Statement of Cash Flows

		2025 Actual \$'000	2025 Original Budget \$'000	2025 Budget Variance \$'000	2024 Actual \$'000
	Variance Notes				
Cash flows from operating activities					
<i>Inflows:</i>					
Grants and other contributions	1	53,302	49,868	(3,434)	41,987
GST collected from customers		115	500	385	87
GST input tax credits from ATO		3,356	-	(3,356)	823
Interest receipts		1,842	-	(1,842)	1,293
Other		66	-	(66)	53
<i>Outflows:</i>					
Employee expenses	2	(12,091)	(11,999)	92	(10,445)
Supplies and services	3	(4,495)	(35,454)	(30,959)	(9,564)
Grants and subsidies	4	(4,157)	(2,091)	2,066	(135)
GST paid to suppliers		(3,106)	-	3,106	(759)
GST remitted to ATO		(100)	-	100	(161)
Service Procurement	3	(23,677)	-	23,677	(22,001)
Other expenses	3	(281)	(144)	137	(642)
Net cash provided by operating activities		10,774	680	(10,093)	536
Cash flows from investing activities					
Payments for plant and equipment		(23)	-	23	(44)
Payments for intangibles		-	-	-	(335)
Net cash provided by / (used in) investing activities		(23)	-	23	(379)
Net increase / (decrease) in cash held		10,751	680	(10,070)	157
Cash at beginning of financial year		9,428	9,949	521	9,271
Cash at end of financial year		20,179	10,629	(9,550)	9,428

Explanations of Major Variances

- 1 *Grants and other contributions:* Additional grant funding was received during the year for costs associated with:
 - Whole-of-Government non-government organisation indexation rate; and
 - function specific activities.
- 2 *Employee expenses:* Employee expenses expenditure has increased due to both an increase in staffing to align with projects and Enterprise Bargaining Agreements ratified during a previous year.
- 3 *Supplies and services / Service Procurement / Other expenses:* Combined actual expenditure across supplies and services, service procurement and other expenses totals \$28.45 million. The \$7.1 million variance is due to the identification of function specific activities to be delivered in 2025/26.
- 4 *Grants and subsidies:* Increased actuals include expenses associated due to additional funds received for the delivery of function specific activities.

Health and Wellbeing Queensland

Notes to the Financial Statements for the year ended 30 June 2025

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 2024-25. 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	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	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 and Ambulance Services. 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 2025

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.

2024-2025

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	312	6	8	39	-	365
Chief Operating Officer	230	-	6	29	-	265
Chief Operating Officer (Acting)	25	1	1	3	-	30
Deputy Chief Executive Officer	211	6	5	28	-	250
Senior Director, Health Promotion	198	6	5	25	-	234
Senior Director, Health Promotion (Acting)	25	1	1	3	-	30
Business and Governance Director	148	6	4	19	-	177
Business and Governance Director (Acting)	22	-	1	3	-	26
Total Remuneration	1,171	26	31	149	-	1,377

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
Total Remuneration	893	18	22	117	-	1,050

Health and Wellbeing Queensland

Notes to the Financial Statements for the year ended 30 June 2025

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

2024-2025

Board Remuneration

Position	Terms		Total remuneration	Out of Pocket expenses
	Date of initial appointment	Date of cessation	\$'000	\$'000
Current Members				
Mr Stephen Ryan ~#	1/07/2019		42	-
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 ~	1/04/2020		19	-
Mr Andrew Hopper^%	10/09/2022		-	-
Dr Shea Spierings	3/02/2022		17	-
Dr David Rosengren ^**	1/11/2024		-	-
Ms Natalie Wilde ^***	22/04/2024		-	-
Former Members				
Ms Clare O'Connor ^*	20/11/2020	31/10/2024	-	-
Ms Kathy Parton ^*	1/11/2024	21/04/2025	-	-
Mr Michael Walsh ^**	24/07/2023	31/10/2024	-	-
Finance Audit and Risk Management Committee				
Christopher Johnson ^^	2/07/2020		3	-
Total Remuneration			132	-

^ Officer of the Public Service - non-remunerated

~ 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, Department of Health

*** This position is designated Chief Executive appointment for the Director-General of the Department of Women, Aboriginal and Torres Strait Islander Partnerships and Multiculturalism.

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

^^ 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 2025

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
Current Members				
Ms Clare O'Connor ^{^^}	20/11/2020		-	-
Mr Stephen Ryan [~] #	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 [~]	1/04/2020		19	-
Mr Andrew Hopper [^] %	10/09/2022		-	-
Dr Shea Spierings	3/02/2022		17	-
Mr Michael Walsh ^{^^} *	24/07/2023		-	-
Former Member				
Mr Shaun Drummond (as Acting Director-General, Department of Health) [^]	14/03/2022	23/07/2023	-	-
Finance Audit and Risk Management Committee				
Christopher Johnson ^{^^}	2/07/2020		3	-
Total Remuneration			131	-

[^] Officer of the Public Service - non-remunerated

[~] 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

^{^^} 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 2025

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 2024-25, HWQld had transactions to the value of \$217,412 only (with no balances remaining at end of year) to Metro North Hospital and Health Service for services received.

The KMP declarations identified the Institute for Urban Indigenous Health as a related entity. In 2024-25, HWQld had transactions to the value of \$10,527,495 only (with no balances remaining at end of year) to Institute for Urban Indigenous Health for services received.

The KMP declarations identified the University of Queensland as a related entity. In 2024-25, HWQld had transactions to the value of \$1,842,434 only (with no balances remaining at end of year) to University of Queensland for services received.

There were no further transactions with people or entities related to our KMP in 2024-25.

Transactions with other Queensland Government-controlled entities

HWQld received funding from Queensland Health. (refer Note 4 - Grants and Other Contributions)

HWQld provided funding to the Department of Tourism and Sport as Sponsorship (refer Note 8 - Grants and Subsidies).

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

HWQld transacts with Arts Queensland for accommodation in for the HWQld Cairns Regional 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 2024-25.

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 provides information and resources on climate related strategies and actions accessible at <https://www.energyandclimate.qld.gov.au/climate> and <https://www.treasury.qld.gov.au/energy-and-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.

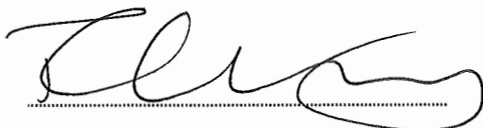
The statutory body continues to monitor the emergence of material climate-related risks that may impact the financial statements of the statutory body, including those arising under the Queensland Government's Queensland 2035 Clean Economy Pathway, and other Queensland Government climate-related policies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

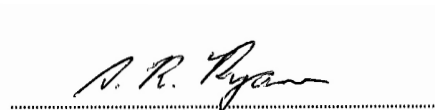
- (a) the prescribed requirements for establishing and keeping the accounts have been complied with in all material respects; and
- (b) the financial statements have been drawn up to present a true and fair view, in accordance with prescribed accounting standards, of the transactions of HWQld for the 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: 26/8/2025



Name: Mr Stephen Ryan
Title: Board Chairperson

Date: 26/8/2025

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 2025, 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 2025, 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 Board's 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

This description forms part of my auditor's report.

Report on other legal and regulatory requirements

Statement

In accordance with s.40 of the *Auditor-General Act 2009*, for the year ended 30 June 2025:

- 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.



D J Toma
as delegate of the Auditor-General

28 August 2025

Queensland Audit Office
Brisbane

