

Report of Operations

Victorian Health Promotion Foundation
2019–20

Declaration by Chair of the Responsible Body

In accordance with the *Financial Management Act 1994*, I am pleased to present the Victorian Health Promotion Foundation's Annual Report for the year ending 30 June 2020.

A handwritten signature in black ink, appearing to read 'Nick Green', written in a cursive style.

Nick Green OAM
Chair of the Board

26 August 2020

Section 1: Year in review

Our origin

VicHealth (the Victorian Health Promotion Foundation) is the world's first health promotion foundation, created in 1987 with a mandate to promote good health. We were established with cross-party support by the State Parliament of Victoria with the statutory objectives mandated by the *Tobacco Act 1987 (Vic)* (the Act). The responsible minister is the Minister for Health, the Hon. Jenny Mikakos MP.

The objectives of VicHealth as set out in the Act are to:

- fund activity related to the promotion of good health, safety or the prevention and early detection of disease
- increase awareness of programs for promoting good health in the community through the sponsorship of sports, the arts and popular culture
- encourage healthy lifestyles in the community and support activities involving participation in healthy pursuits
- fund research and development activities in support of these objectives.

Functions

The functions of VicHealth as set out in the Act are to:

- promote its objectives
- make grants from the Health Promotion Fund for activities, facilities, projects or research programs in furtherance of the objectives of VicHealth
- provide sponsorships for sporting or cultural activities
- keep statistics and other records relating to the achievement of the objectives of VicHealth
- provide advice to the Minister on matters related to its objectives referred by the Minister to VicHealth and generally in relation to the achievement of its objectives
- make loans or otherwise provide financial accommodation for activities, facilities, projects or research programs in furtherance of the objectives of VicHealth
- consult regularly with relevant government departments and agencies and to liaise with persons and organisations affected by the operation of this Act
- perform such other functions as are conferred on VicHealth by this or any other Act.

VicHealth performs and manages these functions by:

- developing a strategic plan, including concept, context and operations
- initiating, facilitating and organising the development of projects and programs to fulfil the strategic plan
- ensuring an excellent standard of project management for all project and program grants paid by VicHealth
- developing systems to evaluate the impacts and outcomes of grants
- ensuring that such knowledge is transferred to the wider community.

Our commitment

- Fairness – we promote fairness and opportunity for better health and wellbeing for all Victorians by making health equity a focus of our work.
- Evidence-based action – we create and use evidence to identify the issues that need action and to guide policy and practice by VicHealth and our partners.
- Working with community – we work with communities to set priorities, make decisions and create solutions.
- Partnerships across sectors – we collaborate with governments at all levels and nurture strong relationships with others in health promotion, health, sports, research, education, work and the arts, including local communities, the private sector and the media, to collectively tackle complex health and wellbeing challenges.

Our difference

For over 30 years, VicHealth has been a pioneer and world leader in health promotion. We are highly respected for our knowledge, skills and experience. We work in partnership with all sectors as a trusted, independent source of evidence-based practice and advice.

We take action where there's the greatest need and potential for positive impact, which in 2019–20 included the impacts on community health from the bushfires and the coronavirus pandemic. We make the most of our resources by building on and complementing the efforts of governments and other organisations that are also promoting health, including in ways that complement the priorities of the Victorian Department of Health and Human Services and other departments and agencies.

Our culture of innovation enables us to tackle the rise of chronic diseases by bringing the best approaches across the world to test and trial in Victoria.

Chair's report

VicHealth has championed better health and wellbeing for Victorians for over 3 decades. In a year of tumultuous change caused by bushfires and the coronavirus pandemic this mission has become even more critical.

In the final 4 years of the *VicHealth Action Agenda for Health Promotion 2013–23*, we are prioritising partnership and collaboration to amplify our impact and ensure we reach the ultimate goal of improving the lives of 1 million more Victorians by 2023.

This year we partnered with more than 600 organisations and over 70 local councils to encourage more Victorians to get active, increase availability and affordability of healthier foods, improve mental wellbeing, and prevent the use of tobacco and harms from alcohol.

These partnerships were facilitated through Active Club Grants, Partnership Grants, our long-running and successful Walk to School program, and a range of mental wellbeing programs. Complementing our grants and program activity, we pursued collaborations with government departments and the health promotion sector.

Building health equity

Achieving better health and wellbeing for *everyone* means levelling the playing field between people who can easily access good health and people who face barriers. VicHealth's commitment to health equity was illustrated by the following initiatives this year:

- Our *This Girl Can – Victoria* campaign encourages all women, regardless of background, location or experience to get active, and shares the stories of diverse women from across the community.
- Increased investment into arts and community programs benefiting First Nations people to inspire new narratives around family violence prevention and expand support for young Aboriginal artists.
- Tackling discrimination through our ongoing collaboration with Pride Cup and Proud 2 Play to ensure members of the LGBTIQ community feel welcome and included in sport.

Deepening the evidence base

Health promotion research is essential to understand the factors that drive preventable disease and to guide effective intervention.

We know that research describing public health problems is plentiful, so VicHealth's research is focused on deepening the evidence base to inform policy and the application of knowledge into health promotion practice.

Following this year's release of the *VicHealth Research Strategy 2019–23*, research highlights included:

- A world-first report on loneliness, highlighting problematic social isolation in young people, published in partnership with Swinburne University.
- Bystander action on sexism and sexual harassment intervention trials, in collaboration with the University of Melbourne and Victoria University.

Responding to change

It has been astounding to see the way the Victorian Government, Victorians and the health promotion sector have responded to the coronavirus pandemic. At times like these we see the true strength of partnership and collaboration.

On behalf of the VicHealth Board, I would like to thank the Victorian Minister for Health, the Hon. Jenny Mikakos MP, for her support, leadership and outstanding commitment to the people of Victoria this year. I also thank the Minister for Mental Health, Creative Industries and Equality, the Hon. Martin Foley MP; the Minister for Sport, the Hon. Martin Pakula MP; the Minister for Women, Prevention of Family Violence and Aboriginal Affairs, the Hon. Gabrielle Williams MP; and other ministers, advisors and Members of the Victorian Parliament. Our work for the people of Victoria unites us and allows us to achieve together.

I am also very grateful to the VicHealth Board, committees and staff for making an invaluable contribution to our work this year. I would particularly like to thank outgoing Chair, Fiona McCormack, for her outstanding leadership of the VicHealth Board over the past 4 years. I also thank Dr Lyn Roberts AO for taking the helm as CEO and expertly steering VicHealth for 6 months until we welcomed Dr Sandro Demaio as VicHealth CEO in September 2019.

Together their unwavering dedication to the health and wellbeing of Victorians is integral to VicHealth's past achievements and future impact.

I am delighted to take on the role of VicHealth Chair to work with Dr Demaio and the wider VicHealth team to create a healthier Victoria for everyone.



Nick Green OAM
Chair, VicHealth

Chief Executive Officer's report

I am humbled and privileged to take on the role as Chief Executive Officer of VicHealth. I have long admired VicHealth's excellent reputation for ground-breaking research, impactful programs and life-changing campaigns.

As we enter the final 4 years of our Action Agenda, we have an opportunity to further evolve our work and build on its strengths to create a healthier future for all Victorians.

A future where people can get active and enjoy physical activity regardless of who they are, what their background is or where they live. A future where all families have access to affordable and healthy food. A future of improved mental wellbeing, and where Victorians are protected from the harms of alcohol and tobacco.

Delivering better health and wellbeing for all Victorians

Meeting VicHealth stakeholders and partners in regional Victoria was the highlight of my first few months in the role. Prior to the coronavirus restrictions, I visited Swan Hill, Echuca, Geelong, Ballarat, Bendigo, Mildura and Shepparton. The opportunity to listen to those we serve and those we work with was invaluable. I was better able to understand the impact we are having on regional communities and how we can work with them more closely in the future.

One of Victoria's greatest challenges is the dramatic increase of childhood obesity with one in four children (aged between 2 and 18) now living above a healthy weight. Some health experts believe this could be the first generation to have a lower life expectancy than their parents. This year, VicHealth led the development of a consensus statement on obesity prevention, in collaboration with the Healthy Eating and Active Living Roundtable. *A Healthier Start for Victorians* outlines eight practical recommendations, providing the springboard for action to prevent childhood obesity over the coming years.

Responding to the bushfires and coronavirus pandemic

Devastation caused by bushfires and the ongoing coronavirus pandemic has tested every individual, community, organisation and business in Victoria. I am incredibly proud of the way VicHealth has responded to the emerging needs of Victorian communities.

Our team increased the level and flexibility of funding across a range of grants programs, allowing sports, arts and cultural organisations to tell us what they needed to aid their recovery. We also supported organisations in bushfire-affected communities to ensure they have the resources to apply for, and manage, grants and health promotion programs.

Strengthening our partnerships and collaboration

I would like to acknowledge the incredible partners we work with at all levels of government, health, sport, education, workplaces, the arts and the non-profit sector. The true strength of health promotion depends on how we work together. This year, VicHealth continued to grow its leadership role as facilitator and convenor to augment the impact with our partner organisations.

To support the work of the Victorian Government's response to the coronavirus pandemic, we created an online Health Promotion Coronavirus (COVID-19) Resource Hub to share information and resources across the health promotion sector. We also convened several leadership groups, including:

- Health Promotion Peak Agency COVID-19 Working Group
- Mental Health COVID-19 Working Group
- Food Security/Food Systems COVID-19 Working Group
- Health Promotion Research COVID-19 Working Group
- Walking and Cycling Post COVID-19 Working Group.

Our Board continued to provide excellent governance and expert leadership. I would like to thank former Chair of the Board, Fiona McCormack for her support and commitment to VicHealth, and welcome our new Chair, Nick Green OAM.

I am particularly proud of VicHealth's incredible staff. They have continued to demonstrate their passion and commitment to deliver for the Victorian community during this time of incredible change.

As Victoria emerges from the initial shocks of the coronavirus pandemic, we have a once in a lifetime opportunity to re-imagine a healthier, more sustainable and more equitable Victoria. In June, VicHealth launched a 5-week research and event series on this subject. The findings and recommendations will be incorporated into our future work.

The impact of 2020 will be felt in Victoria for years to come. VicHealth will be here to walk alongside every Victorian as, together, we work to improve health and wellbeing.



Dr Sandro Demaio
Chief Executive Officer, VicHealth

This year's highlights



Encouraging more physical activity

- We invested over \$1.2m in 418 sporting clubs to kick-start new ideas that increase participation by women and girls and less active Victorians via our Active Club Grants program.
- We partnered with 23 sporting organisations to work alongside young people, women and girls, and people of all abilities and backgrounds to innovate and deliver new offerings for people who are less active.
- In partnership with Victoria's nine Regional Sports Assemblies we created more opportunities for rural and regional Victorians to engage in sport and recreation, be active and socially connected. Alongside Sport and Recreation Victoria we continued to build the capacity of Regional Sport Victoria to deliver outcomes for regional communities.
- By increasing partnerships with 71 local councils we engaged 942 schools and around 186,000 students in walking, riding, scooting and skating to and from school in October; this equates to approximately 1 in every 3 Victorian primary school students.
- In response to the coronavirus pandemic, VicHealth stimulated collaborative action to better support walking and cycling within local communities over the coming period and into the future.
- As part of our Leading Thinkers Initiative, we produced a first ever, large-scale big data analysis of the extent and nature of the portrayal of women and men in Victorian sports print media. These findings provide new evidence to inform the debate, and highlight challenges and opportunities, to achieve gender equality goals in women's sports reporting.
- Our successful *This Girl Can – Victoria* campaign moved into its third consecutive year. With the coronavirus restrictions, we worked with our ambassadors and campaign supporters to build new home exercise video content, supporting women to be active at home.



Preventing tobacco use

- We continued to collaborate with the Victorian Government and Cancer Council Victoria to support Quit Victoria, who this year ran a series of campaigns including *16 Cancers*; educated the public about the impact of smoking during the coronavirus pandemic; and advocated for the inclusion of vaping in local smokefree areas.
- We boosted our support for the work of Tobacco-Free Portfolios with 80 leading financial organisations from more than 10 countries to support them to implement tobacco-free finance policies spanning lending, investment and insurance.



Improving mental wellbeing

- In partnership with Swinburne University, VicHealth contributed to discovering new insights into the experiences of loneliness among young Australians. The world-first Young Australians Loneliness Survey engaged 1,500 young people aged 12–25 years and highlighted problematic levels of loneliness, social isolation and risk of poor mental health, particularly in the 18–25 year old group, with higher risk of social anxiety and depressive symptoms for young women.
- VicHealth teamed up with the Victorian Office for Women, the Behavioural Insights Team, the University of Melbourne and Victoria University to trial approaches to supporting bystander action against sexism and sexual harassment in the university setting. The project led to the development of a suite of tools and resources implemented across additional settings.
- VicHealth's new Masculinities and Health Framework was created to provide guidance for addressing masculine gender stereotypes to benefit the health and wellbeing of men, boys and the broader community.
- Many new arts investments were created during this period including stronger support for arts benefiting First Nations people. This included initiatives such as *Scar Trees* by ILBIJERRI Theatre Company and the Victorian Aboriginal Child Care Agency (VACCA), and the Office for Women and Creative Victoria to challenge old and inspire new narratives around family violence awareness and prevention across 11 Victorian locations. In addition, the Barpidhila Foundation's Youth Programs provided platforms to nurture, develop and support Aboriginal excellence within the creative industries through regional youth camps, performance opportunities, artist development programs and music industry/business workshops. These projects were delivered in partnership with Girls Rock! Melbourne and Korin Gamadji Institute (KGI).
- A new partnership with the Human Rights Film Festival saw VicHealth contribute to this 7-day online film festival showcasing a retrospective of films highlighting the strength of the human spirit, complemented by talks and performances by local artists.
- VicHealth provided a submission to the Royal Commission into Victoria's Mental Health System in August 2019, which highlighted the importance of primary prevention and health promotion approaches, coordinated cross-sectoral action, and a focus on children and young people. In 2020 VicHealth commissioned an updated evidence review of primary prevention risk factors and interventions, which was provided to the Royal Commission along with evidence around the mental health impacts of coronavirus.



Promoting healthy eating

- In partnership with Museums Victoria we phased out sugary drinks, improved healthy food environments and commissioned health related creative programming at Melbourne Museum, Scienceworks and the Immigration Museum. This partnership received much positive media attention including around 700 media items produced in Australia and globally.
- We increased the availability of free drinking water as a genuine alternative to sugary drinks in major settings including the Melbourne Cricket Ground, Melbourne and Olympic Parks, and Kardinia Park.
- In partnership with more than 50 sport and recreation facilities across the state, we continued to drive down the availability of sugary drinks (from 38 per cent to 14 per cent availability) to make healthier options such as water more available (up to 66 per cent from 45 per cent). Many of these achievements were supported by long-term policy change.
- Through a new partnership with The Community Grocer we contributed to greater food security for those facing disadvantage, many for the first time due to pandemic related financial distress, with an emphasis on affordable access to fruits and vegetables.
- The report *A Healthier Start for Victorians: A Consensus Statement on Obesity Prevention* led by VicHealth on behalf of the Healthy Eating and Active Living Roundtable was launched by the Parliamentary Secretary for Health, Mr Anthony Carbin MP. Eight practical recommendations to address childhood obesity have influenced Victorian Government and stakeholders' actions since the launch.
- With strong leadership from the Obesity Policy Coalition we continue to contribute efforts to enhance regulation and reduce unhealthy marketing and food labelling in Australia. This work has also included significant work in public opinion polling, which informs the future work of government and partners.



Reducing harm from alcohol

- We collaborated with the Alcohol and Drug Foundation and consulted with four local councils to develop a 'how to' guide on what local governments can do to reduce alcohol-related harm.
- We began exploring risky drinking cultures among nurses and lawyers and funded research to test the uptake of brief interventions for risky alcohol use across a range of settings including BreastScreen services and GPs working in low-income communities.
- Together with four councils, we implemented targeted local programs under the Men's Risky Drinking initiative to help shift the culture of risky drinking that persists among specific groups of men.

Values-based messaging

- Our Healthy Persuasions message guide was released to the sector with an overwhelmingly positive response. The cutting-edge research and resulting insights assist the health promotion sector to use the most effective frames and messages to build support for evidence-based health promotion action.

Partnership Grants

- VicHealth's Partnership Grants supported 175 organisations to share in approximately \$2.5m of funding to advance the health of Victorians and contribute to greater health equity.

Responding to communities affected by bushfires

- We supported organisations, clubs and communities affected by the 2019/20 bushfires by reaching out to bushfire-affected communities to ensure they have the resources and capacity to apply for and manage grants, as well as prioritising those communities in activities such as *This Girl Can – Victoria*.
- We also introduced flexibility into the grant application process for organisations in bushfire-affected communities by adjusting requirements and applying additional consideration to their needs within the assessment process.
- Existing funding agreements with organisations and communities affected by bushfires were also adjusted, as necessary.

Coronavirus pandemic response and recovery

- In response to the pandemic, we increased funding for the Active Club Grants program to fund more sports organisations. We also introduced flexibility in funding to enable community sports organisations to use funds in the recovery from the impacts of coronavirus and re-establish participation in community sport.
- In consultation with peak bodies, the level and flexibility of funding for arts organisations was increased in response to the impact coronavirus has had on the arts, cultural and creative sectors.
- To support the Victorian Government, particularly the Department of Health and Human Services, we disseminated coronavirus health and wellbeing messages to the community throughout the pandemic. We also established an online Health Promotion Coronavirus Resource Hub for use by health promotion organisations and practitioners, with regularly updated key messages and resources.

Innovate Reconciliation Action Plan

- Reflective of our support for First Nations people, we demonstrated our commitment to reconciliation by developing and finalising our Innovate Reconciliation Action Plan (RAP), VicHealth's second RAP, which received conditional endorsement from Reconciliation Australia in May 2020. The VicHealth Board approved the plan in July 2020 with final endorsement by Reconciliation Australia expected in the first half of 2020–21. Development of the RAP would not have been possible without the invaluable contribution of the Aboriginal and Torres Strait Islander Advisory Group. We look forward to working closely with the Group to further build relationships, celebrate culture and tackle health inequities as we implement the Innovate Reconciliation Action Plan over the next two years.

VicHealth Action Agenda for Health Promotion 2013–2023

By 2023, one million more Victorians will experience better health and wellbeing.*

OUR 10-YEAR GOALS

BY 2023:

200,000 more Victorians adopt a healthier diet	300,000 more Victorians engage in physical activity	400,000 more Victorians tobacco-free	200,000 more Victorians drink less alcohol	200,000 more Victorians resilient and connected
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RESULTS: We track our progress through the VicHealth Action Agenda for Health Promotion Scorecard



* A technical paper describes the calculations underpinning the 10-year goals and 3-year priorities. As some individuals may achieve goals across more than one imperative, the total number in each 10-year target exceeds one million to account for this.

In 2013, VicHealth released a 10-year plan that outlined our vision for a Victoria where everyone can experience better health. The VicHealth Action Agenda for Health Promotion 2013–2023 set an ambitious target: one million more Victorians with better health and wellbeing by 2023.

To achieve that target, VicHealth committed to five strategic imperatives that have the greatest potential to improve the health of the Victorian population:

- promote healthy eating
- encourage regular physical activity
- prevent tobacco use
- prevent harm from alcohol
- improve mental wellbeing.

The Action Agenda was revised and refreshed in 2019, outlining a continued commitment to our five strategic imperatives and setting specific targets for each strategic imperative over the final 4 years from 2019 to 2023.

Our focus

Aligned with the World Health Organization's Ottawa Charter for Health Promotion, VicHealth takes action at multiple levels:

- building healthy public policy in all sectors and at all levels of government
- creating supportive environments for health where people live, work and play
- strengthening community action for social and environmental change
- developing personal skills that support people to exercise greater control over their own health
- reorienting services to promote better health.

Our operating model

INNOVATE

discovering how to accelerate outcomes for health promotion

INFORM

giving individuals and organisations the best information for healthier decisions

INTEGRATE

helping Victoria lead health promotion policy and practice

Our actions

- introducing cutting-edge interventions
- empowering through digital technologies
- undertaking pioneering research
- leveraging cross-sectoral knowledge
- utilising social marketing
- fostering public debate
- providing tools and resources
- developing strategic partnerships
- advancing best practice
- supporting policy development
- strategic investments and co-funding
- building capacity in individuals, communities and organisations

Our difference

We are proud of what sets us apart:

- a track record of delivering innovation
- an independent, trusted and credible voice
- investment in research to drive change
- connection with people where they live, learn, work and play
- a focus on a positive state of health.

Our origin

VicHealth is the world's first health promotion foundation, established in 1987 with funding from government-collected tobacco taxes and mandated to promote good health in the state of Victoria.

Our healthscape

Social, economic, environmental, technological and demographic trends are driving an epidemic of non-communicable chronic diseases globally. The Victorian Government is committed to addressing the social determinants of health and their unequal distribution across the population, as evidenced by:

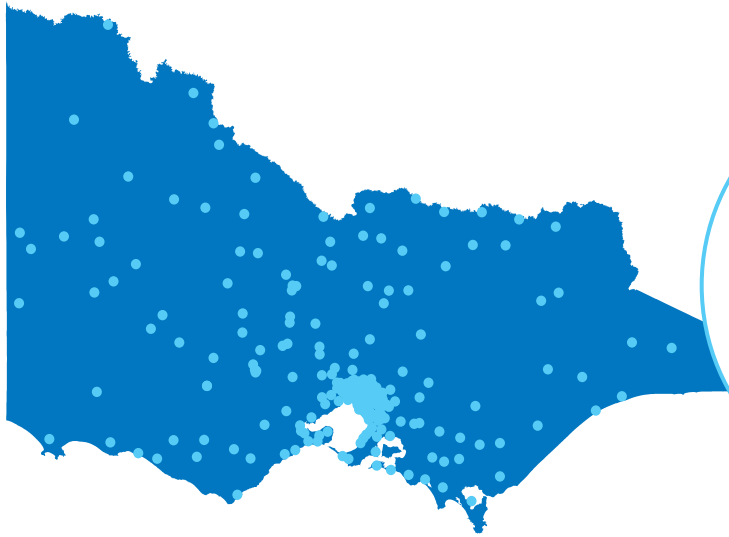
- the Victorian Public Health and Wellbeing Plan 2019–2023
- the Royal Commission into Victoria's Mental Health System
- the Royal Commission into Family Violence
- the *Hazelwood Mine Fire Inquiry report 2015/2016 – Volume III Health Improvement*.

VicHealth will prioritise action that advances women and explores new ways of working with communities to address disadvantage. Our status as a World Health Organization Collaborating Centre for Leadership in Health Promotion enables us to share Victoria's world-class health promotion nationally and internationally.

OUR COMMITMENTS: Fairness | Evidence-based action | Working with community | Partnerships across sectors

FAST FACTS

2019-2020



OUR REACH

VicHealth works in partnership with communities, organisations and individuals across Victoria to promote good health and prevent ill health.

EXPENDITURE ACROSS OUR STRATEGIC IMPERATIVES

\$14.1m



INCREASING PHYSICAL ACTIVITY

\$6.1m



PREVENTING TOBACCO USE

\$3.1m



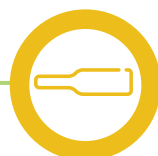
IMPROVING MENTAL WELLBEING

\$2.4m



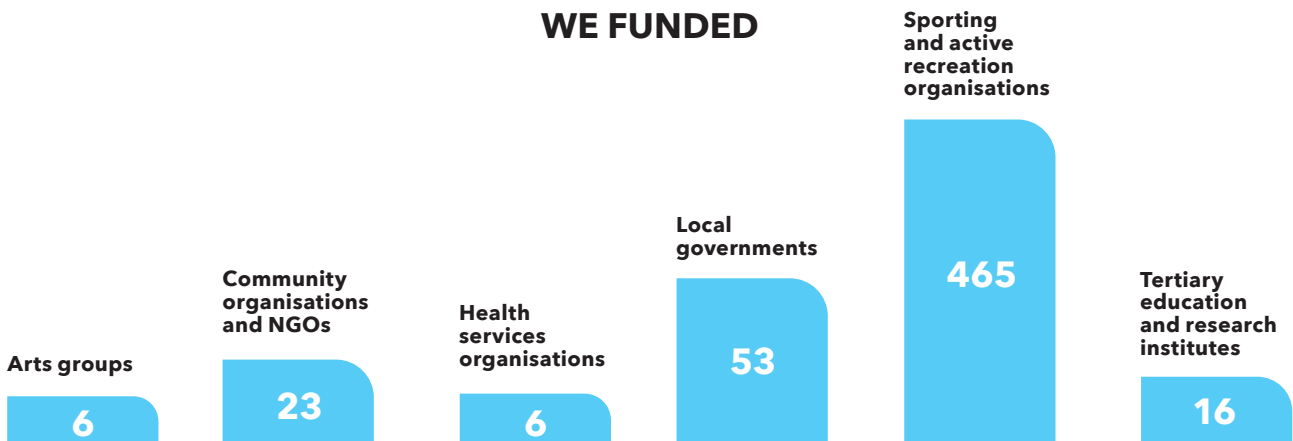
PROMOTING HEALTHY EATING

\$1.7m



PREVENTING HARM FROM ALCOHOL

WE FUNDED



SUPPORTING VICTORIANS DURING CORONAVIRUS

PROGRAM CHANGES MARCH-JUNE 2020

151 Stakeholders

ENGAGED IN CORONAVIRUS WORKING GROUPS



Research



Walking
& cycling



Food systems/
food security



Mental
wellbeing



Health
promotion

\$664,000 grant funding

DIVERTED TO COMMUNITIES AFFECTED BY BUSHFIRES AND CORONAVIRUS



Physical
Activity



Mental
Wellbeing



Healthy
Eating



Arts

CORONAVIRUS MESSAGING RESULTS MARCH-JUNE 2020



2,106

News media mentions



160,753

Facebook organic impressions



744,000

Twitter organic impressions



65,000

Be Healthy Blog views

18,348,939

Circulation reach

4,393,903

Social media paid impressions

9,247

Health Promotion Coronavirus
Resource Hub views

THIS GIRL CAN - VICTORIA: KEY ACHIEVEMENTS

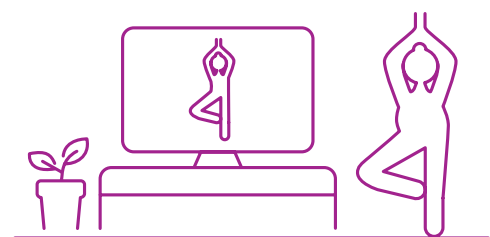
While the campaign was significantly impacted by the pandemic, This Girl Can – Victoria pivoted to continue supporting women to get active, resulting in the campaign's biggest impact to date.



MORE THAN

319,000 women got active

IN RESPONSE TO THE CAMPAIGN IN 2020



NEW GET ACTIVE @ HOME VIDEOS
WERE WATCHED MORE THAN

12,000 times

Operational and budgetary objectives and performance against objectives

Operational performance against budget

The total income for the year was \$41.4m and largely in line with the budgeted income of \$41.5m (down by \$0.1m).

Notable variations in income to budget reflect:

- a) The difference between the budgeted appropriation increase of 2.5 per cent compared to an actual appropriation increase of 2 per cent reflecting an unfavourable variance of (\$0.2m). Total appropriation income was \$41.2m.
- b) A reduction in SunSmart income reflecting DHHS paying Cancer Council Victoria directly (\$0.4m).
- c) An unfavourable variance of (\$0.1m) in interest income due to lower interest rates.
- d) Additional appropriation received for a childhood obesity campaign (\$0.4m).
- e) Additional appropriation for prevention investment (\$0.1m).
- f) Special grants of \$0.1m received for sports participation and Bystanders for Primary Prevention of Violence Against Women.

Total grant funding and program expenditure from appropriation was \$27.7 million, which was in line with the budget despite VicHealth needing to adjust its grant and program deliverables over the March–June 2020 period reflecting impacts on stakeholders, partners and grant recipients as a result of the coronavirus pandemic.

Wages and on-costs of \$9.9 million were \$0.4 million (or 4 per cent) above the budget due to five unbudgeted redundancy/termination payments to staff, three additional staff positions, working from home allowances during the coronavirus pandemic, and temporary staff resources in the areas of our new ICT platform's change management and major ICT server and software upgrades prior to cutover to VicHealth's new ICT platform, known as Phoenix.

In respect to wages and on-costs, most notably, and in line with Victorian Government reporting according to Australian accounting standards, all of VicHealth's employee expenses are disclosed in the Financial Statements as a separate expense within total expenses. The reporting of employee expenses as a single item does not adequately reflect the role of VicHealth staff in contributing to health outcomes for the Victorian community. If staff costs associated with health promotion delivery were added to grant funding and program costs, the overall proportion of VicHealth's operating result delivering health and wellbeing outcomes would be in the order of \$35m in 2019–20, approximately 85 per cent of the total appropriation from DHHS.

Operating costs including depreciation and amortisation of \$3.1 million were \$0.8 million below budget due to: favourable employee development and wellbeing costs of \$0.1m primarily reflecting training costs, conference costs and personal development course costs being down due to the impact of the coronavirus pandemic; and favourable consultancy costs of \$0.6m primarily reflecting lower Phoenix consultancy costs of \$0.2m due to delays related to the coronavirus pandemic and lower than budgeted general consultancy costs of \$0.4m as a result of a focus by management on significantly reducing costs in 2019–20.

The comprehensive result for the year was a deficit of \$34,000 from general appropriation funded activities offset by a surplus of \$27,000 from special purpose funded activities, resulting in a net deficit comprehensive result of \$7,000 for the year. This deficit has resulted from timing differences in the receipt and expenditure of special appropriations or other grants to deliver specific programs, which are often received upfront and recognised as revenue with the delivery of the program occurring over subsequent and/or multiple financial years. Special purpose funding where programs have not yet been delivered is captured in reserves on the balance sheet.

Our operating budget performance is summarised in Table 1.

Table 1: Operational performance against budget for 2019–20

	Appropriation funds		Special purpose funds		Total	
	Actual (\$'000)	Budget (\$'000)	Actual (\$'000)	Budget (\$'000)	Actual (\$'000)	Budget (\$'000)
Income						
Appropriation	41,168	41,229	0	0	41,168	41,229
Other income	119	206	104	25	223	231
Total income	41,287	41,435	104	25	41,391	41,460
Grants & direct project implementation	28,315	28,539	77	25	28,392	28,564
Employee expenses						
– Health promotion delivery	7,753	7,465	0	0	7,753	7,465
– Management & support	2,187	2,106	0	0	2,187	2,106
Operating costs	3,066	3,844	0	0	3,066	3,844
Total expenses	41,321	41,954	77	25	41,398	41,979
Operating surplus/(deficit)	(34)	(519)	27	0	(7)	(519)

Under section 33 of the *Tobacco Act 1987*, the budget of VicHealth must provide for payments to sporting bodies (not less than 30 per cent) and to bodies for the purpose of health promotion (not less than 30 per cent). These important statutory requirements were both achieved.

The VicHealth Board also sets the following guidelines on grant expenditure for the financial year. These targets,

among other criteria, are used to guide the level of investment in each strategic imperative and in research and evaluation. The statutory objective of payments to sporting bodies is a key reason VicHealth's expenditure on physical activity is significantly higher than on other imperatives.

Our performance against these targets is summarised in Table 2.

Table 2: Performance against statutory and VicHealth Board policy expenditure targets⁽ⁱ⁾

Performance measures	2019–20 minimum or guideline	2019–20 budget (\$'000)	2019–20 actual	2019–20 amount (\$'000)
Statutory expenditure target⁽ⁱⁱ⁾				
Sporting bodies	At least 30%	12,812	32.9%	13,546
Health promotion	At least 30%	14,909	33.7%	13,866
Board policy expenditure guideline⁽ⁱⁱⁱ⁾				
Promote healthy eating	5%	2,274	5.9%	2,416
Encourage regular physical activity	21%	13,670	34.2%	14,086
Prevent tobacco use	13%	5,427	14.9%	6,147
Prevent harm from alcohol	5%	2,097	4.0%	1,651
Improve mental wellbeing	8%	3,728	7.6%	3,111
Research and evaluation ^(iv)	12%	6,318	10.8%	4,434

Notes:

- (i) Percentage figures are calculated as expenditure as a proportion of our budgeted government appropriation for the financial reporting period. For the 2019–20 financial year our budgeted appropriation was \$41.2 million. Figures exclude payments sourced from special purpose funds unless otherwise indicated.
- (ii) Spend against statutory expenditure targets is not exclusive of spend against the Board's policy targets. Expenditure coded against the statutory targets is also coded against the Board's expenditure targets. Expenditure on 'health promotion' in this instance is defined as total grant payments less grant monies issued to sporting bodies.

- (iii) Underspends in several strategic imperative areas against the Board policy expenditure guideline reflected impacts to spend allocation caused by the coronavirus pandemic.
- (iv) The research and evaluation figure may include expenditure allocated to other statutory and Board expenditure categories.

5-year financial summary

Table 3: 5-year financial summary

	2020 (\$'000)	2019 (\$'000)	2018 (\$'000)	2017 (\$'000)	2016 (\$'000)
Operating statement					
Revenue from government	41,272	40,505	39,863	38,558	38,305
Other income	119	222	226	215	256
Total income	41,391	40,727	40,089	38,773	38,561
Grants and funding	28,392	28,819	26,596	27,455	26,451
Employee expenses ⁽ⁱ⁾	9,940	8,832	8,964	7,782	8,149
Operating costs	3,066	3,263	2,803	3,115	2,994
Total expenses	41,398	40,914	38,363	38,352	37,594
Net surplus/(deficit) for the period	(7)	(187)	1,726	421	967
Balance sheet					
Total assets	8,774	8,105	7,935	5,987	5,494
Total liabilities	3,311	2,635	2,279	2,057	1,985
Total equity	5,463	5,470	5,656	3,930	3,509

Note:

- (i) Approximately 78% of VicHealth's staffing relates to health promotion delivery, with the remainder providing overall management and support (Corporate Services).

Major changes affecting performance

Total income was \$41.4 million, an increase of \$0.7 million compared to the \$40.7 million received in 2018–19, primarily due to a 2 per cent indexation of the appropriation received under the Act. Additionally, VicHealth was provided with special purpose funding to deliver projects such as Bystanders for Primary Prevention of Violence Against Women.

Total expenses were \$41.4 million, an increase of \$0.5 million. Expenditure on grants and funding of \$28.4 million decreased by \$0.4 million since last year reflecting the impact of the coronavirus pandemic on stakeholders, partners, grant recipients and events in the last quarter of 2019–20.

Employee expenses and other operating costs have increased by \$0.9 million primarily due to five unbudgeted redundancy/termination payments to staff, three additional staff positions, working from home allowances during the coronavirus pandemic, and temporary staff resources in the areas of our new ICT platform's change management and major ICT server and software upgrades prior to cutover to VicHealth's new ICT platform, known as Phoenix.

Refer Note 3 Expenses from Transactions on page 55 and 56 within the Financial Statements for 2019–20.

Significant changes in financial position during the year

The value of total assets is \$8.8 million, an increase of \$0.7 million reflecting Phoenix work-in-progress and the recognition of right of use assets under the new Accounting Standard AASB116 Leases. VicHealth's cash balances are \$6.4 million down from \$7.0 million in the year prior reflecting VicHealth's investment in its new ICT platform Phoenix.

Receivables have increased from \$0.7 million to \$0.8 million, mainly due to the value of GST credits receivable from the ATO.

Liabilities are \$3.3 million with the increase of \$0.7 million mostly relating to recognition of right of use liability under the new Accounting Standard AASB116 Leases.

Subsequent events

VicHealth's lease at 15-31 Pelham Street, Carlton, ends in March 2021. Accordingly, VicHealth has included in its 2020–21 budget maintenance costs related to the end of lease for 15–31 Pelham Street as well as capital costs associated with a refurbishment/fit-out of VicHealth's future accommodation.

VicHealth through its core system replacement project implemented its new \$2.1 million grants, stakeholder and project management system known as Phoenix in late July 2020. The new system will see new ways of delivering enhancements in efficiency and effectiveness of VicHealth's grant, stakeholder and project management.

Granting of funds

As part of its core business, VicHealth has continued to provide assistance to organisations to deliver program outputs against our strategic framework, through the granting of funds for health promotion and prevention purposes. Grant expenditure includes health promotion expenditure such as programs, funding rounds, research grants, campaigns and directly associated activities.

Significant grant expenditure is defined as:

- any grant funding round where payments to successful organisations total \$250,000 or more during the financial reporting period
- single projects where payments to the organisation total \$250,000 or more during the financial reporting period.

Details of significant grant funding rounds are provided in Table 4.

Table 4: Grants⁽ⁱ⁾ with payments totalling \$250,000 or more during the reporting period

Funding round	No. of organisations receiving payments	Payments (\$'000)
2018 Impact Research Funding Rounds	3	314
Active Club Grants (2019–21)	419	1,348
Active Women and Girls – Participation	12	1,162
Alcohol and Drug Foundation (2019–21): Local government capacity building	1	316
Alcohol Culture Change Grants Initiative (2016–19)	13	429
Arts Strategy 2019 to 2023	18	981
Bystanders for Primary Prevention of Violence Against Women	4	319
Growing Participation in Sport Program (2018–21)	25	2,036
Leading Thinkers: Gender Equality	9	273
Men's Risky Drinking Initiative	5	289
New COVID cycling and walking program	6	303
Quit Victoria (2016–19)	1	2,347
Quit Victoria (2020–23)	1	3,475
Regional Sport Program (2018–21)	13	2,396
Salt Partnership	5	312
This Girl Can (Phase 1)	67	3,896
VicHealth Innovation Challenge: Sport (2019–21)	16	468
Vicsport – Partnership (2019–21)	1	470
Victoria Walks	1	350
Walk to School 2018–2020	9	297
Water Initiative (2017–20)	12	428

Note:

- (i) The table relates to payments made during the financial year. The funding or grant round may have been awarded in a previous year or the current year and/or may be part of a multi-year funding agreement.

Details of significant project payments to individual organisations are provided in Table 5.

Table 5: Organisations receiving grant payments totaling \$250,000 or more during the reporting period

Organisation name	Project name(s)	Payments (\$'000)
Alcohol and Drug Foundation	Alcohol and Drug Foundation (2019–21): Local government capacity building	316
Cancer Council Victoria	Quit Victoria (2016–19) Quit Victoria (2020–23) SunSmart Program (2019–23) Obesity Policy Coalition 2019–21 Alcohol Legal Capacity – CCV Alcohol Commissioned Research	6,261
Deakin University	2018 Impact Research Grant Water Initiative (2017–20) Alcohol Culture Change Grants Initiative (2016–19) 2016 ARC & NHMRC Research Partnership Grant 2017 ARC & NHMRC Research Partnership Grant 2018 ARC & NHMRC Research Partnership Grant Promoting Healthy Food in Sport (2019–21) UNICEF – Child Obesity Unhealthy Marketing to Kids Bright Futures Challenge 2017 Innovation Research Grant	455
Football Federation Victoria	Active Women and Girls – Participation Growing Participation in Sport Program (2018–21) VicHealth Innovation Challenge: Sport (2019–21)	460
GippSport	Regional Sport Program (2018–21)	415
La Trobe University, Bundoora Campus	This Girl Can (Phase 1) Active Women and Girls – Participation Growing Participation in Sport Program (2018–21) Regional Sport Program (2018–21) Alcohol Culture Change Grants Initiative (2016–19) Consultation for VicHealth Indicators VicHealth Innovation Challenge: Sport (2019–21) Men’s Risky Drinking Initiative Active Club Grants (2019–21) VicHealth Innovation Challenge: Physical Activity (2015–17) Health Equity Resources for Partnership Grants	1,080
Leisure Networks	Regional Sport Program (2018–21) VicHealth Innovation Challenge: Sport (2019–21) VicHealth Innovation Challenge: Physical Activity (2015–17)	307
Mediacom	This Girl Can (Phase 1)	528

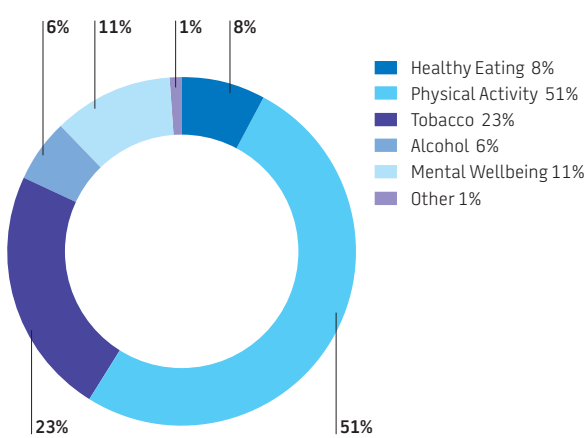
Organisation name	Project name(s)	Payments (\$'000)
Monash University	2018 Impact Research Grant Men's Risky Drinking Initiative 2017 ARC & NHMRC Research Partnership Grant Healthy Masculinities Cultures of Care Supporting local government planning New COVID cycling and walking program PHD Students (GRIP Behaviour Change) Alcohol and Gambling 2017 Innovation Research Grant Pride Game 2018–2021	428
The Behavioural Insights Team	Bystanders for Primary Prevention of Violence Against Women	310
The Shannon Company	This Girl Can (Phase 1) COVID-19 Communications	1,195
The University of Melbourne	Arts Strategy 2019 to 2023 Lancet Research Fellow Sustainable Development Goals Research Project Research funding grant 2017 ARC & NHMRC Research Partnership Grant 2016 ARC & NHMRC Research Partnership Grant Salt Partnership Leading Thinkers Evaluation Youth Engagement Project Leading Thinkers: Gender Equality PHAA VicHealth Scholarship Bystanders for Primary Prevention of Violence Against Women PVAW Integration/Gender Equality	592
Touch Football Australia – Victorian Branch	Active Women and Girls – Participation Growing Participation in Sport Program (2018–21)	285
VicSport	Vicsport – Partnership (2019–21) PASHE – Special Projects	405
Victoria Walks Inc	Victoria Walks Walk to School 2018–2020 Victoria Walks & Parks Victoria	385
Victorian Cricket Association trading as Cricket Victoria	This Girl Can (Phase 1) Active Women and Girls – Participation	311
Western Bulldogs Football Club	This Girl Can (Phase 1) Sons of the West 2019 and 2020 (Footscray Football Club)	253

The following graphs (1–5) represent the proportion of our total grants and funding expenditure of \$28.4 million during the financial year.

Strategic imperatives

VicHealth’s expenditure aligns with our five strategic imperatives. The major proportion of our grants and funding is related to encouraging more Victorians to engage in physical activity (\$14.1 million), largely due to the statutory requirement to spend at least 30 per cent of our appropriation with sporting bodies (Graph 1: Expenditure by strategic imperative). Over \$6.1 million was invested to encourage more Victorians to be tobacco-free, largely in our long-term partnership with Cancer Council Victoria to deliver the Quit program. A shift in strategic imperatives has occurred in 2019–20 compared to the prior year as VicHealth focused on responding to the impacts of the coronavirus pandemic during the second half of 2019–20.

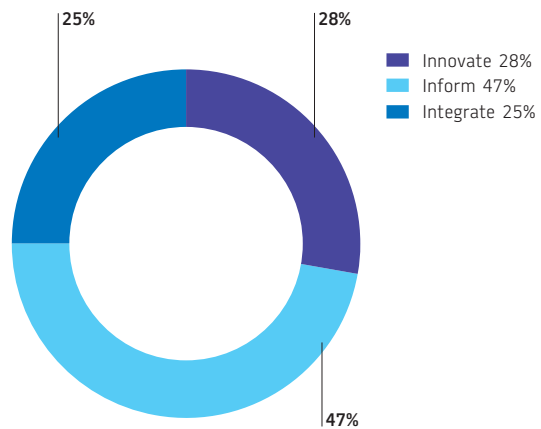
Graph 1: Expenditure by strategic imperative



Operating model

VicHealth’s operating model covers three pillars: Innovate, Inform and Integrate. Graph 2: Expenditure by operating model indicates VicHealth’s 2019–20 investments in driving new ways to address our health priorities (Innovate); instigating action, deploying new ideas and broadening our impact (Inform); and embedding proven interventions in the preventive system (Integrate). A key component of Inform is communicating ideas, learnings and key messages to our stakeholders and broader audiences – this includes consumer-facing work undertaken through the Quit program and the *This Girl Can – Victoria* campaign. Inform has also been a significant focus during the coronavirus pandemic in order to keep Victorians safe and healthy.

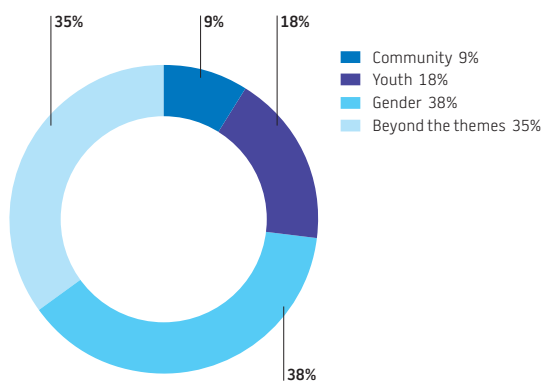
Graph 2: Expenditure by operating model



Key themes for action

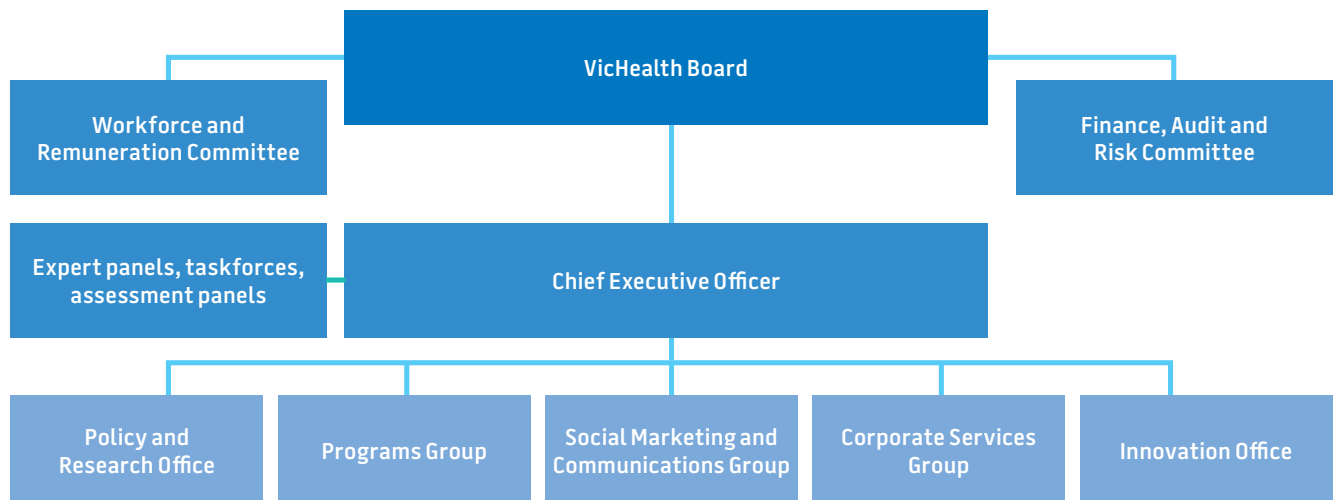
In addition to the five strategic imperatives, VicHealth actively considers three themes: gender, youth and community. The 2019–20 investment reflects a strong gender equality focus, including investment in the Active Women and Girls program (sports) and the *This Girl Can – Victoria* campaign (Graph 3). There has also been a strong focus on informing all Victorians during the coronavirus pandemic.

Graph 3: Expenditure by key themes for action



Section 2: VicHealth organisation structure, culture, capability and capacity

VicHealth organisation structure



The key function of each of the groups/offices is outlined as follows.

Policy and Research Office

Ensure VicHealth's research and policy development add value to health promotion practice and the public policy process to deliver sustained health benefits for Victorians.

Programs Group

Design and execute program investment, grants, funding rounds, research and partnership activities to maximise outcomes of the Action Agenda for Health Promotion.

Social Marketing and Communications Group

Develop and deliver organisational marketing and communications strategies, including branding, social marketing campaigns, communications, publications and events to enhance VicHealth's unique brand and reputation.

Corporate Services Group

Provide the finance, facilities and administration, business planning, information technology and information management, people and culture functions, business improvement and project management, and manage the governance framework to support the work of VicHealth.

Innovation Office

Trial the strategies, approaches, insights and collaborations that discover how to accelerate health outcomes in a rapidly changing world.

Executive Management

The following people held executive management positions as at 30 June 2020:

Chief Executive Officer
Dr Sandro Demaio

Executive Manager, Programs Group
Ms Kirstan Corben

Executive Manager, Corporate Services Group
Mr Paul Crapper

Acting Executive Manager, Social Marketing and Communications Group
Ms Melanie Fineberg

Executive Lead, Policy and Research Office
Ms Kellie Horton

Executive Lead, Innovation Office
Ms Nithya Solomon

Social Marketing & Communications Advisor
Mr Phillip Wade

Employee Committees

VicHealth has several cross-organisational employee committees or groups to assist management in operations:

- Diversity and Inclusion Committee
- Employee Wellbeing and OHS Committee
- Enterprise Agreement Group
- Executive Management Team
- Incident Management Team
- Management Team

In addition to these formal groups, there are a range of other cross-functional groups in operation.

Core Systems Replacement Project

VicHealth identified the need for significant investment in its ageing ICT applications to ensure our systems meet the requirements of VicHealth and other stakeholders and to facilitate the management of health promotion grants and activities and decision-making.

A business case was made following an assessment of whether VicHealth's ageing core ICT and business systems meet VicHealth's current and anticipated future business requirements, and the indicative cost to replace these systems, during the 2017–18 financial year. The Board approved this business case and gave approval to proceed with the procurement phase of the project.

During 2019–20 at a cost of \$2.1 million, VicHealth's new grants, stakeholder and project management system known as Phoenix has been developed to VicHealth's identified business requirements. The system was subsequently cutover in mid-July 2020 following full training and user acceptance testing. The system was fully funded from VicHealth's cash reserves and despite being delayed 3 months due to the impacts on face-to-face system training caused by the coronavirus pandemic, the system was delivered on budget.

Supporting the implementation of the new core system is the delivery of a range of business improvement projects in the areas of project planning, delivery, monitoring, human resource management, recording and reporting associated with VicHealth's grants and programs' key business processes and procedures. Integrated with the new system, these business improvement projects will deliver efficient and effective new ways of working.

Carbon Emissions Project

To align with VicHealth's Environmental Management Policy, management engaged our internal auditors and commercial advisors RSM to assist with analysing and measuring VicHealth's carbon emissions by delivering a report on VicHealth's Carbon Emissions Inventory and Reduction Strategy. We seek to understand the environmental aspects and impacts of our activities, how we might change the way we operate and achieve carbon neutral certification by 30 June 2021.

RSM identified that 93 per cent of VicHealth's emissions (1,219.40 tCO₂e) from 1 January 2019 to 31 December 2019 came from indirect sources within VicHealth's value chain.

Carbon neutral certification by 30 June 2021 is expected to be achieved following VicHealth's registration with Climate Active and through the purchase of Australian Carbon Credit Units during 2020–21.

VicHealth Board

The VicHealth Board members during the year were:

Mr Nick Green OAM, Chair (Chair 7 April 2020 – 30 June 2020)

Nick Green is an experienced leader who has worked in senior roles across global corporations, national sport and public-sector organisations. He is currently a senior Director and Industry Practice Leader at Aon, a global provider of risk management, insurance and professional services. Previous to this role, Mr Green was the Chief Executive Officer of Cycling Australia.

Mr Green has served as President of the Victorian Olympic Council from 2005 to 2016, an Executive Board Member of the Australian Olympic Committee (2005–2017), a Fellow and Director of Leadership Victoria (2014–2016) with further studies (science and governance) at the University of Melbourne (VCAH Burnley) and Melbourne Business School.

Mr Green has attended eight Olympic Games and was the Chef de Mission for the 2012 Australian Olympic Team. He was awarded the Order of Australia Medal and inducted into the Sport Australia Hall of Fame in recognition of his sporting achievements as a World and Olympic rowing champion, and founder partner of the Oarsome Foursome. Mr Green has been awarded life memberships of Victorian Olympic Council and Rowing Australia in recognition of his contribution.

Mr Green joined the Board of VicHealth in July 2014. He also serves on the Finance, Audit and Risk Committee.

Dr Sally Fawkes, Deputy Chair

Dr Sally Fawkes is a senior academic at La Trobe University, coordinating the Doctor of Public Health and post-graduate public health subjects. She holds a Bachelor of Science, Graduate Diploma in Health Education, Master of Business Administration (Health) and PhD in health policy. She has served on VicHealth's board since 2016, including as Chair (Acting) for periods in 2019 and 2020. Dr Fawkes is a long-standing technical advisor for the World Health Organization (WHO), contributing to health promotion and urban health/healthy cities policy initiatives in Western Pacific, European and Eastern Mediterranean regions. She was on faculty for WHO ProLEAD health leadership development program for over a decade. She is serving her fourth term on the International Network of Health Promoting Hospitals and Health Services Governance Board, and is Vice Chair.

Dr Fawkes' research, teaching and professional work emphasises the application of foresight/futures studies, systems thinking and health promotion to improve the effectiveness of public sector governance, strategy and programs. She has held positions at WHO Regional Office for Europe and leadership roles at Victorian Healthcare Association, Deakin University and several major hospitals. Previous board and committee appointments include Council of Academic

Public Health Institutions Australasia, Women's Health Victoria and community health services. Dr Fawkes is co-author of *Public Health Practice in Australia: The Organised Effort* (with Lin and Smith).

Ms Catherine Harding (1 March 2020 – 30 June 2020)

Catherine Harding is a qualified lawyer who has spent over 15 years working in social policy across the government, non-profit and corporate sectors across Australia. Her work has encompassed policy areas including justice, health, education, family violence, sport and human rights as an Associate Director at KPMG and in prior roles with the Victorian and Australian Governments.

Ms Harding is driven to find creative and innovative solutions to complex problems, and is experienced in setting organisational strategies to drive the growth and performance of organisations. She is also a passionate public health advocate, and has worked on healthy eating campaigns with The Good Foundation and Jamie Oliver.

Ms Harding has served as a non-Executive Director of Vicsport since 2018 and of Women's Health West since 2014.

Mr Ben Hartung (1 July 2019 – 30 September 2019)

Ben Hartung served on the Board of VicHealth from October 2016 to September 2019. He previously served on the Board of the Sports Federation of Victoria (Vicsport) from November 2012 to November 2017 as well as the Boards of Commonwealth Games Australia (CGA) and the Australian Commonwealth Games Foundation (ACGF) from March 2017 to November 2018.

Mr Hartung held various senior executive positions, including a period as Interim CEO, at Hockey Australia from 2014 to 2019, and with Sport and Recreation Victoria. He was the CEO of Hockey Victoria from 2008 to 2014, and prior to this was the Event Manager at the Australian Grand Prix Corporation. His more than 20 years' experience in sports administration and teaching also includes roles as a physical education and psychology teacher in secondary schools.

Thriving on continual education, Mr Hartung has completed a Bachelor of Arts, Graduate Diploma in Education, Graduate Diploma in Sports Science, Graduate Diploma of Sports Management, Master of Sport Management and a Graduate Diploma in Sports Law. He has also completed the Performance Leaders Program at the Australian Institute of Sport.

Sport has been a life-long passion for Mr Hartung and he has been actively involved in many sports as a player, coach and administrator for over 35 years.

Mr Hartung is committed to creating healthy, safe, welcoming and inclusive sporting and recreational environments for all.

Ms Fiona McCormack
(Chair 1 July 2019 – 7 April 2020)

Fiona McCormack is currently the Victorian Victims of Crime Commissioner and previously held the role of CEO Domestic Violence Victoria, the peak body for family violence services for women and children in Victoria.

During a career spanning more than 20 years, Ms McCormack has worked at the forefront of community change in Victoria, with a focus on changing systems to improve outcomes for women and children at risk of family violence and highlighting the impact of gender on population health outcomes.

Ms McCormack has provided advice to governments through a number of high profile advisory committees at a state and national level.

Internationally recognised as an expert in her field, she has presented at many high profile forums, including the Victorian Royal Commission into Family Violence as well as a number of Senate Committees and United Nations forums.

With a background in social sciences, Ms McCormack also has extensive experience in community health – particularly working with culturally and linguistically diverse communities – as well as education, training and policy development.

Ms McCormack served as Chair of the VicHealth Board from October 2016 to April 2020.

Dr Bridie O'Donnell

Dr Bridie O'Donnell is a medical doctor, champion cyclist and the first head of the Victorian Government's Office for Women in Sport and Recreation.

After competing in rowing and Ironman Triathlon, Dr O'Donnell began road cycling and raced in the Australian National Team, and then professional teams in Europe and the United States, from 2008 to 2012, representing Australia at three World Championships.

In 2013 she returned to Melbourne to work as a behaviour change physician at Epworth HealthCheck and the Epworth Breast Service, with a part-time role teaching doctor-patient communication at Deakin University Medical School.

From 2013 to 2016, Dr O'Donnell also managed and raced for Rush Women's Team, a National Road Series cycling team in Australia. In 2016, she became the first Australian woman to make an attempt on the UCI World Hour record in 15 years, setting a new world record of 46.882km at the Adelaide SuperDrome.

In November 2017, Dr O'Donnell was appointed the inaugural Head of the Office for Women in Sport and Recreation by the Victorian Government and in 2018 she published 'Life and Death – a cycling memoir' about her experiences as a professional cyclist in the international peloton.

In 2019 Dr O'Donnell commenced an Executive Master of Public Administration at the Australian & New Zealand School of Government, and is looking forward to graduating in 2020. She is a strong advocate for promoting gender equality and improving the health of the community through sport.

Ms Peggy O'Neal AO
(1 January 2020 – 30 June 2020)

Peggy O'Neal has specialised in superannuation and financial services law for more than 25 years and is presently a consultant to Lander & Rogers and was previously a partner at Herbert Smith Freehills from 1995 to 2009.

Ms O'Neal has been president of the Richmond Football Club since October 2013, having served on the Club's board since 2005. She is the first woman to be president of an AFL club. In 2018, she was appointed by the AFL as one of the 12 members of its inaugural Competition Committee which advises the AFL Commission on issues regarding the design and future of the AFL competition.

In 2014 she was appointed to chair the Victorian Minister for Sport's year-long Inquiry into 'Women and Girls in Sport and Active Recreation' and until 2018 was convenor of the Minister's Change Our Game Champions program.

In 2017, Ms O'Neal was appointed to Victoria's Ministerial Council on Women's Equality. Two years later, she was appointed to the Australian Institute of Sport Athlete Wellbeing and Engagement Advisory Committee, as well as the AFL's Mental Health Steering Committee.

Ms O'Neal holds senior board and advisory roles within the financial services sector. She is also on the board of Women's Housing Limited and on the investment advisory panel of Home for Homes (an initiative of the Big Issue).

She is a Fellow of the Australian Institute of Company Directors and is also a member of Chief Executive Women and the Melbourne Forum.

In 2019 she was made an Officer of the Order of Australia for her services to Australian rules football, financial services law and women in leadership roles. She has an honorary Doctor of Laws from Swinburne University.

Ms Veronica Pardo

Veronica Pardo is the CEO of Multicultural Arts Victoria, the state's leading organisation on diversity in the arts, having spent 10 years leading Arts Access Victoria with a focus on cultural participation by people with disability and those experiencing mental health issues.

Ms Pardo is an experienced leader who has led an ambitious agenda of social and artistic transformation in the creative industries. She has spearheaded campaigns relating to social justice, equity and the inclusion of all people in arts and culture, as audiences and cultural innovators.

Ms Pardo has held senior roles in the non-government sector and academia, leading significant research projects aimed at embedding meaningful and lasting change, towards equality.

Professor Anna Peeters

Professor Anna Peeters is Director of the Institute for Health Transformation and Professor of Epidemiology and Equity in Public Health at Deakin University. She is Past President of the Australian and New Zealand Obesity Society and sits on national and international advisory boards and steering committees. In 2014 she was awarded the World Obesity Federation Andre Mayer Award for research excellence in obesity and a Churchill Award for innovative work in improving the equity of population prevention initiatives.

Professor Peeters leads the NHMRC Centre of Research Excellence into Healthy Food Retail (RE-FRESH, 2018–2022) and is the recipient of an NHMRC Investigator Grant (2020–2025).

Ms Stella Smith

Stella Smith is the Chief Executive of Crime Stoppers Victoria and has previously held senior executive roles with Melbourne Victory Football Club and 'Life. Be in it' Australia. Ms Smith is also a Director of Blue Light Victoria and a 'Change Our Game' Ambassador through the Office for Women in Sport and Recreation.

Ms Smith has broad experience in community, government and stakeholder engagement, advertising and health promotion. Her experience spans commercial, sport and the not-for-profit sectors. Ms Smith has also previously held board positions with Women's Health East and the Melbourne Victory FC Academy and has considerable experience in community sporting organisations.

Ms Smith holds a Master of Marketing and Graduate Diploma of Business and is passionate about promoting gender equality, encouraging social inclusion and using sport to create greater opportunities for community engagement.

Mr Stephen Walter

(Leave of absence 1 July 2019– 31 December 2019)

Stephen Walter is a corporate affairs professional with over 35 years' experience in corporate communications, media and stakeholder relations, brand management, marketing, advertising and business development gained through the public and private sectors. He is currently Executive Director of Persuade Consulting, principally an international tennis management consultancy. Prior to this, he was Chief of Staff and Group General Manager, Corporate Public Affairs at Australia Post where he also served on the Executive Committee for a decade.

Mr Walter formerly held board memberships at the Australian Association of National Advertisers and RMIT Alumni Association. His community contributions include pro-bono work for Cottage by the Sea, a charity supporting disadvantaged children, and for the development of East Timor's visual arts community.

Ms Sheena Watt

Sheena Watt is a public health advocate and company director. Ms Watt, a proud Yorta Yorta woman, is a Board Member of the Victorian Council of Social Services, Women's Health Victoria, Merri Health and Progressive Public Health Australia.

Ms Watt is the Executive Manager, Aboriginal and Torres Strait Islander Policy & Programs for AFL SportsReady, a national not-for-profit that delivers employment and education for young people.

The Members of Parliament appointed to the Board are:

**Ms Sarah Connolly MP
(14 August 2019 – 30 June 2020)**

Sarah Connolly is a member of the Parliament of Victoria in the Legislative Assembly. She represents the multicultural district of Tarneit, located in Melbourne's outer west. Her Electorate of Tarneit sits within one of Australia's largest growth corridors.

Ms Connolly is a highly qualified policy and regulatory expert, community advocate and engagement specialist. Prior to entering politics, she worked for over a decade across the country on Australia's energy future. She has worked at the Australian Competition and Consumer Commission, Australian Energy Regulator and across public and privately owned energy networks.

Prior to that she worked in various areas of the criminal justice system, including the Department of Justice, Department of Public Prosecutions, as a Judge's Associate and in a law firm.

Ms Connolly holds a Bachelor of Laws from the University of Queensland and a Graduate Diploma of Legal Practice from the Queensland University of Technology.

**Mr Andy Meddick MP
(14 August 2019 – 30 June 2020)**

Andy Meddick is a social justice and animal rights campaigner and has dedicated many years to achieving positive change for animals. After standing as a candidate in Council, State and Federal elections, Andy was successfully elected as a Member of the Legislative Council for Western Victoria in the 2018 Victorian State Election.

Before being elected he spent many years working in the construction industry as a scaffolder, working on some of Melbourne's largest buildings.

Mr Meddick is passionate about healthy eating and the wellbeing of Victorians.

**Ms Bridget Vallence MP
(14 August 2019 – 30 June 2020)**

Bridget Vallence was elected as a Member of the Victorian Parliament on 24 November 2018 to represent the Evelyn District, and upon being sworn in to Parliament was appointed Shadow Cabinet Secretary and Shadow Assistant Minister for Industry.

In March 2020 Ms Vallence was promoted to the role of Shadow Minister for Environment & Climate Change and Shadow Minister for Youth on the Victorian Liberal Nationals front bench, portfolios that Ms Vallence believes are critical to our community and future prosperity.

Ms Vallence serves on the Parliament's Public Accounts and Estimates Committee (PAEC), which examines expenditure of public money to improve outcomes for the Victorian community.

Ms Vallence is passionate about helping people, volunteer groups and businesses in her local community to thrive. Ms Vallence lives in the Yarra Valley with her husband and two sons and is actively involved in her community, including at several local sporting clubs, community organisations and her son's primary school.

Prior to entering Parliament, Ms Vallence worked for 16 years in the automotive industry as a procurement executive in both the manufacturing and retail sectors in Australian, Asian and global markets, and is also experienced with organisational change and business transformation projects.

Ms Vallence holds a Bachelor of Arts and Bachelor of Commerce (Honours) from the University of Melbourne. In 2016, Ms Vallence was an inaugural fellow of the Melbourne School of Government Pathway to Politics Program for Women.

Table 6: VicHealth Board attendance register

Board	No. of meetings attended in 2019–20	Eligible meetings in 2019–20
Ms Sarah Connolly MP 14 August 2019 – 30 June 2020	1	5
Dr Sally Fawkes 1 July 2019 – 30 June 2020	6	6
Mr Nick Green OAM 1 July 2019 – 30 June 2020	5	6
Ms Catherine Harding 1 March 2020 – 30 June 2020	1	1
Mr Ben Hartung 1 July 2019 – 30 September 2019	2	2
Ms Fiona McCormack 1 July 2019 – 7 April 2020	3	5
Mr Andy Meddick MP 14 August 2019 – 30 June 2020	4	5
Dr Bridie O'Donnell 1 July 2019 – 30 June 2020	4	6
Ms Peggy O'Neal AO 1 January 2020 – 30 June 2020	1	2
Ms Veronica Pardo 1 July 2019 – 30 June 2020	6	6
Prof. Anna Peeters 1 July 2019 – 30 June 2020	6	6
Ms Stella Smith 1 July 2019 – 30 June 2020	6	6
Ms Bridget Vallence MP 14 August 2019 – 30 June 2020	2	5
Mr Stephen Walter ⁽ⁱ⁾ 1 July 2019 – 30 June 2020	2	2
Ms Sheena Watt 1 July 2019 – 30 June 2020	5	6
Mr Peter Moloney (Board advisor and Chair of Finance, Audit and Risk Committee)	6	6

(i) Mr Walter was on leave of absence from 1 July 2019 to 31 December 2019.

Finance, Audit and Risk Committee

The purpose of the committee is to assist the VicHealth Board with fulfilling its governance duties by ensuring that effective financial management, auditing, risk management and reporting processes (both financial and non-financial) are in place to monitor compliance with all relevant laws and regulations and ensure best practice. Table 7 lists the members on this committee and their attendance at meetings in the last financial year.

Table 7: Finance, Audit and Risk Committee members and attendance register

Finance, Audit and Risk Committee	No. of meetings attended in 2019–20	Eligible meetings in 2019–20
Mr Peter Moloney, Chair 1 July 2019 – 30 June 2020 Independent	5	5
Ms Joanne Booth 1 July 2019 – 30 June 2020 Independent	5	5
Ms Kerry Bradley 1 July 2019 – 15 November 2019 Independent	1	2
Mr Nick Green OAM 1 July 2019 – 30 June 2020 Board member	4	5
Ms Gaye Mason 12 February 2020 – 30 June 2020 Independent	2	2
Ms Stella Smith 1 November 2019 – 30 June 2020 Board member	3	4
Mr Adam Todhunter 1 July 2019 – 30 October 2019 Independent	1	1

Workforce and Remuneration Committee

The purpose of the committee is to provide strategic advice on workforce strategy and planning, remuneration, human resource policies and alignment of VicHealth's policies with relevant industrial relations and employment legislation and Victorian Government policies. Additionally, the committee reviews the CEO's performance and remuneration. Table 8 lists the members on this committee and their attendance at meetings in the last financial year.

Table 8: Workforce and Remuneration Committee members and attendance register

Workforce and Remuneration Committee	No. of meetings attended in 2019–20	Eligible meetings in 2019–20
Dr Sally Fawkes, Chair 1 July 2019 – 30 June 2020 Board member	3	3
Ms Fiona McCormack Deputy Chair 1 July 2019 – 7 April 2020 Board member	2	2
Mr Nick Green OAM Deputy Chair 7 April 2020 – 30 June 2020	1	1
Ms Veronica Pardo 2 October 2019 – 30 June 2020 Board member	2	2
Mr Stephen Walter ⁽ⁱ⁾ 1 July 2019 – 30 June 2020 Board member	1	1

(i) Mr Walter was on leave of absence from 1 July 2019 to 31 December 2019.

Core Systems Replacement Project Steering Committee

VicHealth established an internal Core Systems Replacement Project Steering Committee in 2018–19 to oversee the governance, procurement, development and implementation of VicHealth’s new \$2.1 million grants, stakeholder and project management system, which is replacing its ageing legacy systems. This committee has comprised internal leaders of VicHealth as well as external experts in IT governance, change management and the core systems provider. The committee reports to both the Executive Management Team and the Finance, Audit and Risk Committee and has been instrumental in 2019–20 in driving good governance in the development and delivery of the new system within budget to achieve VicHealth’s business requirements.

Advisory Governance Framework

The VicHealth Advisory Governance Framework outlines VicHealth’s decision-making processes regarding the provision of programs, research and grants. The principles provide VicHealth, stakeholders and the community with confidence that the processes are efficient, financially responsible and are meeting the objectives, policies and strategic plans of VicHealth.

The Advisory Governance Framework comprises distinct groups that make recommendations to the VicHealth CEO. These groups are established as required to examine specific health promotion and prevention issues, and consist of:

- expert panels – to examine key strategic matters that affect the pillars of the Action Agenda for Health Promotion
- taskforces – to investigate and provide operational and implementation advice on key strategic priorities and high-profile community health issues
- assessment panels – to determine funding recommendations and/or review major funding/grant, and/or procurement proposals.

During 2019–20 the following groups were convened:

Expert panels

Victorian Community Attitudes Survey Technical Advisory Group
VicHealth Partnership Grants Advisory Panel

Taskforces

Mental Wellbeing Taskforce
Alcohol Taskforce
Physical Activity Taskforce
Childhood Obesity Taskforce

Assessment panels

Active Club Grants Assessment Panel
Citizen Science Tender Assessment Panel
Obesity Policy Coalition Investment Review
Research Partnership Grants Assessment Panel
Victorian Community Attitudes Survey Assessment Panel
Victoria Walks Investment Review
Walk to School Investment Review

Other stakeholder groups convened

Alcohol Leadership Group
Arts Roundtable
Childhood Obesity Leadership Group
Healthy Eating and Active Living Roundtable
Local Government Health Planners Focus Group
Health Promotion Peak Agency COVID-19 Working Group
Mental Health COVID-19 Working Group
Health Promotion Research COVID-19 Working Group
Food Security/Food Systems COVID-19 Working Group
Walking and Cycling Post COVID-19 Working Group

In addition to these groups, VicHealth consulted with a range of other health experts and stakeholders on specific health promotion and prevention topics and projects.

Patron-in-Chief

VicHealth is pleased and honoured to have as its Patron-in-Chief, the Hon. Linda Dessau AC, Governor of Victoria.

Section 3: Workforce data

Occupational Health and Safety (OHS) management

VicHealth's Occupational Health and Safety (OHS) Policy demonstrates our commitment to the provision of a safe and healthy workplace.

VicHealth is committed to fostering and enshrining a culture within the organisation that values the importance of a healthy and safe work environment.

To further these aims, VicHealth has an established Employee Wellbeing and OHS Committee. This committee comprises staff from across the organisation to act as an employee consultation group by undertaking the following tasks and functions:

- providing an avenue for employee consultation relating to wellbeing and OHS
- promoting employee wellbeing and OHS
- delivering employee health and wellbeing activities/topics.

Our performance against key OHS indicators during the past two financial years is summarised in Table 9.

Table 9: Performance against OHS management measures

Measure	Indicator	2019–20	2018–19
Incidents	No. of incidents	2	1
	No. of hazards reported	1	0
Claims	No. of standard claims	0	0
	No. of lost time claims	0	0
	No. of claims exceeding 13 weeks	0	0
Claim costs	Average cost per standard claim ⁽ⁱ⁾	\$0	\$0

Note:

(i) Average cost per claim includes medical expenses only and does not include salary or wages.

Inclusion, diversity and equity principles

Our Equity, Diversity and Inclusion Policy demonstrates our commitment to creating and maintaining a positive working environment free of discrimination and harassment that provides equal opportunities for all and values diversity and inclusion.

In further support of this, VicHealth has established a Diversity and Inclusion Committee comprising employee representatives from across the organisation.

Innovate Reconciliation Action Plan

Reflective of VicHealth's focus on supporting First Nations people, a major project and deliverable of the Diversity and Inclusion Committee during 2019–20 was the development and finalisation of an Innovate Reconciliation Action Plan (RAP), VicHealth's second RAP. VicHealth was pleased to achieve conditional endorsement of its Innovate RAP from Reconciliation Australia in May 2020, prior to achieving VicHealth Board approval in July 2020, with final endorsement by Reconciliation Australia expected in the first half of 2020–21.

Public administration values and employment principles

VicHealth continues to implement the directions of the Commissioner for Public Employment relating to upholding public sector conduct, managing and valuing diversity, managing underperformance, reviewing personal grievances and selecting on merit.

VicHealth regularly reviews its suite of detailed employment policies, including policies relating to grievance resolution, recruitment, performance management, learning and development, management of conflicts of interest and gifts, benefits and hospitality.

In support of the above, VicHealth continues to embed its staff-driven Employee Culture Charter. The Charter outlines four principles that set the cultural and professional standards to which we all commit and expect other employees to demonstrate. The four principles are: Trust, Challenge, Accountability and Results. At the end of the year, peer-based recognition is awarded to staff members who best demonstrate these principles.

VicHealth workplace

VicHealth strives to be an employer of choice by implementing various strategies to provide employees with rewarding and challenging careers, offer workplace flexibility and provide a workplace that embraces a diverse and inclusive culture. This is reflected in VicHealth's People Strategy, a 3-year plan that identifies and sets out initiatives on the ways VicHealth will support, develop and enhance each of the three enablers of Culture, Capability and Capacity.

The People Matter Survey that VicHealth participates in annually has been postponed for 2020 by the Victorian Public Sector Commission in response to the coronavirus pandemic. While it may take place later in the year its postponement means VicHealth does not currently have available staff satisfaction and engagement results for 2020. Following the first 6 months of the People Strategy being delivered, the most recent 2019 results showed an upward trend in VicHealth's results and that VicHealth's results are better overall than the VPS average. We scored 81 per cent on overall engagement (up from 76 per cent in 2018) and 73 per cent on overall satisfaction (up from 72 per cent in 2018). With the delivery of People Strategy initiatives continuing across the 2020 financial year VicHealth has no reason to believe that this upward trend would not have continued.

Workforce data

Table 10 describes the profile of VicHealth's workforce.

Table 10: Workforce data

	All employees				Ongoing						Fixed term & casual			
	Number (HC)		FTE		Full-time (HC)		Part-time (HC)		FTE		Number (HC)		FTE	
	2020	2019	2020	2019	2020	2019	2020	2019	2020	2019	2020	2019	2020	2019
Gender														
Male	16	17.0	15.1	16.5	13.0	13	2.0	3	14.7	15.5	1.0	1	0.4	1
Female	62	59.0	55.2	50.7	26.0	25.0	22.0	23	42.4	41.5	14.0	11	12.8	9.2
Self-described	0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
Age														
15–24	0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
25–34	19	18	18.2	17.2	11.0	11	1.0	2	11.6	12.4	7.0	5	6.6	4.8
35–44	31	31.0	26.8	26.4	14.0	15.0	12.0	11.0	22.8	22.6	5.0	5	4.0	3.8
45–54	20	17	18.2	14.6	10.0	6	8.0	9	16.4	13	2.0	2	1.8	1.6
55–64	7	10.0	6.3	9.0	4.0	6.0	2.0	4	5.5	9.0	1.0	0	0.8	0
65+	1	0	0.8	0	0.0	0	1.0	0	0.8	0	0.0	0.0	0.0	0.0
VicHealth EA														
Grade A	3	2	2.3	1.6	0.0	0	3.0	2	2.3	1.6	0.0	0	0.0	0
Grade B	1	1	0.6	.6	0.0	0	1.0	1	0.6	.6	0.0	0	0.0	0
Grade C	11	10	10.6	9.4	6.0	7	0.0	2	6.0	8.4	5.0	1	4.6	1
Grade D	35	37	31.7	33.2	17.0	19	12.0	12	25.9	27.8	6.0	6	5.8	5.4
Grade E	22	21	20.0	17.7	13.0	9	6.0	7	17.6	13.9	3.0	5	2.4	3.8
Grade F	0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
Total VicHealth EA (A–F Grade)	72	71	65.2	62.5	36	35	22.0	24	52.4	52.3	14.0	12	12.8	10.2
Senior employees														
Executives	6	5.0	5.1	4.7	3.0	3	2.0	2	4.7	4.7	1.0	0.0	0.4	0.0
Total senior employees	6	5.0	5.1	4.7	3.0	3	2.0	2	4.7	4.7	1.0	0.0	0.4	0.0
Total other	0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0
Total employees	78	76.0	70.3	67.2	39.0	38	24.0	26	57.1	57	15.0	12	13.2	10.2

Notes:

Executives includes the Accountable Officer (CEO) as well as the Social Marketing and Communications Advisor who has been appointed on a short-term executive contract to perform several projects.

All workforce data figures reflect active employees in the last full pay period of June of each year.

'Ongoing employees' means people who were active in the last full pay period of June who are engaged in an open-ended contract of employment and executives engaged on a standard executive contract unless they are employed for discrete projects.

'FTE' means full-time staff equivalent. 'HC' means headcount.

The headcounts exclude those persons on leave without pay or absent on secondment, external contractors or consultants, temporary staff employed by employment agencies, and a small number of people who are not employees but appointees to a statutory office, as defined in the *Public Administration Act 2004* (e.g. persons appointed to a non-executive board member role, to an office of Commissioner, or to a judicial office).

Executive officer data

An executive officer is defined as a person employed as a public service body head or other executive under Part 3, Division 5 of the *Public Administration Act 2004*. All figures reflect employment levels at the last full pay period in June of the current and corresponding previous reporting year.

Table 11 outlines the number of executives (including the Accountable Officer) employed in the last pay period in June. The table does not include employees in acting executive arrangements.

Table 11: Breakdown of executive officers

	June 2020				June 2019			
	Male	Female	Self-described	Vacancies	Male	Female	Self-described	Vacancies
Chief Executive Officer	1	0	0	0	0	1	0	0
Executive Managers	2	3	0	1	2	3	0	0
Total	3	3	0	1	2	4	0	0

Table 12: Reconciliation of executive numbers

		2019–20	2018–19
	Executives with remuneration over \$100,000*	5	5
<i>Add</i>	Vacancies (Table 11)	1	0
	Executives employed with total remuneration below \$100,000	0	0
	Accountable Officer (Chief Executive Officer)	1	1
<i>Less</i>	Separations	1	0
	Total executive numbers at 30 June	6	6

A summary of executive remuneration is contained in the Financial Statements (Note 8.5).

Executive remuneration is based on full-time annualised salary; however, it should be noted that as per Table 10, three of the five executives are contracted to part-time hours ranging from 0.4 FTE to 0.9 FTE. This includes the Social Marketing and Communications Advisor who has been appointed on a short-term executive contract, with the short-term role to cease when the Executive Manager Social Marketing and Communications vacancy is filled.

The role of Acting Chief Executive Officer was held by Dr Lyn Roberts AO for the period 30 June 2019 to 22 September 2019. Dr Sandro Demaio was CEO for the period 23 September 2019 to 30 June 2020. Dr Roberts was remunerated as a consultant during her tenure as Acting Chief Executive Officer, whereas Dr Demaio is remunerated as an executive employee under a Public Service Executive contract.

Supporting the Department of Health and Human Services (DHHS) in the response to COVID-19 two executive staff members were seconded to DHHS in the latter part of the financial year.

Dr Sandro Demaio, CEO, was seconded as Deputy Public Health Commander (Public Information) with the COVID-19 Department Incident Management Team for 2 days a week from 16 April 2020 to 17 June 2020.

Nithya Solomon, Executive Lead, Innovation Office was seconded as Private Pathology Deputy Lead with the COVID-19 Project Management Office for 2 days a week from 14 May 2020 to 31 July 2020.

Dr Sandro Demaio, CEO was offered an appointment as an Adjunct Associate Professor in the Institute for Health Transformation, Faculty of Health at Deakin University in May 2020.

Kirstan Corben, Executive Manager, Programs was offered an appointment as an Honorary Fellow in the Institute for Health Transformation, Faculty of Health at Deakin University in May 2020.

Section 4: Other disclosures

Consultancies

Table 13 details the consultancies valued at more than \$10,000 that were engaged in the last financial year.

Table 13: Details of consultancies over \$10,000 (excluding GST)

Consultant	Purpose of consultancy	Total approved project fee (\$'000)	2019–20 actual expenditure (\$'000)	Future expenditure (\$'000)
Corvus Group	Human resources consulting services	73	73	-
LR Associates	Business consulting services	82	82	-
Wise Technology Management	Business/systems consulting services	24	24	-
Our Very Own	Business/systems consulting services	24	24	-
The Anderson Partnership	Business consulting services	17	17	-
Victorian Government Solicitor's Office	Legal services	29	29	-

Note: Consultancy agreements cover the period 1 July 2019 to 30 June 2020. Unless otherwise indicated, there is no ongoing contractual commitment to these consultants. These consultants may be engaged beyond June 2020 as required.

Consultants disclosed in this table exclude consultants engaged under a VicHealth grant or funding agreement.

Details of consultancies under \$10,000

In 2019–20, there were 12 consultancies where the total fees payable to the consultants was less than \$10,000. The total expenditure incurred during the financial year in relation to these consultancies was \$61,000 (excluding GST).

Information, communication and technology (ICT) expenditure

Details of ICT expenditure during the financial year were:

Table 14: ICT expenditure during 2019–20 (excluding GST)

Expenditure	(\$'000)
Business as Usual ICT expenditure	1,371
Non-Business as Usual ICT expenditure Total = A + B	1,650
Non-Business as Usual Operational expenditure A	769
Non-Business as Usual Capital expenditure B	821

Advertising expenditure

In the last financial year, VicHealth delivered one campaign for which the media expenditure was greater than \$100,000 (see Table 15).

Table 15: Advertising expenditure exceeding \$100,000 during 2019–20 (excluding GST)

Campaign	
Name of campaign	This Girl Can – Victoria
Campaign summary	A statewide mass media campaign – including sports sponsorships and local area government funding – aimed at increasing physical activity and supporting gender equality. This campaign aims to empower women to be active however, whenever and wherever they want.
Start/end date	1/03/2020 – 30/6/2020
Advertising (media) (\$'000)	\$584
Creative and campaign development (\$'000)	\$1,143
Research and evaluation expenditure (\$'000)	\$309
Other campaign expenditure (\$'000)	\$1,895

Compliance with the *Building Act 1993*

VicHealth does not own or control any government buildings and consequently is exempt from notifying its compliance with the building and maintenance provisions of the *Building Act 1993*.

Freedom of Information

The *Freedom of Information Act 1982* allows the public a right of access to documents held by VicHealth. Information is available under the *Freedom of Information Act 1982* by contacting the following person:

Information Coordinator
Victorian Health Promotion Foundation
15–31 Pelham Street
Carlton VIC 3053
Phone: (03) 9667 1333

Additional information about how to lodge an FOI request is available from the VicHealth website:
<https://www.vichealth.vic.gov.au/about/policies-and-procedures/freedom-of-information-policy>

VicHealth received one Freedom of Information request in the reporting period, which resulted in the release of requested documentation.

Compliance with the *Protected Disclosure Act 2012*

The *Protected Disclosure Act 2012* (replacing the repealed *Whistleblowers Protection Act 2001*) encourages and assists people to make disclosures of improper conduct by public officers and public bodies. This Act provides protection to people who make disclosures in accordance with the Act and establishes a system for the matters disclosed to be investigated and for rectifying action to be taken.

VicHealth has structures in place to take all reasonable steps to protect people who make such disclosures from any detrimental action in reprisal for making the disclosure. It will also afford natural justice to the person who is the subject of the disclosure to the extent legally possible.

Additional information about VicHealth's protected disclosure policy and process is available from the VicHealth website:
www.vichealth.vic.gov.au/about/policies-and-procedures/protected-disclosure-procedure

No disclosures were made within this financial reporting period.

Compliance with DataVic Access Policy

Consistent with the DataVic Access Policy of the Victorian Government, the information included in this Annual Report will be available at www.data.vic.gov.au in machine-readable format. VicHealth will progressively release other data in the future as it becomes available.

Local jobs disclosures

VicHealth abides by the requirements of the Local Jobs First Policy in its procurement practices.

During the reporting period, no tenders or projects were deemed as falling within the scope of Local Jobs First Strategic (projects with a budget of \$50 million or more), Local Jobs First Standard (projects with a budget of \$3 million or more in metropolitan Melbourne or \$1 million in rural Victoria) or projects that the Major Projects Skills Guarantee has been applied to.

National Competition Policy

During this reporting period, VicHealth did not undertake any activities that require reporting against the National Competition Policy.

Office-based environmental impacts

VicHealth understands its responsibility to use its resources more efficiently and reduce our impact on the environment. VicHealth also acknowledges the complementary role that a healthy environment plays in supporting the social and economic determinants of health. In 2019–20, VicHealth continued to operate in an environmentally sustainable manner by:

- using AFS and PEFC certified recycled paper where the paper supplier contributes to the planting of two trees for every one tree used in producing the paper
- using sustainable choices for office supplies
- purchasing fair-trade coffee
- providing public transport tickets for staff travelling to and from meetings
- promoting the use of the Melbourne Bike Share scheme
- use of a hybrid fleet vehicle.

VicHealth also undertook a carbon emissions project in 2019–20 with a focus on becoming a carbon neutral organisation by 30 June 2021, which is detailed earlier under Section 2 of the Annual Report.

Additional information available on request

In compliance with the requirements of the Standing Directions of the Minister for Finance, additional information has been retained by VicHealth and is available to the relevant Ministers, Members of Parliament and the public on request (subject to Freedom of Information requirements).

For further information, please contact:

Chief Finance and Accounting Officer
Victorian Health Promotion Foundation
15–31 Pelham Street
Carlton VIC 3053
Phone: (03) 9667 1333

Attestation of compliance with Ministerial Standing Direction 5.1.4.

I, Nick Green, Board Chair on behalf of the Responsible Body, certify that VicHealth has no Material Compliance Deficiency with respect to the applicable Standing Directions under the *Financial Management Act 1994* and Instructions.

A handwritten signature in black ink, appearing to read 'Nick Green', written in a cursive style.

Nick Green OAM
Chair of the Board

26 August 2020