ADAVB 2018/19 ANNOLAL REPORT



The ADAVB is committed to the oral health of all Victorians and the professional lives of its members.

2018/19 COUNCIL, FRAC AND STANDING COMMITTEES

President Dr K Morris

Vice President Dr G Sanghvi

Immediate Past President Dr S Wise

Executive Councillors Dr A Pacella Dr J Sternson

Federal Councillors

Dr A Barnes A/Prof N Hewson Dr S Liew

Councillors

Dr M Bowman Dr I Cernavin Dr D Curnow Dr A Gikas Dr A Heredia Dr L Nash Dr C Ng Dr D Ong Dr W Shnider Dr J Teoh

Constitution & Policy Committee

A/Prof N Hewson (C) Dr M Bowman (VC) Dr C Callahan Dr A Gikas Dr G Sanghvi Dr K Morris (ex-officio)

Continuing Professional Development Committee

Dr Adam Keyes-Tilley (C) (appointed September 2018) Dr Ben Keith (C) (resigned August 2018) Dr Jacki Goode (VC) (resigned April 2019) Dr Wessam Atteya Dr Annesley Bryan (RG&SC representative) Dr Kate Burgess Dr Gordon Burt Dr Christina Jovanovic Dr Aaron Martin Dr Michael Mladenovic Dr Livia Naharnowicz (appointed April 2019) Dr Carolyn Ng (Alt PR) Dr Nathan Phung (RG&SC representative) Dr Emily Pow (RG&SC representative until December 2018) Dr Alan Solomon Dr Julie Savage Dr Jeremy Sternson (PR) Dr Phillippe Zimet

Defence Advisory

Committee Dr C Homewood (C) Dr P Wright (VC) Dr G Barton Dr I Cernavin Dr D Curnow Dr K Morris Dr C Sanzaro (ADATas representative) Dr G Ward

Public Dentistry

Committee Dr R Martin (C) Dr E Chen (VC) Dr K Hallett Dr K Theodore Dr M Stephens Dr R Shankumar Dr I Malek-Uzieblo Dr W Shnider (Alt PR) Dr J Teoh (PR)

Recent Graduates &

Students Committee Dr Thomas Webb (CC) (end of tenure December 2018) Dr Emily Pow (CC) (end of tenure December 2018) Dr Nathan Phung (CC) (2019)Dr Martin Nguyen (CC) (2019)Dr Kaya Kapusta (VCC) Lakkhana Rabel (VCC) (appointed January 2018) Dr Neeshah Dahya (resigned December 2018) Dr Zahi Shlah (resigned

December 2018) Dr Angela Zhang (appointed January 2019) Dr Marina Ghobrial Mr Annesley Bryan Mr Bryan Lim Ms Faiza Kazmi (appointed January 2019) Mr Jhai Manogaran (appointed January 2019) Dr Claudia Braybon Dr Devin Ong (PR) Dr Linton Nash (Alt PR)

Sports & Social Committee

Dr S Cran (C) (appointed September 2018) Dr L Wordsworth (C) (resigned August 2018) Dr B Moore (VC) (appointed September 2018) Dr T Chan Dr E Colombo Dr E Pow Dr T Probert Dr M Silva Dr L Wordsworth Dr J Sternson (PR) Dr L Nash (Alt PR)

Third Party Committee

Dr A Pacella (C) (PR) Dr J X R Chen (VC) Dr D Brown Dr C Chang Dr F Davis Dr G Fast Dr R I Gillies Dr G Morris Dr T Probert Dr J Skilton Dr D Curnow (Alt PR) Dr S Wise

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Committee Dr A Gikas (C) Dr A Barnes (VC) Dr M Bowman Dr G Morris Dr J Rattray A/Prof R Story AM, RFD Dr F Wardlaw

Finance Risk & Audit Committee

Dr M Bowman (C) Dr G Sanghvi (VC) Dr S Bellur (appointed August 2018) Dr T Cutler (resigned July 2018) Dr A Heredia Dr E Magee Dr J Rerksirathai (appointed August 2018) Dr F Wardlaw

Honours & Awards Committee

A/Prof N Hewson (C) Dr A Barnes Dr G Burt A/Prof J Matthews (VC) Dr J Cherry

Oral Health Committee

Dr J Yap (C) Dr J Fernando (VC) Dr B Cheng Dr C Perez Rodriguez Dr G D'Mello Dr S Lew Dr L Liu Dr V Tran Dr M Tsai Dr J Teoh (Alt PR) Dr A Heredia (PR) Ms A Di Paolo (DHAA) (resigned February 2019) Ms S Sofronoff (DHSV) (resigned December 2018) Dr Melinda Tam (DHSV) (appointed January 2019)

Professional Provident Fund Policy Advisory Committee

Dr T Cutler (C) Dr R De Poi (VC) Dr J Locke Dr G Morris Dr B Taylor



PRESIDENT'S Foreword

The Respect Public Dentistry campaign finally achieved its goal of a new enterprise bargaining agreement (EBA), notably a 19 per cent increase to public dentist wages over the next four years, with all hospitals and most community health centres (with the exception of one), signing onto the new agreement. The agreement includes \$2000 pro rata for public dentists to spend on CPD and professional memberships. This is a good beginning for Victorian dentists in closing the wage gap compared with their interstate colleagues, and also a baseline to ensure other dentists are not being under-remunerated when working for other corporations. The Australian Dental Association Victorian Branch (ADAVB) and Professionals Australia will continue to work closely to ensure that the entitlements in the agreements are realised, and that future agreements are fair and recognise our public members' contribution to the Victorian community.

Our continuing professional development (CPD) program continues to expand and diversify to meet our members' varied interests in education. From more conventional programs such as master classes in resin bonding, to 'Night at the Museum' and 'Al dente: Teeth, tortellini and tall tales', members have been well educated as well as entertained! Attendance for all types of CPD has increased, and we will continue to explore new ideas and reinvigorate our CPD program with the guidance of the energetic CPD Committee and staff.

Accreditation and compliance remained popular topics throughout the year. CPR and emergency management, practice management and accreditation, compliance in privacy and infection control programs were well attended by members and their staff.

We continued our CPD bursary offering with the generous support of BOQ Specialist, this time with two bursaries available – a \$10,000 CPD practice bursary and a \$5000 recent graduate bursary.

Our CPD events commenced with our 2018 ADAVB Convention that had more than 800 delegates attending an extensive, varied and informative program. The ADAVB members' lounge was a great opportunity to speak

to members and receive feedback and suggestions, as well as free coffee! The overall feedback about the program and events was very positive and I look forward to our next ADAVB Convention in 2020.

As well as providing our members with quality and varied CPD events, we held a number of enjoyable social events such as the social dinner at Arc One Gallery, Cumulus Inc., the Recent Graduates Cocktail Night, and the popular tennis, golf and fly-fishing events.



With the support of our long-time sponsors PSA Insurance/VMIA, the ADAVB launched the Dentists Wellbeing Ergonomics Program, an online program with resources to support our members' health. Other initiatives to support our members' wellbeing include LifeWorks, our member assistance program, that offers free counselling advice and support for life and work challenges.

The ADAVB continued to advocate for members and the community. Working with government, we were able to negotiate more reasonable regulatory requirements for IV sedation in Victoria. Without our involvement, the requirements would have led to a large regulatory burden, difficulties for our members using office sedation, and threaten the job security of our sedationist members.

During the Victorian election campaign, we highlighted the need to increase public dental funding and the recognition of our members in the public sector. The Andrews Government



placed greater emphasis on the dental health of Victorians and supported our members' new EBA. We will continue to work with the Victorian Government to ensure that public funds for the Victorian school dental van program are used effectively and via existing infrastructure where possible.

The ADAVB supported the ADA in challenging the controversial proposed changes by the Dental Board to the scope of dental practice of allied dental personnel. The health ministers have referred these changes to the independent body ACSQHC, to ensure they are safe and will not increase the risk to the public. We will continue to monitor the proposed changes to ensure the safety of the community when undergoing dental care.

The introduction of the new membership database system and integrated website will enable the ADAVB to respond to members in a more effective and targeted manner. The new database will become more interactive, allowing members to not only change professional details and keep track of CPD, but to also allow access to member services, activities and events according to the member's profile. Overall, the user experience will be greatly enhanced with a much easier to use and streamlined website and member dashboard.



Many thanks to ADAVB CEO A/Prof Matthew Hopcraft, staff, councillors and committee members for their hard work and commitment to improve the working lives of Victorian dentists and the oral health of all Victorians. I congratulate my successor Dr Gitika Sanghvi and look forward to the continuing improvements and support our association has to offer for our members and the oral health of our community for years to come.

Dr Kevin Morris President 2018/19

2018/19 COUNCIL MEMBERS



Dr Kevin Morris President BDSc (Melb), GradDipClinDent (Syd), FRACDS DCD (Perio), FRACDS (Perio)



Dr Gitika Sanghvi Vice President Finance, Risk and Audit Committee Vice Chair BDSc (Melb)





Councillor, Finance, Risk and **Audit Committee** Chair BDSc (Melb), FADI, FICD

Dr Mark Bowman

Dr Igor Cernavin Councillor BDS (Adel), MDSc (Melb), FADI, FASLMS



Dr Stephen Liew Councillor, **Federal Councillor** BDSc (Mel), FPFA, FADI, MAICD, FICD



GDipDent (Giffith)



Dr Susan Wise **Immediate** Past President BDSc (Melb), MDSc (QLD), MRACDS (Perio), FPFA



Dr David J Curnow Councillor BDSc (Melb) FADI FICD



Dr Carolyn Ng Councillor BDSc Hons (Melb), DClinDent (Ortho) Syd, MRACDS (Ortho) – RACDS, MOrth RCSEd -Edinburgh



Dr Angelo Pacella **Executive Councillor** BSc BDSc (Melb)



Dr Andrew Gikas Councillor BDSc (Melb) FADI FPFA FICD

Councillor BDSc (Melb) MDS (Ortho) MOrthRCSEd

Councillor BDSc (Melb)

FICD

Dr Warren Shnider

FRACDS (SND)

Dr Devin Ong



Dr Jeremy Sternson **Executive Councillor** BDSc (Melb) FRACDS FADI



Dr Andrew Heredia Councillor BDSc (Melb)



Dr Andrew J Barnes Councillor, Federal Councillor BDSc (Melb)



A/Prof Neil Hewson Councillor, **Federal Councillor** BSc (Hons) (Monash), BDSc (Melb), HonDDSc (Melb), LDS (Vic), FADI, FICD, FPFA



Dr Ionathan Teoh Councillor BDSc (Melb) MPH (Melb)

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GENERAL REVIEW

Strategic priority area: Leadership

Aim: To ensure that the ADAVB is the leading voice in dentistry and oral health in Victoria.

The Advocacy and Health Policy team is responsible for leading the ADAVB's work in policy, advocacy, research, health promotion and stakeholder partnerships. This work forms an important component of the ADAVB's strategic priority area of leadership.

Work area highlights

Improve the oral and general health of Victorians

The ADAVB was involved in a broad range of oral health initiatives. These included the development, review and promotion of resources for the general public, involvement in large-scale events, and support of the ADA's annual Dental Health Week. Much of this was facilitated by the ADAVB's Oral Health Committee, with additional support for public events from volunteer members.

Promoting equitable and sustainable access to dental care

Prior to the 2018 state government election, the ADAVB joined other professional associations, health services, and consumer and welfare bodies to advocate for better funding and access to public dental care. Under the banner of the Victorian Oral Health Alliance (VOHA), the group shone a light on the impacts of a lack of timely access to dental care on disadvantaged Victorians, with waiting times for public dental care exceeding 20 months on average. Through these activities, VOHA was successful in engaging the media and electoral candidates to raise awareness of the importance of good oral health.

Advocating on issues that impact on the practice of dentistry in Victoria

During 2018/19, ADAVB representatives met with the Victorian Minister for Health, Jenny Mikakos; the Shadow Minister for Health, Georgie Crozier; the Victorian Greens' Health Spokesperson, Dr Tim Read; and representatives of the



Department of Health and Human Services, and a range of public health organisations. We continue to advocate on behalf of members and the community for public policies that promote good oral health and appropriate access to dental care.

Thank you to the ADAVB members, staff, committees and stakeholders who provided support and advice, and participated in our work over the past year. Your contributions were essential to achieving the ADAVB's leadership goals.

Strategic priority area: Member services

Aim: To provide the highest quality services to benefit members in their day to day lives.

Practice Plus is a practice support service that provides information and support to assist members and their staff with practice management issues including accreditation, infection control, setting up a practice, and other

safety and quality compliances. The Practice Plus team plans and delivers seminars and workshops, and provides consulting services, as well as overthe-phone advice, website resources and printed publications.

Community relations officers (CROs) help ADAVB members address patient concerns, and in their role as professional consultants (PCs), can advise all members on any general professional or clinical matter, as long as the matter would not be considered a notifiable event under an indemnity insurance policy.

The delivery of CPD programs remains a core



membership service. The CPD team is supported by the CPD Committee, which consists of a mix of general practice and specialist dentists, as well as representatives from the Recent Graduates and Students Committee. The experience, diversity and knowledge of the CPD Committee is drawn upon to design a range courses, conducted by the CPD unit, to support members at all stages of their career.

Work area highlights

Professional support

Practice Plus received more than 1457 enquiries from ADAVB and ADATas members during 2018/19, and addressed 1911 separate issues, a significant increase from 1300 enquiries and 1445 issues in the previous year. The most common topics addressed were infection control, accreditation, systems management and new practice set-up.

The CROs/PCs took 3515 calls in 2018/19, an increase from a total of 3226 calls in 2017/18. The main topics were about managing complaints, patient management and Medicare. Of these calls, 2727 were from members



and 783 from the public. The CROs received 76 written patient concerns, with the main topics being implants, crowns and endodontic-related matters.

The CROs attended recent graduate events, training sessions run by Practice Plus and ADAVB group meetings to promote the CRO member service. The patient helpline and the CRO/PC support available for members continued to be promoted as a core member offering through a number of mediums: online, at membership events and through regular editorials in the *Victorian Dentist*.

Career development support

Students and recent graduates were supported with new and updated materials including the *ADAVB Introduction to the Dental Profession* handbook, Checklist for Getting Started resource and a new My Career online profile platform. This online platform was initiated and planned by the ADAVB and delivered on the ADA website – firstly accessible only by ADAVB recent graduates, followed by other ADA members later in the year. It replaced the printed *ADAVB Employment Guide*, reducing staff time and printing costs.

Various well attended forums were held for final year students, including Preparation for Practice, with both councillors and staff in attendance. The ADAVB Mentoring Program, supported by Guild Insurance, continued to be an effective, successful and sought-after first year graduate program. It was also rated the highest of all member services, with a satisfaction rating of 80 per cent in the ADAVB Membership Survey. The 2017/18 Health Sector Leadership Program, supported by Guild and conducted by Leadership Victoria, concluded in the latter half of 2018, and promotion for the 2018/19 program resulted in the highest number of applications ever received.

Workshops and consulting

Practice Plus experienced an increase in demand for infection control workshops and consulting, in part due to competitive pricing introduced earlier in 2018. The number of accreditation workshops and consulting carried out increased substantially, largely driven by health funds. 'Practice accreditation support' and 'practice management resources, workshops and consulting' were ranked two of the most highly rated member services in the ADAVB Membership Survey, with a satisfaction rating of 79 per cent and 73 per cent respectively.

Number of sessions held:

- Infection control workshops: 14
- Infection control site visits: 45
- Accreditation seminars: four
- Accreditation workshops (one-on-one): 62
- Accreditation workshop (first group session): one.



A new practice accreditation workshop for groups was introduced with the aim of running this once per month. Individual practice accreditation workshops will still be offered.

Practice Plus, in conjunction with the CPD team, developed and delivered a compliance series, which proved popular with members. Practice Plus continued to develop valuable member resources including occupational violence and aggression policy templates and additional infection control resources. Practice Plus subscription fee income increased – as at 30 June 2019 there were 72 subscribers, up from 62 subscribers in June 2018. In addition, Practice Plus exceeded its budgetary goals of increasing annual income and profit.



Continuing professional development

In 2018/19, the CPD unit delivered 43 CPD events, consisting of 31 lectures and 12 workshops. There was an increase in attendance – 1525 registrations compared with 1201 the previous financial year. Attending CPD programs was the most highly used member service, according to the ADAVB Membership Survey, with 71 per cent of members accessing CPD in the last year.

The CPD program included sell-out events at distinctive and enjoyable venues, and a successful 2018 ADAVB Convention: Keys to Success, with 871 delegates attending, including more than 650 dentists. Stand-out CPD events include:

- Lectures and exhibition at 2018 Convention held at the Melbourne Convention Centre
- 'Art and science' event at the National Art Gallery
- 'History of dentistry' at the National Museum
- 'Al dente: teeth, tortellini and tall tales' CPD, cooking and dinner event at the Melbourne Convention Centre
- 'CPD and wine tasting' event at the Wine House



- 'Frontiers in dentistry' at the RACV Goldfields in Ballarat and RACV Melbourne
- The Early Clinical Essentials series, developed in conjunction with the Recent Graduates and Students Committee, continued to be popular with young dentists who are in the early years of their careers.

Strategic priority area: Engagement

Aim: To engage with our members through contemporary, relevant and responsive activities.

In 2018/19, the Communications and Membership team developed new initiatives to address the strategic priority area of engagement. This team is responsible for communications across advocacy and policy, member services, membership marketing, management of renewals and other membership campaigns, and membership administration and reporting to Council.

Work area highlights

Membership

At the end of June 2019, the ADAVB recorded an increase in membership, representing 78 per cent of registered dentists in Victoria – a total of 3252 financial members, up from 3155 financial members in June 2018. New marketing and communications efforts aimed at retaining members, and increased promotion of advocacy and member services proved to be effective in membership take-up. A reduction in new graduate membership fees resulted in a 25 per cent increase in first year graduates and a 17 per cent increase in second year members in 2018/19. The number of public dentists also increased due to the public dentistry EBA campaign and the number of ADC (non-financial members) increased markedly from 118 in June 2018 to 195 in June 2019.

Membership value

The ADAVB value proposition continued to be highlighted in membership marketing materials. Membership benefits information was updated, and new materials promoting ADAVB groups and ADA lifestyle benefits were introduced. The value of membership was promoted with targeted features to various segments of the membership through social media, email campaigns, website content and the *Victorian Dentist*.

Branding and presence

A new branding style guide was designed and implemented, bringing a contemporary, professional and consistent approach to ADAVB communications. The *Victorian Dentist* continued to be improved with design now carried out in-house, new and engaging content, expanded information for recent graduates, and a focus on member benefits and services for members. The *Victorian Dentist* magazine was rated the most popular form



toria's unacceptable public dental waiting times Protecting your privacy oplying with your health and safety obligations? of communication in the ADAVB Membership Survey, with 72 per cent of members reading it 'often or always' and increasing to 92 per cent when including those who reported reading it 'sometimes'. Over 70 per cent of members were satisfied or extremely satisfied with the *Victorian Dentist*.

Planned media activity around World Oral Health Day, Dental Health Week, the public dentistry EBA campaign, Victoria's oral health and mapping of long waiting times, and added sugar food product labelling, led to increased media presence with more proactive media releases generated – 16 media releases in 2018/19, up from 12 in 2017/18. The ADAVB continued to feature prominently in television, print and radio stories related to dental health, raising our profile. Many media organisations are now contacting the ADAVB to comment on these issues.

In 2018/19, more than 70 news items were posted on the ADAVB's website on issues ranging from promotion of lifestyle benefits and member services, through to public dentistry, private health insurance and other advocacy issues. These activities resulted in an increase in requests for media interviews with key spokespeople, including the ADAVB President and ADAVB CEO, and as a result, more public media exposure on television, radio, online and in print media.



Presence at events, both through branded

merchandise and staff attendance, was improved.

New banners, signage and resources have improved ADAVB visibility at events and have presented a contemporary and approachable image, particularly at university events.

Member communication

ADAVB presence on social media continued to increase, with both organic and paid posts. Relevant and contemporary content resulted in unprecedented reach and engagement, particularly on posts about the new ADAVB President in June 2019, Victoria's oral health crisis and the public dentistry EBA campaign throughout 2018, and social campaigns such as the 12 Days of Christmas in 2018, World Smile Day in October 2018 and International Women's Day (IWD) in March 2019. A new social media platform – Instagram – was introduced in June 2018 to further engage with younger members, particularly students.



The increased engagement across all social media platforms was mainly targeted at students and recent graduates. The IWD promotion, which highlighted leading ADAVB women, and culminated in an IWD dinner prize with the ADAVB president for three young members, also resulted in an increase in visits to the website for further information about leadership opportunities and more importantly, an increase in the numbers of applications for the Health Sector Leadership Program and BOQ Specialist Bursary Programs.

Email campaigns to members consistently achieved higher than industry standard email open and click rates. Targeted email and advertising campaigns

were executed for numerous key activities relating to membership, advocacy, policy changes, statutory requirement updates, and CPD and practice training. Opportunities for volunteering, committee positions and survey feedback were widely promoted – highlighting the value of getting involved with the ADAVB.

Strategic priority area: Capability

Aim: To ensure that the ADAVB is contemporary, responsive and meets our strategic goals through continuous improvement.

Work area highlights

Improvement of IT systems

Extensive planning and background work was undertaken for the development of the new ADAVB membership management database and integrated website. The new database was implemented in May 2019 and the early stage of this new system was released in time for membership renewals in June 2019. The new system will allow efficient management of member details and requests. Interaction with members will be further improved with a streamlined and easy-to-use member dashboard and website. A new office email system was also implemented, resulting in greater efficiency and capability in sharing information.

Training

Staff capability was improved through ongoing training in areas that directly contributed to improved work roles and therefore better service delivery for members. Some of this training included evaluation and research, membership marketing, events and sponsorship, graphic design and video editing. Much of this training has resulted in cost savings to the ADAVB as staff are now able to carry out these functions confidently and with greater expertise, without the need for outsourcing. This is particularly evident in the communications team.

ADAVB Council and Executive continued to participate in media training and professional development in the areas of media skills, member engagement, membership value and advocacy.



COMMITTEE REPORTS

Finance Risk and Audit Committee

ADAVB management achieved an excellent performance for the financial year 2018/19, reporting a surplus result of \$170,000, exceeding the budget target.

The ADAVB's investment policy has remained a notable standout performer, where despite the current challenge in achieving returns, interest on investments has remained significantly above budget and helped balance areas of increased cost.

The trend from the previous 12 months predicted significant pressures on the budget with specific concerns regarding income from memberships, CPD and advertising. Despite this, membership numbers appear more stable and the CPD unit, particularly through the ADAVB Convention in 2018, has maintained support from members in the face of increasing competition.

Variations in cost of the IT redevelopment have been monitored carefully while this project that spans several financial years it is now seeing positive results for members.

ADAVB Council supported a budget for the coming year with only a two per cent increase to the ADAVB membership rate for 2019/20, with the goal of a net neutral budget.

Income from memberships continues to make up just over half of total revenue. There is a strong focus to increase non-membership revenue to ensure that rates are kept low for members. This income comes from several sources, including referral fees, event registrations, investment returns, sponsorship, advertising and rent.

Key processes were reviewed by the committee this year, including the creation of an Occupational Health and Safety Committee, and continuing maintenance and review of the strategic risk and organisational risk profiles.

Dr Mark Bowman Chair

Community Relations and Professional Consultant Service

Following changes to our service last year, we have continued to make improvements to our processes and the system has been running relatively smoothly. As a result, we have been able to assist members with Guild insurance the same as previously, without exposing the ADAVB to the risk of being considered a complaints entity.

As well as new processes, we have had additional changes to the team. In November, Dr Loula Konidaris moved from a locum to a permanent position. Locum Dr Anna Talacko worked extra hours to assist with the CRO workload, particularly while Dr Ann Monteith was on long service leave. Dr Tony Robertson continued to provide some locum services when his availability allowed. I will be taking some long service leave later in the year so it has been important for our locums to have the ability to cover the rosters with no disruption to member assistance.

The end of 2018 and start of 2019 presented the challenge of the Child Dental Benefits Schedule (CDBS) Act and Review letters (sent to 1000 dentists around Australia). After the CDBS experience a few years ago, Guild and ADA consortium branches recognised the need to develop a timely strategy to assist members immediately, but to also be prepared for any future actions should Medicare continue to send letters or enter into an auditing process. As always, Guild and Meridian Lawyers were instrumental in helping us to develop this strategy and we are now placed to quickly address future actions as they arise.

There have been some concerning developments with private health insurers now demanding refund of payments on concluding that auditing has identified that clinical records are below the regulatory standard. I had alluded to this emerging issue last year with respect to the increasing level of noise (audits) in this sphere. These demands pose a big risk for the future of third-party interactions and an equally big challenge in protecting the profession. Once again, Guild's lawyers are assisting these members and the ADAVB in developing responses, but keeping adequate records is a never-ending message that doesn't seem to be getting through to members – yet another challenge for the ADAVB.

I have continued with presentations to group meetings and in conjunction with CPD, developed a 10-minute presentation at CPD events for CROs to deliver short update messages about topical issues and be available for questions. This has worked well – especially at those events that offer refreshments in wonderful locations such as the museum and wine bars!

Guild has recognised the contribution of the CROs by awarding the CROs with a financial delegation whereby we can settle small claims without needing to seek prior approval from Guild. This was possible as comprehensive auditing and scrutiny of past settlements by Guild acknowledged the independent and professional calibre of the CROs in managing claims. This is to be highly valued in the present climate of financial services regulations coming out of the Royal Commission. Guild feels comfortable enough that it can still meet its regulatory obligations to APRA by delegation and authorisation to the ADAVB. In my opinion, this recognises the great contribution not only of the present CROs, but the past generation from whose experience and judgement we have all learnt. I would like to especially remember and thank Dr Bruce Drysdale and Dr Fred Widdop for passing the baton to those of us currently in the position.

We have adopted best practice secure messaging for all our documentation to ensure we minimise the risk of any confidential data breaches. We take the opportunity whenever we can to advise members to do the same.

A huge thanks as always to Mrs Maria Omizzolo, Community Relations Administrative Officer, who has had an extremely large workload this year, meeting her usual capacity, and additionally supporting the ongoing mentoring of the new CROs.

Dr Eryn Agnew

ADAVB Community Relations Manager/Professional Consultant

Benevolent Fund

The Benevolent Fund Advisory Board, Associate Professor John Matthews (Chair), Dr Ann Goodrich and Dr Greg Tilley, together with the ADAVB President and Hon Secretary ex-officio, is pleased to present the Benevolent Fund report.

The fund provided assistance to one member during the last financial year.

The fund is an essential aspect of the ADAVB's care of its members, and the trustees in turn encourage all members to donate annually. Members are reminded that the member assistance program is another responsibility of the fund, underlining the need for both sources of finance – ADAVB revenue and the generosity of members – to retain a safe margin.

The fund's financial position is incorporated in the statement of profit and loss of other comprehensive income.

A/Prof John Matthews Chair

Membership

Statistics at 30 June 2019 show:

ACTIVE – PRIVATE	1955
ACTIVE – PUBLIC	198
ACTIVE – SPOUSE	34
CONCESSIONAL – RETIRED	124
CONCESSIONAL – 70/30	94
CONCESSIONAL – POST-GRAD	5
CONCESSIONAL – PART-TIME	401
CONCESSIONAL – UNEMPLOYED	6
CONCESSIONAL – PARENTAL LEAVE	17
STUDENT – POST-GRAD	54
NEW GRADUATE 1ST SIX MONTHS	141
NEW GRADUATE 1ST YR	115
NEW GRADUATE 2ND YR	94
HONORARY LIFE MEMBERS	14
STUDENTS – UP TO FINAL YEAR	481
STUDENTS FINAL YEAR	144
STUDENTS ADC	195
TOTAL	4072

Vale

The deaths of the following members during the period July 2018 to June 2019 are recorded with sadness.

HASE, Michael BIONDO, Attilio CLEMENT, John SULLIVAN, Michael John GADAMSETTY, Kiran BARING, David

Vincent Conrad Amerena PSM RFD 1929–2019

Past President (1981) Dr Vincent Amerena sadly passed away in 2019. Dr Amerena's long and varied career involved general dentistry, specialist periodontia, oral medicine, teaching, military dentistry and dental administration.

STANDING COMMITTEE REPORTS

Constitution and Policy Committee

The primary role of the Constitution and Policy Committee is to advise Council on matters related to the ADAVB rules, by-laws and policy statements.

During 2018/19, the Constitution and Policy Committee was extremely active and made recommendations resulting in the outcomes listed below. The committee did not make any recommendations regarding ADAVB rules.

Committee recommendations resulted in the following by-laws being amended by ADAVB Council:

- By-Law 1 Standing Orders Clause 7(2)(c) in relation to nominee CVs
- By-Law 1 Standing Orders Clause 6(1)(a)(111) in relation to the ballot paper
- By-Law 1 Standing Orders Clause 6(1)(c) in relation to the validity of votes
- By-Law 4 Regional Groups in relation to the post codes therein
- By-Law 8 Membership several clauses relating to discontinued membership categories and voting eligibility
- By-Law 8 in relation to aligning membership categories with ADA
- By-Law 8 Clause 6 that uncontactable Leave of Absence members be reclassified as non-members.

Committee recommendations resulted in the following new by-law being adopted:

• By-Law 11 Branch Councillors to outline roles and responsibilities.

The committee reviews ADAVB policy statements as part of a regular cycle of review and in response to changing circumstances. Committee recommendations resulted in the following policy statements being amended by ADAVB Council:

- BPS 1.4 Strategy & Risk
- BPS 2.1 Finance
- BPS 2.2 Benefits and Reimbursements
- BPS 2.3 Student Prizes
- BPS 3.1 Branch Communications
- BPS 3.4 Meeting Rooms
- BPS 4.1 Community Relations Officers.

Committee recommendations resulted in the following new policy statements being adopted:

• BPS 3.12 Non-Member Access to Services.

I would like to thank the committee members and Ms Lisa Legge and Mrs Maree Horseman for their contribution to the committee's activities.

A/Prof Neil Hewson Chair

Continuing Professional Development Committee

Provision of CPD programs is a core ADAVB membership service, and the CPD Committee's key strategic role is to advise and plan high-quality CPD activities for dentists and dental professionals.

The committee consists of a mix of general practice dentists in the private and public sectors, specialist dentists, and representatives from the Recent Graduates and Students Committee. The wealth of experience and knowledge of the 12 committee members is used to design a broad range of courses, coordinated by the CPD unit, to support members at all stages of their careers.

Highlights

2018/19 CPD Program

Total: 43 CPD courses	Total: 1525 registrations	No. of CPD hours
12 workshops	272 registrations	81 scientific
31 lectures	1253 registrations	104 scientific 12 non-scientific

2018 ADAVB Convention Keys to #Success

Programs	Total: 871 registrations	No. of CPD hours
Dentists - Day 1	656 registrations	 1.5 non-scientific 4.5 scientific
Dentists - Day 2		6 scientific
Joint Dental Hygienists and Dental and Oral Health Therapists	58 registrations	6 scientific
Practice Managers	59 registrations	5 scientific 1 non-scientific
Dental Assistants	88 registrations	6 scientific
ADC	10 registrations	2 non-scientific 1 scientific



Clinical Update online

This free monthly online CPD continues to be popular with members. The Clinical Update was completed 5635 times in 2018/19, with an average of 470 participants per month.

ADAVB BOQ Specialist CPD Practice Bursary

Congratulations to Dr Sathyan Saranathan of Goulburn Valley Dental Group who was the successful recipient of the 2018 ADAVB BOQ Specialist Practice CPD Bursary.

CPD Committee and CPD unit

Dr Adam Keyes-Tilley was appointed committee chair in September 2018 following the resignation of Dr Ben Keith who had generously served as chair for seven years. Drs Gordon Burt, Michael Mladenovic and Jacki Goode also resigned as members of the committee. Associate Professor Phillippe Zimet, and Drs Kate Burgess, Livia Naharnowicz and Julie Savage joined as members of the committee.

The committee is well supported by a professional ADAVB staff team, which delivers more than 40 CPD activities annually. As chair, I am honoured and thrilled to be working with the committee and staff. I thank everyone involved, including past committee members, for their contributions and wonderful work for this significant membership service.

I am looking forward to building future CPD courses in collaboration with ADAVB affiliates, regional groups and branches for a wider outreach to dentists and their dental teams at any stage in their career.

Dr Adam Keyes-Tilley Chair

Defence Advisory Committee

The primary role of the Defence Advisory Committee (DAC) is to provide advice on clinical and other dentalrelated matters to the ADAVB's professional indemnity insurer and solicitors.

In 2018/19, the main activities included:

- Bi-monthly meetings to discuss new cases and the status of existing cases
- Publication of articles in the *Victorian Dentist* and the *Australian Dento-Legal Review* to update members on developments in the dento-legal area, explaining members' obligations and the current problems associated with new and existing laws, and trends such as health fund audits, Medicare and dental corporates
- Contacting certain members to counsel them on their behaviour and, where necessary, arrange for them to obtain extra clinical teaching to improve their skills.

The DAC is concerned about the numbers of cases where members are undertaking treatment that is beyond their level of expertise. This can lead to poor outcomes and unhappy patients. The subsequent legal redress is unpleasant for all and does not reflect well on the dental profession.

There has been a rapid increase in claims against general practitioners undertaking orthodontic treatment and the surgical placement of osseo integrated implants. This is reflected in the increase in premiums for these members.

The committee noted the need for committee membership to better reflect the diversity of ADAVB membership. This will be addressed when future committee members are sought and appointed.

A big thank you to committee members Dr Greg Barton, Dr Igor Cernavin, Dr David Curnow, Dr Gabriella Ward, Dr Paul Wright, and new members Dr Susan Wise and Dr Chris Sanzaro, who volunteer their free time for the benefit of our members. Their wise counsel is much appreciated.

Thank you also to Ms Alison Rowe, Ms Vicki Tziourtzias and Ms Christie Boucher from Guild Insurance; Ms Kellie Dell'Oro and Mr Tamir Katz from Meridian Lawyers; and Ms Caroline Rubira and Mr Jon Minter from K&L Gates.

Dr Kip Homewood Chair

Disputes and Ethics Committee

The Dispute and Ethics Committee's objectives are:

- To conduct investigations into disputes and ethical complaints in accordance with rules 107 and 108 and bylaws 2 and 3
- To make recommendations to Council regarding the implementation of by-laws 2 and 3
- To deal with any matters referred to the Disputes and Ethics Committee by the Council.

Anyone notifying the ADAVB of a potential dispute or ethical matter breaching the above rules or by-laws, is sent a letter that clearly sets out procedures, timelines and the limits of potential penalties that the ADAVB can impose.

The committee supports ADAVB's efforts to have a system following the principles of natural justice. The ADAVB is indebted to all experienced disputes and ethics panel members who volunteer their time to professionally and confidentially try to resolve these difficult and often distressing issues.

Three matters were considered during 2018/19, with all three matters concluded. One case resulted in the member being censured by the ADAVB President.

Council resolutions on all disputes and ethics matters are reported in the ADAVB's *Victorian Dentist*. No parties are identified. The reports aim to prevent members from finding themselves involved in similar situations by alerting them to the type of disputes that have recently occurred.

The committee met on 16 May 2019 to review processes (including documentation) and functions of the committee.

Dr Andrew Gikas Chair

Oral Health Committee

The role of the Oral Health Committee (OHC) is to inform members, other healthcare professionals and the public about the prevention of oral diseases and the maintenance of good oral health. The main activities in the last year were:

- Developed 'Caring for your teeth' patient information sheets on tooth erosion, teeth grinding and choosing tap water
- Worked with the Australian and New Zealand Society of Pediatric Dentistry to prepare a 'Healthy snacks for healthy teeth' brochure
- Created a 'Healthy teeth, happy kids' poster in collaboration with children's entertainment group, the Mik Maks
- Provided direction to the ADAVB relating to participation in the 2019 Melbourne Essential Baby and Toddler Show and Diabetes Expo
- Reviewed and updated the ADAVB's suite of oral health fact sheets on the Better Health Channel website



- Established a connection with the Royal Australian College of General Practitioners, in addition to AMA Victoria, to promote awareness of the link between general and oral health conditions, and to assist medical general practitioners with management of oral health issues
- Representation on the ADA Oral Health Working Group and Dental Health Services Victoria (DHSV) Healthy Families, Healthy Smiles reference group.

We extend appreciation to other members who have volunteered their time to assist the OHC by participating in public events, with special thanks to Colgate for generously supplying products.

Lastly, I thank our OHC members and Ms Sonia Georgiades for the work they do, as well as the DHSV representative. I'd like to wish Dr James Fernando well as he moves into the committee chair role.

Dr Jason Yap Chair

Professional Provident Superannuation Fund Policy Advisory Committee

The Professional Provident Superannuation (PPS) Fund Policy Advisory Committee met four times during 2018/19 to perform its key functions:

- Representing the interests of members of the PPS Fund
- Providing advice to ADAVB Council on matters related to the operation of the fund and other superannuation-related matters.

The committee focused on promoting the relationships with the service providers of the PPS Fund. The aim for the coming year is to encourage the administrative and investment entities to maintain high standards and accountability, for the ongoing benefit of its members.

The committee continues to observe the superannuation fund operations through the longstanding relationships with Moneywise and IOOF. There have been administrative changes at IOOF, including the appointment of Mr Renato Mota as CEO, and the tightening of Australian Prudential Regulation Authority conditions.

There were productive discussions across a wide range of superannuation issues, informing the series of detailed articles by Moneywise published in the *Victorian Dentist* for the benefit of both fund and ADAVB members. The committee has worked with Moneywise and IOOF to help provide and publicise a contemporary product in a Public Offer Fund for the advantage of ADAVB members.

The committee is open to expressions of interest from potential new members. The current committee members are Dr Bruce Taylor, Dr John Locke, Dr Robert DePoi (Deputy Chair), Dr Greg Morris and Tim Cutler (Chair).

Dr Tim Cutler Chair

Public Dentistry Committee

The primary role of the Public Dentistry Committee (PDC) is to advise the ADAVB on public dental policy, hospital and community dental needs; support the ADAVB to improve public oral health, including increasing government funding to the public dental sector; report on public dentists' employment conditions and concerns; and enhance member engagement.

Major activities undertaken by the committee included:

- Provided ongoing advice and support to the ADAVB and Professionals Australia as part of the public dentistry EBA campaign
- Held a networking event for public sector dentists in anticipation of a positive EBA outcome
- Provided guidance relating to CPD for public sector members to enhance the ADAVB's offering, and advice on engagement with public sector dentists
- Monitored and provided advice to the ADAVB on the school dental van program.

The PDC congratulates public sector members for achieving a successful outcome in the recent EBA negotiations, and thanks the ADAVB and Professionals Australia for their extensive work representing public sector dentists in this process. There is more work to be done and the PDC will remain actively involved throughout the implementation phase, and planning for the next iteration of the EBA in 2022.

I thank all PDC members for their time and valuable contributions, as well as Ms Sonia Georgiades. Particularly, I'd like to thank Dr Mary Stephens who has retired from the PDC after many years of service. We are extremely grateful to Mary for her passionate dedication to the work of the committee.



A/Prof Rachel Martin Chair

Recent Graduates and Students Committee

The role of the Recent Graduates and Students Committee (RG&SC) is to engage and support newly qualified dentists, dental students and recent ADC graduates through the formative stage of their dental career. Over 2018/19, the RG&SC has achieved this by:

- Hosting a series of Early Clinical Essential CPD events targeted at recent graduate dentists
- Supporting both Melbourne Dental Students Society (MDSS) and Bendigo Oral Health and Dentistry Society (BOHDS) at student events
- Co-hosting the annual Dental Schools Victoria sports cup with both student societies
- Hosting the annual ADAVB Cocktail Ball
- Preparing articles for the Victorian Dentist magazine



 Providing feedback to Council from recent graduate members regarding issues including misconduct and employment trends for recent graduates • Providing suggestions to Council on how to provide support to ADC graduates preparing for examination and post-registration.

The key focus of the RG&SC moving into the next financial year is to continue to develop and build on key events that support recent graduates, ensure continued engagement, and promote the importance and relevance of the ADA to future members of our profession.

Dr Martin Nguyen and Dr Nathan Phung Co-Chairs

Sports and Social Committee

Throughout 2018/19, the ADAVB Sports and Social Committee continued in its role to provide ADAVB members sporting and social opportunities as avenues to promoting healthy collegiality within the profession.

More than 250 members attended the following events:

- Motorsports Day at Sandown in August 2018
- Spring Golf Day at Royal Melbourne Golf Club in October 2018
- Social Dinner at Supernormal in October 2018
- Fly-Fishing Weekend at Millbrook Lakes (near Ballarat) in November 2018
- Tennis Day at Kooyong Lawn Tennis Club in February 2019
- Autumn Golf Day at Metropolitan Golf Club in March 2019
- Social Dinner at Cumulus Inc. Arc One Gallery in June 2019.

I extend my sincere thanks and appreciation to all committee members for their support and effort invested in the success of the committee's activities, and to the ADAVB staff, with special thanks to Ms Tamara Mapper, for their tireless contribution in running the successful events of 2018/19.



Dr Stuart Cran Chair

Third Party Committee

The Third Party Committee (TPC) monitors and advises on third-party influences in dentistry, including health funds, corporates and government funding agencies. The main activities undertaken by the TPC included addressing health fund incidents reported by members, providing feedback on the TAC dental fee schedule review and reviewing Australian Prudential Regulation Authority reports.

The TPC recognises that health funds have a major impact on the dental profession and this is one of the biggest concerns of members. As such, there is a strong focus on monitoring health fund behaviours and trends in extras cover take-up by the public. The committee continues to work towards helping members and patients who are negatively affected, and supports the ADAVB and ADA in their advocacy activities.

Another key focus area relates to corporate owned dental practices, particularly those that are operated by major health funds. The committee advocates for continuity of care for patients, as well as a high standard of quality and safety. Dentists and patients working together collaboratively to manage oral health results in trusting and ongoing relationships. This kind of provider-patient relationship should exist in both independent and corporate practice settings.

I thank committee members for offering their time and expertise, and give special thanks to Ms Sonia Georgiades for her role in the work of the TPC. I'd also like to wish Dr John Chen well as he moves into the chair role.

Dr Angelo Pacella Chair

EXTERNAL COMMITTEE REPORTS

Henry Forman Atkinson Dental Museum

The last 12 months have involved reviewing the collection and researching a major anniversary exhibition. The refurbished Henry Forman Atkinson (HFA) Dental Museum continues to attract great interest from visitors to Melbourne Dental School, showcasing themes of innovation, outreach dentistry, World War I, teaching of dentistry, early dentistry, women in dentistry, tooth care and dentures.

The HFA Dental Museum participated in The University of Melbourne open day and orientation week programs. It received visits from students, staff and alumni at The University of Melbourne as well as secondary school and community groups. The museum was advertised in *Culture Victoria* and online on the Tourism Victoria website.

Highlights from *The art of healing: Australian Indigenous bush medicine* opened on 14 May at Bush House, Kings College London, covering examples of healing practice from the many distinct and varied Indigenous communities throughout Australia through contemporary artworks. The exhibition included images of plants used to treat toothache. This exhibition will tour to the Museum of Medical History of the Charité – Universitätsmedizin, Berlin.

Following this theme, the museum commissioned artworks by Yolngu artist, Mulkun Wirrpanda from Yirrkala for the collection. The works depict the Dhuwa clan's tradition of throwing the newly lost baby teeth of children onto the roots of the Pandanus tree.

Research for the major exhibition *Discovery, Education and Innovation: Uncovering the history of dentistry in Victoria* to commemorate the 135th anniversary of the formation of the Odontological Society and establishment of the dental museum continued, including a visit to the University of Utrecht to visit the dental collection considered one of the world's finest.

Items from the collection were regularly included in the Arts West building at The University of Melbourne in a display case on the ground floor. They are rotated on a regular basis.

A major Miegunyah grant was used to engage conservators to prepare a conservation strategy plan for the HFA Dental Museum in line with best practice for management of the museum collection.

The museum received generous gifts for the collection from dental alumni including items that originally belonged to Francis (Frank) James Balsillie, a dentist who practised in several towns including Kyabram, Victoria in the early part of the 1900s.

Dr Jacqueline Healy

The Grampians Region Oral Health Network

The purpose of my role as Grampians Region Oral Health Network (GROHN) ADAVB representative is to support Dental Health Services Victoria in the delivery of its oral health activities in the Grampians region.

At each of the GROHN quarterly meetings I attended on behalf of the ADAVB, the common theme was a chronic shortage of dentists in many of the public clinics in this quite far flung and remote area. Where a dentist is recruited, it is rare for them to stay for any length of time.

Recruits are usually new or recent graduates who may have never left the urban life and their cultural/ emotional supports. Rural and remote public dentistry is as challenging as dentistry gets and having no mentor or colleague, and limited specialist referral pathways, makes this a challenging situation for these graduates. At one of the clinics, these inexperienced dentists are expected to treat some of the state's scariest, unaccompanied criminals on day release.

The employment situation in rural and remote NSW is markedly better. The most obvious differentiating factor is a significantly higher rate of remuneration presumably providing the opportunity to employ dentists with some experience.

It appears the aim of opening a rural dental school to attract rural students to train as dentists has not yet resulted in an increase in recruitment and retention of dentists in the public sector in rural Victoria. Though the nine public dental agencies represented at the GROHN meetings have difficulty recruiting dentists, they have a lot of success recruiting and retaining dental therapists, hygienists and oral health therapists. This then leads to the perception that extending the role of oral health therapists is the solution to service delivery, if dentists are not willing to work in these locations.

Actions taken by the ADAVB to improve the remuneration for public sector dentists are vitally important to improving this situation.

The group is concerned about the ability to effectively recruit staff for the proposed new school dental van program in rural areas.

The members of the network expressed that they find it helpful to have an experienced rural dentist representing the ADAVB and contributing to these meetings.

Dr Simon Sheed ADAVB Representative AUSTRALIAN DENTAL ASSOCIATION VICTORIAN BRANCH INCORPORATED AND ITS CONTROLLED ENTITY

FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2019

STATEMENT OF PROFIT AND LOSS AND OTHER COMPREHENSIVE INCOME FOR THE YEAR ENDED 30 JUNE 2019

		Consolidated	
	Note	2019 \$	2018 \$
Revenue from continuing operations	2	4,365,262	3,909,354
Finance income		340,069	206,380
Staffing and related expenses		(2,365,073)	(2,011,257)
Meetings, functions and events		(755,036)	(254,524)
Administration expenses	_	(544,763)	(738,485)
Depreciation expense	3	(273,735)	(290,327)
Other expenses		(636,227)	(603,507)
Surplus/(Deficit) before income tax		130,497	217,634
Income tax expense	4	-	-
Surplus/(Deficit) for the year		130,497	217,634
Other comprehensive income Items that may be subsequently reclassified to profit or loss Net fair value gain (loss) on available for sale financial assets		-	52,756
Items that will not be subsequently reclassified to profit or loss			
Equity instruments at fair value through other comprehensive income – fair value changes		57,078	-
Total comprehensive income for the year		<u> </u>	270,390
Surplus/(Deficit) attributable to:			
Members of the entity		187,575	270,390
Surplus/(Deficit) for the year		187,575	270,390
Total comprehensive income attributable to: Members of the entity		187,575	270,390
Total comprehensive income for the year		187,575	270,390
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STATEMENT OF FINANCIAL POSITION AS AT 30 JUNE 2019

		Consolidated	
	Note	2019 \$	2018 \$
ASSETS			
CURRENT ASSETS			
Cash and cash equivalents	7	3,600,272	3,869,137
Trade and other receivables	8	349,066	126,666
Other financial assets	9	765,000	1,060,000
Other current assets		58,191	56,242
TOTAL CURRENT ASSETS		4,772,529	5,112,045
NON-CURRENT ASSETS			
Financial assets	9	3,713,691	3,103,593
Property, plant and equipment	11	4,642,971	4,765,504
TOTAL NON-CURRENT ASSETS		8,356,662	7,869,097
TOTAL ASSETS		13,129,191	12,981,142
LIABILITIES			
CURRENT LIABILITIES			
Trade and other payables	12	3,122,608	3,245,892
Employee provisions	13	364,377	287,770
TOTAL CURRENT LIABILITIES		3,486,985	3,533,662
NON-CURRENT LIABILITIES			
Employee provisions	13	36,403	29,252
TOTAL NON-CURRENT LIABILITIES	15	<u> </u>	29,252
TOTAL LIABILITIES		3,523,388	3,562,914
NET ASSETS		9,605,803	9,418,228
-	:		-,
EQUITY	14	294 169	227.000
Reserves Potained cornings	14	384,168	327,090
Retained earnings		9,221,635	9,091,138
TOTAL EQUITY		9,605,803	9,418,228

STATEMENT OF CHANGES IN EQUITY FOR THE YEAR ENDED 30 JUNE 2019

	Retained Earnings	Fair Value Reserve of Financial Assets through OCI	Reserves	Total
	\$	\$	\$	\$
Consolidated				
Balance at 1 July 2017	8,873,505		274,333	9,147,838
Deficit for the year	217,634		-	217,634
Other comprehensive income			52,756	52,756
Total comprehensive income	217,634		52,756	270,390
for the year	0.001.120			
Balance at 30 June 2018	9,091,138		327,090	9,418,228
Balance at 1 July 2018 Effect of adoption of new	9,091,138		327,090	9,418,228
accounting standard		327,090	(327,090)	-
Balance at 1 July 2018			-	
(restated)		327,090		327,090
Surplus for the year	130,497		-	130,497
Other comprehensive income	· · · · · · · · · · · · · · · · · · ·	57,078_		57,078
Total comprehensive income			-	
for the year	130,497	57,078		187,575
Balance at 30 June 2019	9,221,635	384,168		9,605,803

STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 30 JUNE 2019

		Consolidated	
	Note	2019 \$	2018 \$
CASH FLOW FROM OPERATING ACTIVITIES		i	<u> </u>
Receipts from members and customers		4,564,523	4,340,464
Payments to suppliers and employees		(4,764,235)	(4,234,088)
Finance income		340,069	206,381
Income tax paid			
Net cash provided by/ (used in) operating			
activities	17(b)	140,357	312,757
CASH FLOW FROM INVESTING ACTIVITIES			
Proceeds from sale of investments		372,679	98,107
Purchase of investments		(630,699)	(166,863)
Proceeds from sale of plant and equipment		-	2,826
Purchase of plant and equipment		(151,202)	(21,800)
Net cash used in investing activities		(409,222)	(87,730)
Net increase/(decrease) in cash and cash			
equivalents		(268,865)	225,028
Cash and cash equivalents at beginning of			
financial year		3,869,137	3,644,109
Cash and cash equivalents at end of financial	7&		
year	17(a)	3,600,272	3,869,137

The financial statements cover Australian Dental Association Victorian Branch Incorporated ('ADAVB') as an individual entity and ADAVB and its controlled entity as a consolidated entity. ADAVB is an incorporated association in Victoria, incorporated under the Associations Incorporation Reform Act 2012 (Victoria).

NOTE 1: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Australian Dental Association Victorian Branch Inc. applies Australian Accounting Standards – Reduced Disclosure Requirements as set out in AASB 1053: *Application of Tiers of Australian Accounting Standards and AASB 2010-2: Amendments to Australian Accounting Standards arising from Reduced Disclosure Requirements and other applicable Australian Accounting Standards - Reduced Disclosure Requirements.*

The financial statements are general purpose financial statements that have been prepared in accordance with Australian Accounting Standards – Reduced Disclosure Requirements of the Australian Accounting Standards Board (AASB) and the Associations Incorporation Reform Act 2012. The association is a not-for-profit entity for financial reporting purposes under Australian Accounting standards.

Australian Accounting Standards set out accounting policies that the AASB has concluded would result in financial statements containing relevant and reliable information about transactions, events and conditions. Material accounting policies adopted in the preparation of the financial statements are presented below and have been consistently applied unless otherwise stated.

The financial statements have been prepared on an accruals basis and are based on historical costs, modified, where applicable, by the measurement at fair value of selected non-current assets, financial assets and financial liabilities.

All amounts are presented in Australian dollars, unless otherwise noted.

(a) CHANGES IN ACCOUNTING POLICIES

AASB 9 Financial Instruments

AASB 9 Financial Instruments replaces AASB 139 Financial Instruments: Recognition and Measurement. It makes major changes to the previous guidance on the classification and measurement of financial assets and introduces an 'expected credit loss' model for impairment of financial assets. When adopting AASB 9, the Group has applied transitional relief and opted not to restate prior periods. Differences arising from the adoption of AASB 9 in relation to classification, measurement, and impairment are recognised in opening retained earnings as at 1 January 2018. The adoption of AASB 9 has impacted the following areas:

Classification and measurement of the Group's financial assets

Listed equity investments - Available for sale financial assets under AASB 139 included listed equity investments of \$3,103,593 at 1 July 2018. These were reclassified to fair value through other comprehensive income (FVOCI) under AASB 9. \$327,090 was transferred from the available for sale financial assets reserve to fair value reserve of financial assets through OCI on 1 July 2018.

Held to maturity financial assets in relation to fixed interest bank bonds totalling \$1,060,000 have been reclassified at amortised cost under AASB 9. The Group intends to hold these to maturity to collect the contractual cashflows and these cash flows are solely payments of principle and interest.

Impairment of financial assets

The Group's debt instruments carried at amortised cost (bank bonds) are subject to AASB 9's new three-stage expected credit loss model. These bonds are considered low credit risk and therefore the impairment allowance is determined as 12 months expected credit losses.

NOTE 1: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

(b) Principles of Consolidation

A controlled entity is any entity ADAVB has the power to control the financial and operating policies of an entity so as to obtain benefits from its activities.

Details of the controlled entity are contained in Note 10 to the financial statements. The controlled entity has a June financial year end.

(c) Income Tax

The income tax expense (revenue) for the year comprises current income tax expense (income) and deferred tax expense (income).

Current income tax expense charged to the profit or loss is the tax payable on taxable income calculated using applicable income tax rates enacted, or substantially enacted, as at the end of the reporting period. Current tax liabilities (assets) are therefore measured at the amounts expected to be paid to (recovered from) the relevant taxation authority.

Deferred income tax expense reflects movements in deferred tax asset and deferred tax liability balances during the year as well as unused tax losses.

Current and deferred income tax expense (income) is charged or credited outside profit or loss when the tax relates to items that are recognised outside profit or loss.

Deferred tax assets and liabilities are ascertained based on temporary differences arising between the tax bases of assets and liabilities and their carrying amounts in the financial statements. Deferred tax assets also result where amounts have been fully expensed but future tax deductions are available. No deferred income tax will be recognised from the initial recognition of an asset or liability, excluding a business combination, where there is no effect on accounting or taxable profit or loss.

Deferred tax assets and liabilities are calculated at the tax rates that are expected to apply to the period when the asset is realised or the liability is settled, based on tax rates enacted or substantively enacted at the end of the reporting period. Their measurement also reflects the manner in which management expects to recover or settle the carrying amount of the related asset or liability.

Deferred tax assets relating to temporary differences and unused tax losses are recognised only to the extent that it is probable that future taxable profit will be available against which the benefits of the deferred tax asset can be utilised.

Where temporary differences exist in relation to investments in subsidiaries, branches, associates and joint ventures, deferred tax assets and liabilities are not recognised where the timing of the reversal of the temporary difference can be controlled and it is not probable that the reversal will occur in the foreseeable future.

Current tax assets and liabilities are offset where a legally enforceable right of set-off exists and it is intended that net settlement or simultaneous realisation and settlement of the respective asset and liability will occur. Deferred tax assets and liabilities are offset where a legally enforceable right of set-off exists, the deferred tax assets and liabilities relate to income taxes levied by the same taxation authority on either the same taxable entity or different taxable entities, where it is intended that net settlement or simultaneous realisation and settlement of the respective asset and liability will occur in future periods in which significant amounts of deferred tax assets or liabilities are expected to be recovered or settled.

NOTE 1: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

(d) Property, Plant and Equipment

Each class of property plant and equipment is carried at cost net of any accumulated depreciation and impairment losses.

The cost of plant and equipment constructed within the consolidated entity includes the cost of materials, direct labour, borrowing costs and an appropriate proportion of fixed and variable overheads.

Subsequent costs are included in the asset's carrying amount or recognised as a separate asset, as appropriate, only when it is probable that future economic benefits associated with the item will flow to the economic entity and the cost of the item can be measured reliably. All other repairs and maintenance are charged to the statement of comprehensive income during the financial period in which they are incurred.

Depreciation

The depreciable amount of all fixed assets, including buildings are depreciated on a straight-line basis over the asset's useful life commencing from the time the asset is held ready for use.

The depreciation rates used for each class of depreciable assets are:

Class of fixed asset	Depreciation rates
Freehold Buildings	3.00 %
Furniture and equipment	4% to 40%

The assets' residual values and useful lives are reviewed, and adjusted prospectively if appropriate, at each reporting date. An asset's carrying amount is written down immediately to its recoverable amount if the asset's carrying amount is greater than its estimated recoverable amount.

Gains and losses on disposals are determined by comparing proceeds with the carrying amount. These gains or losses are included in the statement of comprehensive income. When revalued assets are sold, amounts included in the revaluation reserve relating to that asset are transferred to retained earnings.

(e) Financial instruments

Initial Recognition and Measurement

Financial assets and financial liabilities are recognised when the consolidated entity becomes a party to the contractual provisions of the financial instruments, and are measured initially at fair value adjusted by transactions costs, except for those carried at fair value through profit or loss, which are measured initially at fair value.

Classification and Subsequent Measurement of Financial Assets

Final assets are subsequently measured at fair value through profit or loss, fair value through other comprehensive income or amortised cost.

All income and expenses relating to financial assets that are recognised in profit or loss are presented within finance costs, finance income or other financial items.

Classifications are determined by both i) the entity's business model for managing the financial asset and ii) the contractual cash flow characteristics of the financial asset.

NOTE 1: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

(e) Financial instruments (continued)

Categories of financial assets under AASB 9

Financial assets at amortised cost

Financial assets are measured at amortised cost if the assets meet the following conditions (and are not designated as FVPL):

- they are held within a business model whose objective is to hold the financial assets and collect its contractual cash flows,
- the contractual terms of the financial assets give rise to cash flows that are solely payments of principal and interest on the principal amount outstanding.

After initial recognition, these are measured at amortised cost using the effective interest method. Discounting is omitted where the effect of discounting is immaterial. The Group's cash and cash equivalents, trade and most other receivables fall into this category of financial instruments as well as long-term deposits that were previously classified as held-to-maturity under AASB 139.

Equity instruments at fair value through other comprehensive income (Equity FVOCI)

Investments in equity instruments that are not held for trading are eligible for an irrevocable election at inception to be measured at FVOCI. Under Equity FVOCI, subsequent movements in fair value are recognised in other comprehensive income and are never reclassified to profit or loss. Dividends from these investments continue to be recorded as other income within the profit or loss unless they clearly represent return of capital. This category includes equity securities that were previously classified as 'available-for-sale' under AASB 139.

Impairment of Financial assets

AASB 9's impairment requirements use more forward-looking information to recognise expected credit losses - the 'expected credit losses (ECL) model'. Instruments within the scope of the new requirements includes loans and other debt-type financial assets measured at amortised cost and FVOCI and trade receivables. The Group considers a broader range of information when assessing credit risk and measuring expected credit losses, including past events, current conditions, reasonable and supportable forecasts that affect the expected collectability of the future cash flows of the instrument.

Trade and other receivables

The consolidated entity makes use of a simplified approach in accounting for trade and other receivables and records the loss allowance at the amount equal to the expected lifetime credit losses. In using this practical expedient, the consolidated entity uses its historical experience, external indicators and forward-looking information to calculate the expected credit losses. The consolidated entity assesses impairment of trade receivables on a collective basis as they possess credit risk characteristics based on the days past due. As at reporting date, the Group assesses whether there is significant increases in credit risk on the trade and other receivables on a case by case basis, especially after the contractual amounts payable are 30 past due, unless there is strong indicator in place of a guaranteed recovery, an amount equal to the life time expected losses is established as a loss allowance.

Categories of financial assets previously under AASB 139

For the purpose of subsequent measurement, financial assets are classified into the following categories upon initial recognition: • loans and receivables • financial assets at fair value through profit or loss (FVPL) • Held-to-maturity (HTM) investments • Available-for-sale financial assets

All financial assets except for those at fair value through profit or loss (FVPL) are subject to review for impairment at least at each reporting date to identify whether there is any objective evidence that a financial asset or a group of financial assets is impaired. Different criteria to determine impairment are applied for each category of financial assets, which are described below. All income and expenses relating to financial assets that are recognised in profit or loss are presented within finance costs or finance income, except for impairment of trade receivables which is presented within other expenses.

NOTE 1: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

(e) Financial instruments (continued)

Loans and receivables

Loans and receivables are non-derivative financial assets with fixed or determinable payments that are not quoted in an active market. After initial recognition, these are measured at amortised cost using the effective interest method, less provision for impairment.

Held-to-maturity (HTM) investments

HTM investments are non-derivative financial assets with fixed or determinable payments and fixed maturity other than loans and receivables. Investments are classified as HTM if the Group has the intention and ability to hold them until maturity. The Group currently holds long term deposits designated into this category. Held-to-maturity (HTM) investments are measured subsequently at amortised cost using the effective interest method.

Available-for-sale financial assets

Available-for-sale financial assets are non-derivative financial assets that are either not capable of being classified into other categories of financial assets due to their nature or they designated are designated as such by management. They comprise investments in the equity of other entities when there is neither a fixed maturity nor fixed or determinable payments.

Derecognition

Financial assets are derecognised where the contractual rights to receipt of cash flows expire or the asset is transferred to another party whereby the entity no longer has any significant continuing involvement in the risks and benefits associated with the asset. Financial liabilities are derecognised where the related obligations are either discharged, cancelled or expire. The difference between the carrying value of the financial liability extinguished or transferred to another party and the fair value of consideration paid, including the transfer of non-cash assets or liabilities assumed, is recognised in profit or loss.

Classification and measurement of financial liabilities

The accounting for financial liabilities remains largely unchanged from AASB 139 and the consolidated entity's liabilities were not impacted by the adoption of AASB 9. The consolidated entity's financial liabilities include trade and other payables. Such financial liabilities are initially measured at fair value and are subsequently measured at amortised cost using the effective interest method.

Initial Recognition and Measurement

Financial assets and financial liabilities are recognised when the entity becomes a party to the contractual provisions of the instrument. For financial assets, this is equivalent to the date that the consolidated entity commits itself to either purchase or sell the asset (i.e. trade date accounting is adopted).

Financial instruments are initially measured at fair value plus transaction costs, except where the instrument is classified 'at fair value through profit or loss' in which case transaction costs are expensed to profit or loss immediately.

Classification and Subsequent Measurement

Financial instruments are subsequently measured either at fair value, amortised cost using the effective interest rate method or cost. Fair value represents the amount for which an asset could be exchanged or a liability settled, between knowledgeable, willing parties. Where available, quoted prices in an active market are used to determine fair value. In other circumstances, valuation techniques are adopted.

NOTE 1: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

(f) Impairment of Assets

At each reporting date, the association reviews the carrying values of its tangible and intangible assets to determine whether there is any indication that those assets have been impaired. If such an indication exists, the recoverable amount of the asset, being the higher of the asset's fair value less costs to sell and value-in-use, is compared to the asset's carrying value. Any excess of the asset's carrying value over its recoverable amount is expensed to the income statement.

Where it is not possible to estimate the recoverable amount of an individual asset, the association estimates the recoverable amount of the cash-generating unit to which the asset belongs.

(g) Leases

Lease payments for operating leases, where substantially all the risks and benefits remain with the lessor, are charged as expenses in the periods in which they are incurred. Lease incentives under operating leases are recognised as a liability and amortised on a straight-line basis over the life of the lease term.

(h) Employee Benefits

Provision is made for employee entitlement benefits accumulated as a result of employees rendering services up to the reporting date. These benefits include wages and salaries, annual and long service leave. Liabilities arising in respect of wages, salaries, annual leave and any other employee entitlements expected to be settled within twelve months of the reporting date are measured at their nominal amounts.

Employee entitlement expenses and revenues arising in respect of the following categories:

- Wages and salaries
- Non-monetary benefits
- Annual leave
- Long service leave.

Other types of employee entitlements are charged against the surplus on a net basis in their respective categories.

(i) Cash and Cash Equivalents

Cash and short-term deposits in the balance sheet comprise cash at bank and in hand and short-term deposits with an original maturity of three months or less. For the purposes of the Statement of Cash Flows, cash and cash equivalents consist of cash and cash equivalents as defined above, net of outstanding bank overdrafts.
NOTE 1: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

(j) Revenue

Revenue is measured at the fair value of the consideration received or receivable after taking into account any trade discounts and volume rebates allowed.

Revenue from the sale of goods is recognised at the point of delivery as this corresponds to the transfer of significant risks and rewards of ownership of the goods and the cessation of all involvement in those goods.

Revenue from the provision of membership subscriptions is recognised in the membership year to which it relates but on a receipted basis.

Interest revenue is recognised using the effective interest rate method, which, for floating rate financial assets is the rate inherent in the instrument. Dividend revenue is recognised when the right to receive a dividend has been established.

All revenue is stated net of the amount of goods and services tax (GST).

(k) Goods and Services Tax (GST)

Revenues, expenses and assets are recognised net of the amount of GST, except where the amount of GST incurred is not recoverable from the Australian Taxation Office. In these circumstances, the GST is recognised as part of the cost of acquisition of the asset or as part of an item of the expense. Receivables and payables in the statement of financial position are shown inclusive of GST.

Cash flows are presented in the cash flow statement on a gross basis, except for the GST component of investing and financing activities, which are disclosed as operating cash flows.

(I) Comparative Figures

When required by Accounting Standards, comparative figures have been adjusted to conform to changes in presentation for the current financial year.

(m) Critical accounting estimates and judgments

The Council evaluates estimates and judgments incorporated into the financial report based on historical knowledge and best available current information. Estimates assume a reasonable expectation of future events and are based on current trends and economic data, obtained both externally and within the consolidated entity.

Key estimates — Impairment of non-financial assets

The consolidated entity assesses impairment at each reporting date by evaluating conditions specific to the economic entity that may lead to impairment of assets. Where an impairment trigger exists, the recoverable amount of the asset is determined. No impairment losses have been recognised for the year ended 30 June 2019.

(n) Adoption of New and Revised Accounting Standards

During the current year, the consolidated entity has adopted all of the new and revised Australian Accounting Standards and Interpretations applicable to its operations which became mandatory. The Group has adopted AASB 9 Financial Instruments which is detailed in (d).

AASB 16 Leases replaces AASB 117 Leases and significantly changes the way lessees recognise leases. This standard becomes effective from 1 January 2019. The Company has assessed and determined there is no material impact on the transactions and balances recognised in the financial statements.

The adoption of the Standard has not had a significant impact on the financial statements of the consolidated entity.

New Accounting Standards for Application in Future Periods

Standards and Interpretations in issue not yet adopted

At the date of authorisation of the financial statements, the Standards and Interpretations listed below were in issue but not yet effective.

Standard/ Interpretation	Effective for annual reporting periods beginning on or after	Expected to be initially applied in the financial year ending	Nature of change
AASB 15: Revenue from Contracts with Customers	1 January 2019	30 June 2020	 AASB 15 replaces AASB 118 Revenue, AASB 111 Construction Contracts and some revenue-related Interpretations: establishes a new revenue recognition model changes the basis for deciding whether revenue is to be recognised over time or at a point in time provides new and more detailed guidance on specific topics (e.g. multiple element arrangements, variable pricing, rights of return, warranties and licensing) expands and improves disclosures about revenue.
AASB 16: Leases	1 January 2019	30 June 2020	 AASB 16 replaces AASB 117 Leases and some lease-related Interpretations: requires all leases to be accounted for 'onbalance sheet' by lessees, other than short-term and low value asset leases provides new guidance on the application of the definition of lease and on sale and lease back accounting requires new and different disclosures about leases

The association has undertaken an assessment of these standards and there will be no material impact on the transactions and balances in the financial statements.

	Consolidated	Consolidated
	2019 \$	2018 \$
NOTE 2: REVENUE FROM CONTINUING OPERATION Revenue		
- Subscriptions	2,369,860	2,373,560
- Meetings, functions and events	853,161	402,829
- Commission received and administration fees	734,039	806,955
- Other income	408,202	326,010
	4,365,262	3,909,354
NOTE 3: SURPLUS/(DEFICIT) FOR THE YEAR Expenses: Employee benefits	2,365,073	2,011,257_
Depreciation: Freehold buildings	200,642	200,642
Plant and equipment	73,093	89,685
	273,735	290,327
	0.474	24 475
Rental expense on operating leases	8,474	21,475

	Consolidated	Consolidated
	2019 \$	2018 \$
NOTE 4: INCOME TAX EXPENSE (a) The Component of the tax expense comprised:		
Current taxDeferred tax	38,478 (38,478)	(96,831) 96,831
 (a) The prima facie tax on surplus/(deficit) before tax is reconciled to the income tax expense as follows: Brima facie income tax payable on surplus ((deficit)) 		
Prima facie income tax payable on surplus/(deficit) before tax at 30% (2018:30%) Add/(Less): Tax effect of:	39,149	65,290
 Non-assessable income Non-deductible expenses Unused tax losses not recognised Income tax expense recognised in profit or loss 	(1,128,973) 1,128,302 (38,478)	(1,176,333) 1,014,211 <u>96,831</u>

NOTE 5: KEY MANAGEMENT PERSONNEL REMUNERATION

	Short-Term Benefits \$	Long Service Leave \$	Total \$
2019 Total compensation	311,784	-	311,784
2018 Total compensation	282,995		282,995

Consolidated

	2019 \$	\$ 2018 \$
NOTE 6: AUDITOR'S REMUNERATION Remuneration of the auditor of the consolidated entity for:		
 auditing or reviewing the financial report taxation services 	17,500 4,500 22,000	 16,000 4,000 20,000

	Consolidated	Consolidated
	2019	2018
	\$	\$
NOTE 7: CASH AND CASH EQUIVALENTS		
Cash and Cash Equivalents	3,600,272	3,869,137
	3,600,272	3,869,137
The effective interest rate on short-term bank deposits was 2% (2018: 2%)		
Reconciliation of cash		
Cash at the end of the financial year as shown in the statement of cash flows is reconciled to items in the statement of financial position as follows		
Cash on hand	275	275
Cash at bank	2,729,512	1,804,280
Term deposits	870,485	2,064,582
	3,600,272	3,869,137
NOTE 8: TRADE AND OTHER RECEIVABLES Current		
Other debtors	327,179	96,514
Victorian Dentist debtors	40,247	10,470
Provision for impairment of receivables	(18,360)	
	349,066	106,984
GST input credit	14,865	19,682
	363,931	126,666

Collateral held as security No collateral is held as security for any of the trade and other receivable balances.

	Consolidated 2019 \$	Consolidated 2018 \$
Financial assets at amortised cost Trade and other receivables:		
- Total Current	349,066	106,984
- Total Non-Current	<u>-</u>	
	349,066	106,984

	Consolidated		
	2019 \$	2018 \$	
NOTE 9: OTHER FINANCIAL ASSETS Current			
Financial assets at amortised cost	765,000	-	
Held to Maturity Deposits	-	1,060,000	
Non-current			
Financial assets at fair value through OCI	3,713,691	-	
Available-for-sale assets	<u> </u>	3,103,593	
	4,478,691	4,163,593	

NOTE 10: INTEREST IN SUBSIDIARY

		Percentag	ge Owned*
	Country of	2019	2018
	Incorporation	%	%
Parent Entity Australian Dental Association Victorian Branch Incorporated ('ADAVB')	Australia		
Subsidiaries of ADAVB eviDent Foundation Ltd	Australia	100%	100%

* Percentage owned refers to voting power in proportion to membership.

	Consolidated		
	2019	2018	
	\$	\$	
NOTE 11: PROPERTY, PLANT AND EQUIPMENT Owned Buildings			
At cost	5,090,400	5,090,400	
Less accumulated depreciation	(1,497,426)	(1,344,714)	
	3,592,974	3,745,686	
Building Improvements			
At cost	1,198,257	1,198,257	
Less accumulated depreciation	(404,961)	(357,030)	
	793,296	841,227	
Furniture and Equipment			
At cost	1,291,138	1,139,936	
Less accumulated depreciation	(1,034,437)	(961,345)	
	256,701	178,591	
Total Property, Plant and Equipment	4,642,971	4,765,504	

(a) Movements in Carrying Amounts Movement in the carrying amounts for each class of plant and equipment between the beginning and the end of the year.

Consolidated entity 2019	Buildings \$	Building Improve- ments \$	Furniture and Equipment \$	Total \$
Written down value at beginning of the year Additions Disposals	3,745,686 - -	841,227 - -	178,591 151,202	4,765,504 151,202
Depreciation expense Written down value at end of year	(152,712) 3,592,974	(47,931) 793,296	(73,092) 256,701	(273,735) 4,642,971
		Building Improve-	Furniture and	

Consolidated entity 2018	Buildings \$	Improve- ments \$	and Equipment \$	Total \$
Written down value at beginning of the year Additions	3,898,398	889,157	249,302 21,800	5,036,857 21,800
Disposals	-	-	(2,826)	(2,826)
Depreciation expense	(152,712)	(47,930)	(89,685)	(290,327)
Written down value at end of year	3,745,686	841,227	178,591	4,765,504

	Consolidated	
	2019 \$	2018 \$
NOTE 12: TRADE AND OTHER PAYABLES Current		
Trade payable	492,065	224,109
Subscriptions in advance	1,184,638	1,447,173
Other financial liabilities	1,172,393	1,000,518
Fees/Grants received in advance	149,375	365,970
Sundry creditors and accruals	124,137	208,122
	3,122,608	3,245,892
(b) Financial liabilities at amortised cost classified as trade and other payables Trade and other payables:		
- Total Current - Total Non-Current	3,122,608	3,245,892
	3,122,608	3,245,892
Less: Amounts received in advance	(1,323,804)	(1,821,754)
Total financial liabilities as trade and other payables	1,798,804	1,424,138

NOTE 13: PROVISIONS

	Consolidated	
	2019 \$	2018 \$
Analysis of Employee Provisions		
Current	364,377	287,770
Non-Current	36,403	29,252
	400,780	317,022

A provision has been recognised for employee entitlements relating to annual leave and long service leave. In calculating the present value of future cash flows in respect of long service leave, the probability of long service leave being taken is based on historical data. The measurement and recognition criteria relating to employee benefits have been included in Note 1 to this report.

NOTE 14: RESERVES

- (a) Fair value reserve of Financial assets through OCI
 Fair value reserve of Financial assets through OCI comprises gains and losses relating to equity securities.
- (b) Available for sale Financial Assets Reserve (prior year)
 Available for sale Financial assets reserve comprises gains or losses relating to other types of financial assets.

NOTE 15: LEASING COMMITMENTS

(a)	<i>Operating lease commitments</i> Non-cancellable operating leases contracted for but not capitalised in the financial statements:		
	Payable		
	- not later than one year - later than one year but not later than five years	8,474	21,475
		-	8,474
		8,474	29,949

Non-cancellable operating leases relate to office equipment with lease terms less than 1 year.

	Consolid 2019 \$_	ated 2018 \$_
NOTE 16: RELATED PARTIES		
Parent entity ADAVB is the parent entity, refer to note 22.		
Subsidiaries Interests in subsidiaries are set out in note 10.		
The Victorian Branch of the Australian Dental Association Incorporated ('ADA') collects subscriptions from members of which a proportion is remitted to the ADA.		
ADA Inc. Membership Subscription	2,266,976	2,248,389
The following ADAVB Councillors are also ADA Councillors: Dr A J Barnes, A/Prof N Hewson and Dr S Liew.		
NOTE 17: CASH FLOW INFORMATION (a) Reconciliation of cash Cash at the end of the financial year as shown in the statement of cash flows is reconciled to items in the statement of financial position as follows Cash and cash equivalents	3,600,272	3.869.137
(b) Reconciliation of cash flow from operations with surplus/(deficit) for the year Surplus/(Deficit) for the year Depreciation	130,497 273,735	217,634 290,327
Changes in assets and liabilities: Decrease in trade & other receivables Decrease in prepayments Increase in trade payables Increase/(decrease) in provisions Net cash from operating activities	(237,265) 12,916 (123,285) <u>83,759</u> 140,357	40,776 24,112 (168,781) (91,311) 312,757

NOTE 18: FINANCIAL RISK MANAGEMENT

Financial Instruments measured at fair value

The financial instruments recognised at fair value in the statement of financial position have been analysed and classified using a fair view hierarchy reflecting the significance of the inputs used in making the measurements. The fair value hierarchy consists of the following levels:

- (i) quoted prices in active markets for identical assets or liabilities (Level 1);
- (ii) inputs other than quoted prices included within Level 1 that are observable for the asset or liability, either directly (as prices) or indirectly (derived from prices) (Level 2); and
- (iii) inputs for the asset or liability that are not based on observable market data (unobservable inputs) (Level 3).

				30 June 2019
Consolidated Entity	Level 1	Level 2	Level 3	Total
Financial assets	Ş	Ş	<u>Ş</u>	<u></u>
Financial assets fair value through OCI	3,713,691			3,713,691
				30 June 2018
Consolidated Entity	Level 1	Level 2	Level 3	Total
	\$	\$	\$	\$
Financial assets Investments - available for sale	3,103,593	<u> </u>		3,103,593

Building and Improvements

Buildings and improvements are carried at cost net of any accumulated depreciation and impairment losses. At the end of each reporting period, the Council and Finance Risk and Audit Committee review the independent Valuation to determine whether impairment has occurred.

NOTE 19: EVENTS AFTER THE REPORTING DATE

No matters or circumstances have arisen since the end of the financial year which significantly affected or may affect the operations of the consolidated entity and the parent entity.

NOTE 20: CONTINGENT LIABILITIES

At reporting date there are no contingent liabilities.

NOTE 21: ASSOCIATION DETAILS

The registered office and principal place of business of the association and its related entity is:

Level 3, 10 Yarra Street South Yarra Victoria 3141

NOTE 22: Parent entity information

Set out below is the supplementary information about the parent entity.

Statement of profit or loss and other comprehensive income

	P	Parent	
	2019 \$	2018 \$	
Profit after income tax	173,319	228,400	
Total comprehensive income	230,397	281,157	

Statement of financial position

	Parent	
	2019 \$	2018 \$
Total current assets	4,553,408	4,860,998
Total assets	12,910,070	12,730,095
Total current liabilities	3,472,305	3,529,878
Total liabilities	3,508,708	3,559,130
Equity Reserve Retained profits	384,168 9,017,194	327,090 8,843,875
Total equity	9,401,362	9,170,965

Contingent liabilities

The parent entity had no contingent liabilities as at 30 June 2019 and 30 June 2018.

Capital commitments - Property, plant and equipment

The parent entity had no capital commitments for property, plant and equipment as at 30 June 2019 and 30 June 2018.

Significant accounting policies

The accounting policies of the parent entity are consistent with those of the consolidated entity, as disclosed in note 1, except for the following:

- Investments in subsidiaries are accounted for at cost, less any impairment, in the parent entity.
- Investments in associates are accounted for at cost, less any impairment, in the parent entity.
- Dividends received from subsidiaries are recognised as other income by the parent entity and its receipt may be an indicator of an impairment of the investment.

STATEMENT BY THE MEMBERS OF THE COUNCIL

In the opinion of the Council the financial statements and notes, as set out on pages 26 to 48:

- 1. Presents a true and fair view of the financial position of the Australian Dental Association Victorian Branch Incorporated and the economic entity as at 30 June 2019 and of their performance for the year ended on that date in accordance with Australian Accounting Standards Reduced Disclosure Requirements (Including Australian Accounting Interpretations) of the Australian Accounting Standards Board.
- 2. At the date of this statement, there are reasonable grounds to believe that the Australian Dental Association Victorian Branch Incorporated will be able to pay its debts as and when they become due and payable.

This declaration is made in accordance with a resolution of the Council and is signed for and on behalf of the Council by:

Dr Gitika Sanghvi President

Dr Mark Bowman Chair Finance Risk and Audit Committee

Dated 16th September 2019

STATEMENT BY PRINCIPAL ACCOUNTING OFFICER

I, Matthew Hopcraft, being the person in charge of the preparation of the accompanying financial statements of the Australian Dental Association Victorian Branch Incorporated, being the Statement of Profit or Loss and Other Comprehensive Income and Statement of Financial Position of the Australian Dental Association Victorian Branch Incorporated for the year ended 30 June 2019 state that to the best of my knowledge and belief the financial statements present a true and fair view of the financial position the Australian Dental Association Victorian Branch Incorporated and the economic entity as at 30 June 2019 and their results for the year ended 30 June 2019.

A/Prof Matthew Hopcraft Chief Executive Officer

Dated 16th September 2019



Independent Auditor's Report to the Members of Australian Dental Association Victorian Branch Incorporated and its controlled entity

Opinion

We have audited the financial report of Australian Dental Association Victorian Branch Incorporated and its controlled entity (the Association), which comprises the Statement of Financial Position as at 30 June 2019, the Statement of Profit or Loss and Other Comprehensive Income, Statement of Changes in Equity and Statement of Cash Flows for the year then ended, notes comprising a summary of significant accounting policies and other explanatory information and the Statement by the Council Members.

In our opinion the accompanying financial report gives a true and fair view of the Association's financial position as at 30 June 2019 and of its performance and of its cash flows for the year ended on that date is in accordance with the Australian Accounting Standards – Reduced Disclosure Requirements and the *Associations Incorporation Reform Act 2012.*

Basis of opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Report* section of our report. We are independent of the Association in accordance with the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 *Code of Ethics for Professional Accountants* (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Other information

The directors are responsible for the other information. The other information comprises the information included in the Association's annual report for the year ended 30 June 2019 but does not include the financial report and our auditor's report thereon.

Our opinion on the financial report does not cover the other information and accordingly we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial report, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial report or our knowledge obtained in the audit or otherwise appears to be materially misstated.

If, based on the work we have performed, we conclude that there is a material misstatement of this other information; we are required to report that fact. We have nothing to report in this regard.

The title 'Partner' conveys that the person is a senior member within their respective division, and is among the group of persons who hold an equity interest (shareholder) in its parent entity, Findex Group Limited. The only professional service offering which is conducted by a partnership is the Crowe Australasia external audit division. All other professional services offered by Findex Group Limited are conducted by a privately owned organisation and/or its subsidiaries.

Findex (Aust) Pty Ltd, trading as Crowe Australasia is a member of Crowe Global, a Swiss verein. Each member firm of Crowe Global is a separate and independent legal entity. Findex (Aust) Pty Ltd and its affiliates are not responsible or liable for any acts or omissions of Crowe Global or any other member of Crowe Global. Crowe Global does not render any professional services and does not have an ownership or partnership interest in Findex (Aust) Pty Ltd. Services are provided by Crowe Melbourne, an affiliate of Findex (Aust) Pty Ltd. Liability limited by a scheme approved under Professional Standards Legislation. Liability limited other than for acts or omissions of financial services licensees.



Responsibility of the council for the financial report

The council is responsible for the preparation and fair presentation of the financial report in accordance with the financial reporting requirements of the applicable legislation and for such internal control as the council determines is necessary to enable the preparation and fair presentation of a financial report that is free from material misstatement, whether due to fraud or error.

In preparing the financial report, the council is responsible for assessing the Association's ability to continue as a going concern, disclosing, as applicable, matters relating to going concern and using the going concern basis of accounting unless the council either intends to liquidate the Association or to cease operations, or has no realistic alternative but to do so.

Auditor's responsibility for the audit of the financial report

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

As part of an audit in accordance with the Australian Auditing Standards, we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial report, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Association's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the directors.
- Conclude on the appropriateness of the directors' use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Association's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial report or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Company to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial report, including the disclosures, and whether the financial report represents the underlying transactions and events in a manner that achieves fair presentation.



We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during the audit.

CROWE MELSONENE

CROWE MELBOURNE

G.M

GORDON ROBERTSON Partner Melbourne, Victoria 19 September 2019

ADAVB AWARDS 2018/19

HONORARY LIFE MEMBERS

1959	Prof W J Tuckfield
1959	Dr F A Aird
1959	W S Wilkinson
1959	Dr J M Lewis
1961	Dr R M Gillies
1961	Dr H R Cash
1962	Dr G Finlay MM
1968	Prof A B P Amies CMG
1969	Dr K T Adamson CMG
1975	Dr J M Wark CBE
1977	Dr D F Spring OBE
1979	Dr C R Newbury CBE
1980	Dr B G H Drysdale OAM
1984	Dr E W Kings OBE
1984	Dr S G Kings AM
1989	Dr R G Hardham
1990	Dr S C Warneke AM
1991	A/Prof J Harcourt OAM
1992	Dr F T Widdop AM
1995	Dr B E Taylor
1998	Dr R K Newbury
1998	Dr L G O'Brien AO
1999	Dr P R Finch
2000	Dr P W Field
2000	Dr D S Houghton
2001	A/Prof N D Hewson
2005	A/Prof J E Matthews
2010	Dr G D Condon AM

AWARD FOR DISTINGUISHED SERVICE

1985	Mrs E K Valmont (ADAVB staff)
1986	Dr R I Gillies
1987	Mr S Jensen (ADIA member)
1988	Prof E Storey ED
1988	Dr L R A Williams
1988	Dr P R Finch
1989	Dr M M Sullivan
1989	Dr W E Chalmers
1990	Dr V C Amerena PSM.RFD.
1990	Dr D C Loader
1992	Mrs E L Feiner (ADAVB staff)
1994	Dr R H Milner
1995	Dr A E Cattermole
1998	Mr P A Rashleigh (Defence lawyer)
1999	Dr R M Cook AM
1999	Prof M J Tyas AM
1999	A/Prof R K Hall OAM
2000	Dr G R Dickinson
2000	Mr S Hutton, OAM (Dental technician)
2000	A/Prof R D Story AM RFD
2001	Dr D A Behrend
2001	Dr D J Hurley
2001	Dr R W King AM
2002	Dr P M Johansen
2002	Dr J A Isaacs MBE
2003	Dr A J Burns
2003	Dr M B Burns OAM
2003	Mr I Crawford (ADIA member)
2004	Mr G L Pearson OAM (ADAVB CEO)
2006	Dr G Knight

2006	Dr J Locke
2007	A/Prof G Quail OAM
2008	A/Prof A Heggie
2008	Dr A Parker OAM
2008	Mr D Wiesenfeld
2009	Dr D Curnow
2011	Emeritus Prof L Brearley
	Messer AM
2011	Dr S Cottrell
2012	Mr E Mourant
2013	Dr E Crawford AM
2013	Laureate Prof E Reynolds AO
2013	Dr D Lawry
2014	Dr J Boucher AM
2014	Dr C Callahan
2015	Dr M Bowman
2015	Dr R Green
2015	Dr G Morris
2016	Prof D Manton
2017	Dr G Burt
2017	Dr S Chen
2017	A/Prof J Shand

DENTISTRY ACHIEVEMENT AWARD

1998	Dr J A M Robertson AM
1998	Dr B Feiglin
2002	Dr G Dickinson
2002	A/Prof B Levant
2002	Dr C R Newbury CBE
2002	Dr G R Oakley AM
2002	Prof E Storey ED
2002	Dr B G H Drysdale OAM
2003	Dr S C Warneke AM
2003	Dr A Lawrence
2004	Dr P Zimet
2004	
	Dr J Rattray
2004	Dr D Highfield
2005	Dr P Dalgliesh
2005	Dr P Wong
2007	Dr G Nervo
2008	A/Prof N D Hewson
2008	Dr S Koshy OAM
2008	Dr A M J Roseman
2009	Mr W J Besly
2009	Dr D J Whelan
2010	Dr G Bowell
2010	Dr D Goldsmith
2010	Dr S Orme
2011	Dr G Fowler
2012	Dr R Goldberg OAM
2012	Dr S Tan
2012	Dr A Dickinson OAM
2013	Dr D Bailey
2013	Dr R Bastiaan AM, RFD
2013	Prof M Morgan
2014	Dr N Cochrane
2014	Dr T Collett
2014	Dr B Creighton
2016	A/Prof J Brownbill
2016	Dr L Wordsworth
2017	Mr G Dimitralis
2017	Dr M Hall

ADAVB STAFF

A/Prof M Hopcraft	Chief Executive Officer
Dr E Agnew	Community Relations
	Manager/Professional Consultant
Ms M Bachtiar	CPD Coordinator
Ms Y Bachtiar	Receptionist
Dr J Campbell	Community Relations Officer/
	Professional Consultant (resigned
	October 2018)
Ms T Davine	Practice Plus Consultant
Mr C Garland	CPD Coordinator
Ms S Georgiades	Policy and Health Promotion Officer
Ms M Horseman	Senior Administrative Assistant
Ms E Hou	Finance Manager
Ms C Kaur	CPD and Training Manager
Dr E Kilov	Community Relations Officer/
	Professional Consultant
Dr L Konidaris	Community Relations Officer/
	Professional Consultant
Ms A Lane	Practice Plus Coordinator
Ms L Legge	Executive Assistant (resigned
	September 2018)
Ms S Ljaskevic	Communications and Marketing
	Manager
Ms T Mapper	Communications and Events
	Coordinator
Ms S McMillan	Practice Plus Consultant
Dr A Monteith	Community Relations Officer/
	Professional Consultant
Dr J O'Connor	Policy and Research Manager
Ms J Oldfield	Communications Officer
Ms M Omizzolo	Community Relations Assistant
Ms M Quinn	, Operations Manager/ eviDent
	Foundation Chief Executive Officer
Dr A Robertson	Community Relations Officer/
	Professional Consultant (Locum)
Ms S Sepsakos	Senior Administrative Assistant
	(resigned September 2018)
Mr D Swaney	Membership Marketing Officer
Dr A Talacko	Community Relations Officer/
	Professional Consultant (Locum)
Ms C Workman	Membership Officer

PROFESSIONAL SERVICES

Auditors	Crowe Horwath
Solicitors/Lawyers	Meridian Lawyers



Australian Dental Association Victorian Branch

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