

ANNUAL REPORT

2016/17

Australian Dental Association Victorian Branch



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

2016/17 COUNCIL, FRAC AND STANDING COMMITTEES

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Vice President

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Immediate Past President

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Dr S Liew

Dr A Barnes

A/Prof N Hewson

Executive Councillors

Dr K Morris

Dr G Sanghvi

Councillors

Dr M Bowman

Dr S Bellur

Dr D Curnow

Dr A Heredia

Dr R Oblak

Dr D Ong

Dr A Pacella

Dr W Shnider

Dr A Sproll (Resigned April 2017)

Dr J Sternson

Dr K Theodore (Appointed May 2017)

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Dr A Solomon

Prof M Tyas AM

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Dr J Goode

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Dr G Morris

Dr J Rattray

Dr A Stewart

A/Prof R Story AM, RFD

Dr F Wardlaw

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Dr S Wise (DC)

Dr T Cutler

Dr E Magee

Dr E Milford

Dr K Morris

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Dr R King AM

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Dr I Malek-Uzieblo

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Dr A Sproll (CC) (PR)

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Dr M Mladenovic (DCC)

Dr A Tan

Dr A Sahhar

Dr T Webb

Dr E Pow

Ms E Huang

Mr M Nguyen

Mr V Thomas

Ms N Dahya

Dr G Sanghvi (Alt PR)

Dr A Irish (non-voting member)

Dr A Gokhale (non-voting member)

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Dr T Chan

Dr S Cran

Dr S Fairbairn

Dr B Moore

Dr K Nankivell

Dr T Probert

Dr G Sanghvi (PR)

Dr J Sternson

Dr S Bellur (Alt PR)

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Dr C Chang

Dr F Davis

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Dr R I Gillies

Dr G Morris

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Dr J Skilton

Dr D Curnow (Alt PR)



President's Foreword

The 2016/17 year has been a successful one for the ADAVB, but also one in which we have seen some significant changes, starting with a newly elected Council of 17 dedicated members – with seven of these taking on the role for the first time. It has been satisfying to work with the Branch Council towards achieving the ADAVB's strategic goals and it is my pleasure to present the Annual Report.

One of the biggest changes of the year was the news of the retirement of the ADA's longest-serving Branch CEO, Mr Garry Pearson, who has guided the ADAVB over 26 years and announced he was to step down in July. It has been inspiring to hear members and stakeholders talk about the legacy that Garry leaves, which has resulted in an inestimable benefit to the ADAVB.

With the announcement of his retirement, we formed a dedicated CEO Search Committee and enlisted the expert help of an executive search firm that has vast experience in filling similar roles. In early May, it was announced that Clinical Associate Professor Matthew Hopcraft had come through this process as the successful candidate.

Similar changes occurred at the federal level, with the retirement of Mr Robert Boyd-Boland in January and the appointment of a new ADA CEO Mr Damian Mitch to complement the new federal President Dr Hugo Sachs. The new team have engaged the state branches in discussions around strategic planning, governance, member services, representation and advocacy.

Two of the big ADA campaigns that we supported and were involved with over the year were the 'Save the Child Dental Benefits Schedule' (CDBS) campaign and the private health insurance 'Time to Switch' campaign. The Federal Election mid-year pushed Medicare into the spotlight and the future of the CDBS was debated for many months. The ADAVB and our members having significantly supported the ADA when called on to provide local advocacy and media work for the #savethecdbs campaign. Our combined efforts saw not only the scheme retained but also reinstated to its original levels – the Federal

Government having realised that the CDBS is a good scheme and one that is targeted to those most in need.

The ADA sought to highlight the lack of transparency around private health insurance extras cover with their 'Time to Switch' campaign. Members and patients are concerned about premiums rising and differential rebates, so we are working towards creating a more workable balance between the profession, patients and health funds. We hosted a members-only forum and fully supported the campaign, seeing a large amount of complaints being filed with the Private Health Insurance Ombudsman. Further results of this will be played out in the coming months with the Senate inquiry into Private Health Insurance.

The biannual membership survey was a joint effort with both ADA and the ADAVB, and it allowed members the opportunity to voice their opinions on the key issues that affect them directly. The results of this survey will go some way towards shaping future advocacy and member services offerings.

The Australian Dental Students Society held its annual conference in Melbourne and I had the privilege of presenting at the opening. This was a welcome opportunity to highlight the strong links between the ADAVB and the future of the profession. We continue to support both Victorian dental schools in sponsoring events, research, student prizes and mentoring. Our recent graduates mentoring program has progressed well and we have participated with a Melbourne Dental School pilot program of mentoring for final year students. The ADAVB continues to support the Health Sector Leadership Program, which provides training and a pathway for our future leaders.

In December, the ADAVB was a signatory on a joint position statement supporting respectful oral health workplaces. In an Australian first for the health sector, nine dental organisations signed this in front of the Victorian Health Minister the Hon. Jill Hennessy. The statement is an excellent example of collaboration across the sector.

Other notable submissions have been made to the federal and state governments including enhancing the reporting of public dental sector performance through the *Transparency in Government Bill*, the national phase down of mercury and changes to the *Health Complaints Act*.

The changes to the *Health Complaints Act* have seen the newly appointed Health Complaints Commissioner address ADAVB members in April to highlight the changes to investigative powers and the Commissioner's desire to facilitate a simplified complaints process.

Our partnership with Professionals Australia has seen the next phase of enterprise bargaining agreement (EBA) negotiations started for our public dentist members. Specialist and GP Hospital and Community Dentist EBAs are up for review, with the long-term goal to help dentists and their employers to work together to achieve a strong and supported public dentist workforce. 'Respect Public Dentistry so Everyone Can Smile' is the catch phrase for this campaign, and the ADAVB is certainly keen to see this resolved for the benefit of patients and the sector.

Our involvement in oral health campaigns has seen us partner up in more than 22 oral health initiatives including the 'Rethink Sugary Drink' campaign and 'Smoke Free Smiles'. The Oral Health Committee continues to provide resources that are available on our website, and we have supported Dental Health Week promotions with direct advertising to the public and social media posts.

The Australian Dental Congress in Melbourne was a huge success and provided world-class CPD on our doorstep with ample opportunity to network and meet colleagues. Many of our members filled positions on the various committees, chaired sessions and supported the event, which had a unique Melbourne flavour that built on our reputation of being a cultural and sporting capital.

Our CPD courses continue to be popular, with more than 30 events conducted this year – and an expansion of hands-on courses planned.



Health Sector Leadership Program participants. From left: Dr Mike Mladenovic, Dr Samantha Lew, Dr Andrew Gikas, Dr Emily Pow and Thomas Webb.



Dr Andrew Gikas with Hon. Minister Jill Hennessy MP.

The ADAVB has expanded its service agreement with the Tasmanian Branch to provide further administrative support to our colleagues in the southern state.

Member renewal rates have increased by a modest one per cent this year and the ADAVB will continue to provide member services that we are used to. We shifted to fully electronic renewals and continued to see growth in pay-by-the-month options.

An area of continued growth is around communication. Our social media presence continues to grow across all platforms and this has coincided with several media exposures across print, radio and television. Media topics included dental fees, fluoridation, PHI, CDBS and a variety of oral health topics that have highlighted the need for the ADAVB to be accessible and available for such opportunities as we are the voice of dentistry in our state.

I must thank the outgoing CEO, Mr Garry Pearson, and ADAVB staff for their ongoing support and dedication to working for the members.

A. Gikas

Dr Andrew Gikas
President 2016/17

2016/17 ADAVB Council Members



Dr Andrew Gikas
President
BDSc (Melb)
FADI
FPFA



Dr Andrew Heredia
Councillor
BDSc (Melb)



Dr Angelo Pacella
Councillor
BSc
BDSc (Melb)



Dr Susan Wise
Vice President
BDSc (Melb)
MDSc (Qld)
MRACDS (Perio)
FPFA



Assoc. Prof Neil Hewson
Councillor, Federal Councillor
BSc (Hons) (Monash)
BDSc (Melb)
LDS (Vic)
FADI
FPFA



Dr Gitika Sanghvi
Executive
Councillor
BDSc (Melb)



Dr Andrew J. Barnes
Councillor & Federal
Councillor
BDSc
FADI
FICD



Dr Stephen Liew
Immediate Past President,
Federal Councillor
BDSc Melb
FADI
FPFA
MAICD



Dr Warren Shnider
Councillor
BDSc (Melb)
FRACDS (SND)
FICD



Dr Suman Bellur
Councillor
BDSc (Hons)
DCD Perio (Melb)



Dr Kevin Morris
Executive Councillor
BDSc (Melb)
GradDipClinDen
FRACDS
DCD (Perio)
FRACDS (Perio)



Dr Andrew Sproll
Councillor
BHSc
MDent
(Resigned April 2017)



Dr Mark Bowman
Councillor, Finance Risk
& Audit Committee Chair
BDSc (Melb)
FADI
FICD



Dr Robert Oblak
Councillor
BDSc (Melb)
FRACDS



Dr Jeremy Sternson
Councillor
BDSc (Melb)
FRACDS
FADI



Dr David Curnow
Councillor
BDSc (Melb)



Dr Devin Ong
Councillor
BDSc (Melb)
MDS (Ortho)
MOrthRCSEd



Dr Katy Theodore
Councillor
BHSc (Dent)
(Appointed May 2017)

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Key achievements in each of the major goals area in the Branch Strategic Plan were:

- A selected group of ADAVB Councillors formed the CEO Search Committee, and appointed ADAVB's new CEO, Clinical Associate Professor Matthew Hopcraft, who commenced in the role on 3 July 2017.
- ADAVB farewelled its CEO of 26 years, Garry Pearson, who retired from the role on 2 July 2017.
- Membership rate adjustments for 2016/17 were kept at approximately one per cent.
- The ADAVB Communications Strategy was redeveloped with greater emphasis on member engagement and member services.
- ADAVB enhanced its use of social media and online communications to engage members and raise awareness of news, campaigns and member services. A social media content strategy was developed, and the number of people following ADAVB on social media increased. Member email open and click-through rates increased, well above industry standards. ADAVB increased members' awareness of the benefits of membership through targeted emails to specific groups of members, such as students and recent graduates, and regular social media content.
- ADAVB used social media to encourage greater interaction between members, and this resulted in increased sharing of ADAVB posts and likes of shared posts. Council and Committee members were encouraged to share and like posts to boost engagement with colleagues.
- Opportunities to enhance coordination of ADA Inc. and ADAVB communications were identified. ADAVB actively shared ADA Inc. news and social media, and took part in national communications meetings and teleconferences in preparation for future nationally aligned communications activities.
- The ADAVB indemnity scheme was reviewed in consultation with Guild Insurance Ltd, to enhance the value proposition for members, with additional PI insurance cover introduced for defined procedures and entities.
- The Service Agreement with ADA Tasmanian Branch was updated, and ADAVB became the point of member services delivery for ADATB members. ADAVB now also provides administration support for the ADATB Council.
- Council approved a number of amendments to ADAVB By-Laws and Policy Statements.

- ADAVB provided input into the national ADA Membership Survey, which included 10 questions specifically about ADAVB. The results of this survey are being used to update the ADAVB Strategic Plan, and enhance member services and communications.
- We kept members informed about employment resources and opportunities, via targeted emails, updated member benefits sheets, and in the quarterly students and recent graduates section of the *Victorian Dentist* and corresponding eNews. Students and new graduates were offered employment information at mid-year and end of year seminars, and through the *Employers' Guide*.

COMMUNITY ORAL HEALTH AND DISEASE PREVENTION

- Plain language oral health information for consumers was developed and updated. This was made available to members and the public through the *Victorian Dentist* newsletter, the ADAVB website, the Caring for your Kids' Teeth Facebook page, and the Better Health Channel. 'Caring for your teeth' fact sheets were developed on the topics of wisdom teeth, oral health tips for the holiday season, and hidden sugars.
- Mouthguard awareness and access was promoted in social media posts, and an article was published in the *Victorian Dentist*, which highlighted members' mouthguard promotion initiatives, and further encouraged membership participation in this work.
- We continued to participate as a partner in Quit Victoria's Smokefree Smiles project, alongside Dental Health Services Victoria (DHSV) and the Victorian Department of Health and Human Services, with smoking cessation brief intervention training offered to oral health practitioners in the Latrobe Valley.
- The ADAVB actively supported the Cancer Council of Victoria's campaign to introduce smokefree outdoor dining under the *Tobacco Amendment Act 2016*, joining other leading health and community organisations to co-sign a statement calling on the Victorian Government to introduce smoking bans in outdoor dining and drinking areas.
- ADAVB continued to support a number of health promotion campaigns including Rethink Sugary Drink, the H30 Challenge and Live Lighter.
- ADAVB, ADA Inc. and the Rethink Sugary

Drink Consortium advocated for a tax on sugar sweetened beverages.

- ADAVB continued its participation in DHSV's Population Health Committee.
- Dental Health Week activities were delivered locally in support of the national campaign, including social media and website promotion, and an advertising campaign on Melbourne Metro trains.
- We participated in a workshop to develop the next Victorian Action Plan for the prevention of oral disease 2017-19.
- The Oral Health Committee produced articles for the Australian Medical Association Victoria's *VicDoc* magazine to educate medical GPs on assessing and managing oral health issues in the first instance, when patients present to GPs rather than dentists.
- To promote the inclusion of oral health care as part of general health care in the primary care setting, ADAVB raised awareness among members of opportunities to apply for membership of Victorian Primary Health Network Clinical Councils, and two members were successfully selected.

DENTAL WORKFORCE, EDUCATION AND TRAINING

- ADAVB and Guild Insurance Ltd collaborated to provide enhanced support to, and involvement in university activities at Victorian Dental Schools.
- ADAVB enhanced its engagement of early career members (those who have been in the workforce for one to five years), with the promotion of relevant CPD, and of the Early Clinical Essentials program.
- The Mentoring Program for new graduates gain commenced, with 62 members participating.
- The Practice Plus and CPD units collaborated with Moneywise to develop a four-module education program addressing financial literacy for new dentists, which will be rolled out from August 2017.
- ADAVB renewed its service agreement with Professionals Australia to continue to assist public sector members to achieve the respect, recognition and reward they deserve through enterprise bargaining representation and advocacy (*see p. 13 for a separate report on enterprise bargaining*).
- ADAVB provided input into ADA Inc. 2017 Recent Graduate and Practice and Workforce surveys.
- ADAVB continued to advocate to the government on behalf of members to raise awareness about workforce oversupply, and for enhanced utilisation of the available dentist workforce.
- In December 2016, ADAVB signed the Joint Position Statement Against Bullying, Harassment and Inappropriate Behaviour in the Oral Health Sector.

PROFESSIONAL DEVELOPMENT

- The CPD Unit delivered more than 30 CPD courses, consisting of lectures and workshops plus one regional conference in Victoria. Four joint courses with ADATB were held in Hobart and Launceston.
- The Practice Plus Unit delivered two seminars in Tasmania and eight in Victoria.
- ADAVB hosted a seminar with the new Health Complaints Commissioner in May 2017, To raise members' awareness of the changing health complaints environment, including the new *Health Complaints Act*.
- ADAVB participated in the ADA Inc. Congress Melbourne in May 2017 through a well-attended exhibition booth and the post-Congress evaluation.
- The CPD Unit joined with ADAVB Regional Groups North Western and Northern for the Regional Conference in Lancefield to provide joint CPD programs for members.
- Bundle discounts for courses were introduced in 2017 to enhance members' access to ADAVB CPD.
- A review of CPD discount levels for students and recent graduates (first two years only) was undertaken, and some free CPD lectures for students and first year graduates will be available in the 2018 CPD program.
- To provide additional CPD courses for experienced dentists, the CPD Committee resolved to plan Advanced/Masterclass CPD lectures and workshops for the 2018 program.

DENTAL PRACTICE, SAFETY AND QUALITY

- 140 free Practice Plus practice administration resources were promoted for member use through the website, *Victorian Dentist* newsletter and e-News, targeted emails to members and social media.
- New Practice Plus practice management resources were developed including: Privacy Complaints Process, Data Breach Response Plan, Video Surveillance and Privacy Law, Validation of the Sterilisation Process, Radiation Use and Management Licence for OPG & CBCT (Vic), Radiation Licencing (Tas), and Branch Practices.
- ADAVB supported the ADA Inc. Time to Switch Campaign to raise awareness of the issues that members and their patients can experience with private health insurers, and held a Private Health Insurance Forum for members in November 2016.



REPRESENTATION, AFFILIATION AND RECOGNITION

- The Health Sector Leadership Program was conducted again, and chiefly focused on emerging leaders in seven health professions.
- The Royal Flying Doctor Service Mobile Dental Care Program (the 'Flying Doctor Dental Clinic') continued with strong member support.
- Representations were made to the Victorian Government for increased Victorian public dental funding to cover EBA public sector dental professional salary increases, and the federal funding shortfall.
- ADAVB advocated to the government and politicians for the maintenance of procedural fairness in the new *Health Complaints Act*, and to the Victorian Health Minister to advocate for the provision of increased funding to support a smooth transition to the new Health Complaints Commission.
- ADAVB was represented on a range of committees and working groups to support oral health promotion and prevention in Victoria.



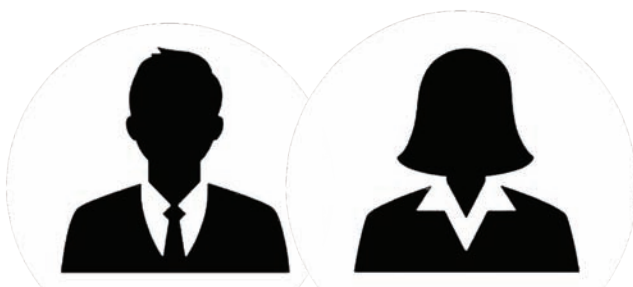
ADVOCACY ACHIEVEMENTS REPORT

The ADAVB made submissions to the federal and state governments, and provided substantive input into ADA Inc. submissions.



Notes were sent to ADA Inc. to support their submissions on:

- The consultation on higher education reform: Driving Innovation, Fairness and Excellence in Australian Higher Education (July 2016)
- The response to the Productivity Commission Issues Paper on Human Services (July 2016)
- The response to the proposed *Commonwealth Budget Savings Omnibus Bill* (September 2016)
- AHPRA and Medical Board of Australia - independent review of the use of chaperones to protect patients (September 2016)
- The response to the Regulation Impact Statement on Ratification of the Minamata Convention (February 2017)
- The Senate Community Affairs References Committee Inquiry into the value and affordability of private health insurance and out-of-pocket medical costs (June 2017).



ADAVB submissions were made in relation to:

- Simplifying medical treatment decision making and advance care planning (July 2016)
- Funding priorities for the 2017/18 State Government Budget (December 2016).

For more information on ADAVB's submissions visit submission.adavb.org

A number of letters were sent to politicians and to the State Health Minister to:

- Advocate for increased funding to the new Health Complaints Commission, to support the transition to the new Victorian health complaints regulator and the expanded role (July 2016)



- Further advocate for recognition of the critical role of public dental care, and enhancing the reporting of its performance, through the *Transparency in Government Bill*
- Advocate for a requirement for the Chair of the Dental Board of Australia to have relevant clinical expertise.



Annual Report 2016/2017, and 30 June Quarterly Update from PROFESSIONALS AUSTRALIA (PA) to ADAVB

ENTERPRISE BARGAINING REPORT:

RESPECT PUBLIC DENTISTRY SO EVERYONE CAN SMILE

An enterprise bargaining campaign for public dental sector sustainability, and improved pay and employment conditions for ADAVB's public sector members, in partnership with Professionals Australia.

Background

The initial impetus for the relationship between the ADAVB and Professionals Australia was to finalise an enterprise agreement for community dentists to achieve pay parity with general dentists employed in public hospitals. This was achieved by forming enterprise agreements with a nominal expiry date of 1 July 2017. This nominal expiry date aligned with the expiry date of 30 June for public hospital dentists, and the agreement covering specialist dentists and specialist dentists in training, which expired on 31 May 2017.

The result, which was achieved for community dentists, was an important interim step to correct what had been a grave injustice.

The Next Phase

In this next stage, we are planning and implementing an integrated campaign to address the systemic issues affecting Victoria's public dental system, which impacts up to 41 per cent of Victorians who are eligible for public dental care. In addition to uncertainty around the current funding model, part of the problem has been the lack of an overall workforce recruitment, retention and development strategy. For instance, Victorian public dentists earn up to 40 per cent less than

their interstate colleagues, which makes it difficult to attract and retain experienced clinicians. In addition, there is an insufficient focus on supporting employee professional development, and providing opportunities for professional progression.

Integrated Enterprise Bargaining Campaign

Working with ADAVB's staff and its Public Dentistry Committee, a campaign plan was developed, which sought to engage with all relevant stakeholders. A key focus of this campaign is to advocate for the State Government to increase the amount and predictability of public dental funding, to ensure that there are sufficient funds for the desired outcomes. In this regard, informal meetings have already taken place.

The campaign, which was launched at a very well attended meeting on 2 February 2017, has several aspects:

1. Stakeholder Engagement

ADAVB members were invited to participate in an online survey exploring their experiences in working in public dental health as the basis for the preparation of a *Public Dental Sector Issues Paper*.



This Issues Paper is to be used in consultation with the various stakeholders including government, public hospitals, community health centres and non-government organisations, who have an interest in the clients of the public dental health system. The Issues Paper was initially distributed at a meeting held to endorse the generic log of claims, which was held on 30 June 2017. In addition, and as a precursor to the commencement of the formal bargaining process, a preliminary meeting was held with the Victorian Hospitals Industrial Association (VHIA), and a letter was sent to all the organisations that employ public dentists, public dental specialists, and public dental specialists in training, proposing that they as key stakeholders and the ADAVB work together to address the systemic issues in a cooperative manner. Subsequently, these meetings are now in the process of being organised.

2. Nomination of ADAVB as the Bargaining Representative for its Public Sector Members

It is vital that the ADAVB, as the nominated bargaining representative, can demonstrate that it speaks on behalf of as many public sector-

employed members as possible. ADAVB and Professionals Australia have therefore made a concerted effort to encourage ADAVB members to nominate their association as their bargaining representative. At a bare minimum, there needs to be at least one nomination from each entity that employs public dentists, public dental specialists and dental specialists in training. To date, the total number of nominations received is 220 across 39 hospitals and community health centres. However, the campaign to encourage nominations is continuing – there's still time to nominate ADAVB as your bargaining representative. Visit nominate.adavb.org to access the online form to nominate ADAVB.

Thus far, at least one nomination has been received for 39 hospitals and community health centres as follows:

- Access Health and Community
- Albury Wodonga Health
- Ballarat Health Service
- Banyule Community Health Service
- Barwon Health
- Bendigo Health
- Boort District Health
- Carrington Health
- Central Bayside Community Health Services





- cohealth
- Colac Area Health
- Connect Health and Community
- Darebin Community Health
- Dental Health Services Victoria
- Dianella Community Health
- EACH
- East Grampians Health Service
- Echuca Regional Health
- Goulburn Valley Health
- healthAbility
- Inspiro Community Health
- IPC Health
- Latrobe Community Health Service
- Link Health and Community
- Merri Health
- Monash Health
- North Richmond Community Health
- Northeast Health
- Orbost Regional Health
- Peninsula Health
- Plenty Valley Community Health
- Royal Children's Hospital
- Seymour District Memorial Hospital
- South West Healthcare
- Sunbury Community Health Centre
- Star Health
- Sunraysia Community Health Services
- West Wimmera Health Service
- Wimmera Health Care Group

3. Enterprise Bargaining

As mentioned earlier in this report, a generic Log of Claims, based on issues raised by ADAVB members both at workplace meetings and individually, was endorsed at a meeting of public sector members, which took place on 30 June 2017. Sixty-four public dental sector employees attended this meeting, with 43 additional endorsements received from regional areas. The next step is to formally serve the Log of Claims on each of the employer entities. Separate Logs of Claims based on the generic Log will be served on behalf of general dentists, and specialist dentists and specialist dentists in training. The first formal bargaining meeting between Professionals Australia (as the agent of ADAVB) and VHIA is to take place on 19 July. It is intended that employee workplace representatives, who are ADAVB members, will be participants during the bargaining process, and in preparation for this a Bargaining Training Session was held for eight ADAVB members on 31 May 2017.

4. Engagement of ADAVB Members in the Campaign

At all stages of the campaign, the engagement of ADAVB members continues to be a high priority.

In the March – June 2017 quarter, Professionals Australia staff held on-site meetings with ADAVB members at:

- The Royal Dental Hospital of Melbourne – two meetings with dental specialists and dental specialists in training; and four with general dentists
- Darebin Community Health
- Peninsula Health
- Latrobe Community Health Service
- Barwon Health
- Central Bayside Community Health Services
- Plenty Valley Community Health
- Dianella Community Health

Further, during the March to June quarter, Professionals Australia's Outbound Call Centre made 175 calls, which were answered to encourage attendance at the 30 June Campaign Update & Endorsement of the Log of Claims meeting. In addition, at the DHSV Public Oral Health Innovations Conference on 31 March,

ADAVB members and Professionals Australia staff distributed a flyer to conference delegates to raise awareness of the Respect Public Dentistry So Everyone Can Smile Campaign.

Conclusion

The first half of 2017 has involved much planning and preparation for the integrated campaign, which will proceed in earnest throughout the second half of 2017. Thank you to all those ADAVB members who have joined the Respect Public Dentistry So Everyone Can Smile Campaign. With your participation, we are building a voice for public dentists, public dental specialists and dental specialists in training to create a sustainable future for Victoria's public dental sector.

CHRIS WALTON – CHIEF EXECUTIVE OFFICER
MICHAEL BUTLER – DIRECTOR INDUSTRIAL RELATIONS
ALEYSIA LEONARD – LEAD ORGANISER
PROFESSIONALS AUSTRALIA



Committee Reports

FINANCE RISK AND AUDIT COMMITTEE

A larger than anticipated surplus was achieved in 2016/17 due to a strong performance of the Branch's investment portfolio and careful management of expenses. This has allowed the Branch to again ensure that the subscription rate increases were kept to below CPI for the fourth year in a row.

The negative result for the economic entity arises on account from the timing difference of receipt of grants and related expenditure. The eviDent Foundation received a large grant which was brought to account in 2015/16 as income, with all of that sum expensed in the 2016/17 financial year. This is in compliance with the recognition and measurement principles of the applicable accounting standards and the Foundation's accounting policies.

The budgeting for the past financial year posed significant challenges due to the six-month lull period at the end of the last CPD cycle and the ADA Congress held in Melbourne in May.

Subscription and non-subscription income remain evenly balanced. The ability to derive non-subscription income is important in allowing the provision of additional services and support to members. Non-subscription income is chiefly derived from referral fees and commissions, event registration fees, investment dividends, sponsorship, advertising, rent, and sometimes from grants.

During 2016/17 the FRAC completed a review of risk and audit strategies to allow better focus and differentiation of strategic and operational review of risk.

The financial audit this year illustrated the importance of reviewing appointments, as the auditors appointed in 2016 identified numerous amendments from previous years' audits.

This year marks the end of a significant period of continuous financial management by CEO Mr Garry Pearson and accountant Mr John Stephens. Mr Pearson retired from his 26-year CEO role in July 2017 and the committee is particularly pleased to congratulate him on maintaining an excellent record of financial management, reflected in this 2016/17 result. Mr Stephens retired in September 2017 after 22 years of service, and the committee thanks him for consistent and meticulous support.

The committee welcomes Clinical Associate Professor Matthew Hopcraft to the role of CEO and looks forward to working with the new Finance Manager.

Dr Mark Bowman
Chair

COMMUNITY RELATIONS AND PROFESSIONAL CONSULTANT SERVICES – ADAVB DISPUTE ASSISTANCE SERVICE (DAS)

A significant number of changes occurred in 2016/17, which impacted on the operation and type of service the Community Relations Officers/ Professional Consultants (CRO/PCs) deliver to members. Following on from the interim changes in the Victorian health complaints landscape, the final adoption of the new *Health Complaints Act* in February allows the Health Complaints Commission (HCC) to utilise the least formal means of settling a complaint. This in turn raises professional indemnity (PI) concerns due to the obligation of members to notify and seek assistance.

It was a great opportunity that saw the new Commissioner attend a forum at the ADAVB rooms in May to brief members on these changes

and to engage with them during a question time. Dialogue between the CROs and HCC investigators continues as there are a number of new appointees and it is the ADAVB's belief that briefing them on dental matters and issues of treatment delivery assists our members as

they understand dental treatment better and can assess complaints in a balanced way.

Claims audits by private health insurers have continued. Time to Switch, the federal ADA campaign to highlight private health insurance (PHI) issues such as lack of transparency and unnecessary premium increases, has raised member awareness about PHI issues faced by both dentists and the community. There is always an influx of calls from members after PHI audit letters are received, often to seek reassurance or assistance for reviewing item numbers and their usage.

Most of the CRO workshops this year have related to procedural matters within the Corporate Authorised Agreement the ADAVB has with Guild Insurance, and with ongoing questions arising

from changes at AHPRA or the HCC. Professional development for the team included attendance at ADA Congress. CROs assisted members with enquiries at the ADAVB booth and attended lectures in the scientific program.

Our locum team of Tony Robertson, Ruth Paluch and Nicky Kilpatrick was supplemented by the recruitment in November of Jenny Campbell, who joined the team in early 2017.

Workload has increased compared with 2015/16, which is reflective of the complaints experience across health professions. A big challenge is keeping the integrity and quality of the service to members in the face of increasing litigation and costs, which has led to some changes in pricing

of the Guild policy, which individualises the premiums. The DAS still demonstrates its effectiveness at reducing costs to members by keeping costs to a minimum in about 170 cases each year – a significant saving to the overall scheme.

I continued to deliver presentations to ADAVB Regional Group meetings and the ASO to outline the work

of the CRO/PCs and clarify the fundamentals of professional indemnity insurance. Various CROs have also delivered presentations to Melbourne Dental School and La Trobe students. I thank the CROs, particularly Diana Evans, who have done so – it has been a great team effort.

Mrs Maria Omizzolo, Community Relations Administrative Officer, continues to support the team in so many ways on a day-to-day basis, while also managing the administrative side of the Benevolent and Defence Committees. With that enormous portfolio of duties she unfailingly manages to always have details of CRO case files at her finger tips. This efficient and unfailing support is what enables the CROs to deliver a quality service for members.

Dr Eryn Agnew



MEMBERSHIP

STATISTICS AT 30 JUNE FOR 2016 AND 2017 SHOW:

	2016	2017
Active (Private)	2252	2273
Active (Government Service)	217	205
Practising Spouse	30	29
Concessional- Restricted Hours	389	409
Concessional- 70/30	89	94
Concessional- Retired	101	106
Concessional- Post Graduate	51	57
Concessional- Service	3	5
Honorary and Honoray Life	14	14
Students/ADC Candidates	705	709
Total	3851	3901

VALE

The deaths of the following members during the period July 2016 to June 2017 are recorded with sadness.

BLAZE, Edmund
BOURNS, Stephen
HARRIS, Stephen
LEONG, Seng-Yap
XU, Nancy

BENEVOLENT FUND

The Benevolent Fund Advisory Board, Associate Professor John Matthews (Chairman), 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 received two genuine requests for assistance from members with serious health or family issues causing major financial problems.

Discussions took place with those concerned, together with considerable compassionate assistance from ADAVB CEO Mr Garry Pearson.

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 (MAP) 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 in the Annual Report.

Associate Professor John Matthews
Chair

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 2016/17, the Constitution and Policy Committee was extremely active and made recommendations resulting in the following outcomes.

Committee recommendations resulted in the following Rules being amended:

- Rule 17 so that Honorary Life Member recommendations come via the committee
- Rules 48 and 104 to clarify vacancy requirements
- Rule 105 to delete detail in the Rule that is also in the By-Laws.

Committee recommendations resulted in the following By-Laws being amended:

- By-Law 2 Ethics and Membership Obligations to more clearly define which court determinations are relevant and circumstances in which the ADAVB logo can be used
- By-Law 4 Regional Groups of the Branch to remove differentiation between Suburban and Country Groups, and finalise name changes for the Groups
- By-Law 6.1 Committees to delete the role of committee Honorary Secretary and define the role of Vice-Chair
- By-Law 6.2 Composition and Objects of Standing Committees to recognise there was no longer an ADAVB employment register, and delegate roles to the Constitution and Policy Committee
- By-Law 7 Affiliation to incorporate the requirement of a membership declaration and detailed grounds for termination of affiliation
- By-Law 8 Membership and Subscriptions to clarify concessional and student memberships
- By-Law 10 Branch Indemnity Scheme to clarify premium increase restrictions.

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:

- BPS 1.2 Finance Appendix 2
- BPS 1.11 Community Relations Officers/Professional Consultants and Community Relations Manager
- BPS 1.18 Environmental Sustainability
- BPS 1.23 Sponsorship and Partnerships.

Committee recommendations resulted in the following new Policy Statements being adopted:

- BPS 1.29 Bring Your Own Device for ADAVB Business Use
- BPS 1.30 Volunteering at ADAVB.

The Powers and Delegations Register was updated.

I would like to thank the committee members and Ms Lisa Legge for their contribution to the committee's activities. Finally, I acknowledge Mr Garry Pearson's substantial input over many years, noting his retirement as ADAVB CEO.

Associate Professor Neil D Hewson
Chair

CONTINUING PROFESSIONAL DEVELOPMENT COMMITTEE

Delivery of CPD programs remains a core membership service. The CPD Committee's key strategic role is to advise and plan high quality CPD activities for dentists and dental professionals. The committee has a strong mix of general practice and specialist dentists, as well as representatives from the Recent Graduates and Students Committee. The wealth of experience and knowledge of the 12 committee members is drawn upon to design a range of courses, conducted by the CPD Unit, to support members at all stages of their career.

Highlights of the 2016/17 CPD program:

- 162 CPD hours were provided across 31 CPD events, consisting of 16 workshops and 15 lectures
- 859 members attended the courses, of which 192 were recent graduates
- The Early Clinical Essentials series, developed in conjunction with the Recent Graduates and Students Committee, remain popular with young dentists who are in the early years of their careers, and are great refreshers for experienced dentists
- Three joint branch CPD events were conducted in Tasmania (two in Hobart and one in Launceston) as part of the ADAVB/ADATas Service Agreement. All the events were well attended and successful for both branches
- Dr Kathleen Walsh of Yarra Valley Dental received the 2017 ADAVB BOQ Specialist CPD Practice Bursary.



The committee is well supported by a professional team at the ADAVB office that delivers all the CPD courses in each year's program. As Chair, I am proud and honoured to be working with the committee and CPD Unit. I thank everyone for their wonderful work and contributions for this significant membership service.

Dr Ben Keith
Chair



DEFENCE ADVISORY COMMITTEE

The primary role of the Defence and Advisory Committee is to provide advice on clinical and other dental-related matters to the ADAVB's professional indemnity insurer and solicitors.

In 2016/17 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, dental corporates, etc
- 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 committee 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.

A big thank you to the committee members, Dr Greg Barton, Dr Igor Cernavin, Dr David Curnow, Dr Errol Kilov, Dr Kevin Morris, Dr Gabriella Ward, Dr Paul Wright; and to Ms Janani Rajendran and Ms Christie Boucher from Guild Insurance, Ms Kellie Dell'Oro and Mr Tamir Katz from Meridian Lawyers, and Ms Caroline Rubira from K&L Gates, who volunteer their free time for the benefit of our members.

Dr Kip Homewood
Chair

DISPUTES AND ETHICS COMMITTEE

The Disputes and Ethics Committee objectives are to:

- Conduct investigations into disputes and ethical complaints in accordance with Rules 107 and 108, and By-Laws 2 and 3
- Make recommendations to Council regarding the implementation of By-Laws 2 and 3
- Deal with any matters referred to the Disputes and Ethics Committee by the Council.

Anyone notifying ADAVB of a potential dispute or ethical matter breaching the above Rules or By-Laws, is sent a form that clearly sets out procedures, timelines and the limits of potential penalties that ADAVB can impose.

The committee supports ADAVB's efforts to have a system following the principles of natural justice. The Branch 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 complaints were lodged during 2016/17 and all have now been concluded.

Council resolutions on all disputes and ethics matters are reported in the ADAVB Victorian Dentist. Parties are not 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 once during the year to review the processes and function of the committee.

Dr Mark Bowman
Chair

HONOURS AND AWARDS COMMITTEE

The Honours and Awards Committee continues to address its duties and met on two occasions. The committee assessed and reported to Council on recommendations for awards to be made within the ADAVB, and was involved in nominations and advice for awards external to the ADAVB – both for members and non-members who have made outstanding contributions to dentistry and the community.

Contributions to the community, dentistry and/or the ADA from many of our members continue to be of exceptionally high quality. This year committee recommendations resulted in Council conferring the Award for Distinguished Service on Dr Gordon Burt, Dr Stephen Chen and A/Prof Jocelyn Shand. The Dentistry Achievement Award was awarded to Mr George Dimitroulis and Dr Martin Hall. The committee also initiated or supported two successful Order of Australia nominations. These persons warrant both our admiration and congratulations for their outstanding work and dedication.

The committee also recommended that Rule 17(2) be amended so that nominations for Honorary Life Members can only be recommended to Council by the Honours and Awards Committee.

I would like to thank the committee members – in particular Dr Ross King and A/Prof Rowan Story who have resigned from the committee after years of valuable service – and Ms Meaghan Quinn for their contribution to the committee's activities.

Associate Professor Neil D Hewson
Chair



ORAL HEALTH COMMITTEE

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

- Produced 'Caring for your teeth' patient information sheets (wisdom teeth, oral health during the holiday season, and hidden sugars in collaboration with Sugar Free Smiles)
- Produced articles for the AMA *VicDoc* magazine (managing dental pain, dental infections) to educate medical practitioners on various oral health issues that they may encounter in their day-to-day practice
- Provided input on the new 'Your Dental Health' area of the ADA Inc. website
- Promotion of Dental Health Week including a sticker advertising campaign on Melbourne metro trains
- Reviewed and updated fact sheets for the Better Health Channel on a variety of oral health topics
- Reviewed and updated PowerPoint presentations for oral health talks
- Informed ADAVB's participation in the 2017 Diabetes Expo and the 2017 Melbourne Essential Baby and Toddler Show
- Representation on the ADA Inc. Oral Health Working Group and DHSV's 'Healthy Families, Healthy Smiles' reference group.

Due to the large number of oral health activities undertaken by the ADAVB, the OHC relies on the assistance of other members who volunteer their time to participate in various activities such as oral health talks and public events. We sincerely thank these members for their support.

I thank our committee members for the work and time they put in, as well as the DHSV and DHAA representatives on the OHC. We farewelled Dr Susan Wise as the Alternative President's Representative, and wish her well for her term as ADAVB President. I would also like to thank Sonia Georgiades for her assistance and dedication towards working with the OHC to promote good oral health. Lastly, we are very appreciative to Colgate for their support of our oral health promotion efforts.

Dr Jason Yap
Chair

PROFESSIONAL PROVIDENT SUPERANNUATION FUND POLICY ADVISORY COMMITTEE

The committee, in keeping with time honoured tradition, has met four times this financial year, to perform its key functions of 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 has continued its efforts in promoting the well-being of the relationships with the service providers of the Fund. This helps facilitate efficient and effective operation of the Fund, and maintains accountability, for the ongoing benefit of its members.

The committee continues to oversee the superannuation fund operation under the auspices of Moneywise and IOOF. As in past years, these key service providers have illustrated they are well placed to deal with the incessant changes in superannuation regulations and government influences.

There have been productive discussions across a wide range of superannuation issues, informing the series of detailed articles by Moneywise published in the *Victorian Dentist* newsletter 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. Members will be aware of recent developments in this sphere involving the PPSF.

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, Dr Greg Morris and Dr Tim Cutler (Chairman).

The committee wishes to record its thanks and gratitude for the efforts and support of ADAVB CEO Mr Garry Pearson over the past 26 years. A vote of thanks was proposed, received, warmly responded to, and accepted with happy acclamation.

Dr Tim Cutler
Chair

PUBLIC DENTISTRY COMMITTEE

The primary role of the Public Dentistry Committee (PDC) is to:

- Advise ADAVB Council on public dental policy, programmes, and hospital and community dental needs
- Support the ADAVB strategic plan to improve public oral health, including increasing government funding to the public dental sector to increase the capacity of service delivery, update public dental infrastructure and provide a sustainable public dental work force
- Advise ADAVB Council on publicly employed-dentist working conditions, remuneration, member concerns, provide input into EBA negotiations to achieve fair employment conditions, advise members on campaign activities, and improve member engagement with ADAVB.

Major activities that were undertaken by the committee include:

- An informal networking evening on 22 July 2016 that was attended by 40 members, which was an opportunity for colleagues to socialise and make connections.
- Ongoing advice and support to ADAVB and Professionals Australia in advocacy, lobbying and enterprise bargaining to achieve fair work conditions for all public dentists, public dental specialists and dental specialists in training. The PDC provided input into a Victorian Public Dental Sector issues paper, by advising about the challenges that affect the public dental sector.

The PDC supported the ADAVB–Professionals Australia Public Dentistry Forum on 10 February 2017. This event launched the next phase of the public dentist enterprise bargaining campaign and informed members of the anticipated campaign plan. About 90 public dental sector employees attended (both members and non-members), including general dentists, dental specialists and dental specialist in training. The forum provided members with an opportunity to engage with ADAVB and Professionals Australia, understand the campaign plan and time-line, and ask questions.

As part of the PDC2017 annual plan, the committee will continue to assist ADAVB to achieve respect, recognition and reward for public dentists, public dental specialists and specialists in training, including salary parity with other states, and other improvements in employment terms and

conditions. The PDC will also assist ADAVB in communicating with public-sector members during the next phase of EBA activities and negotiations in 2017, and in promoting awareness of the importance to the community of public dentistry.

I thank the committee members for offering their time and valuable contributions, and Ms Roula Papatheodorou and Ms Lisa Legge for organising the meetings and events.

Dr Ramini Shankumar
Chair

RECENT GRADUATES AND STUDENTS' COMMITTEE

The role of the RG&SC is to advise ADAVB on support activities for students and recent graduates (both locally and overseas trained) during their transition into the dental profession and the early stages of their career. The main activities over the last year included:

- 'Starting Your Career' events for final year students of both Victorian dental schools
- The Employers' Guide to assist final year students with job seeking
- The 'Recent Graduates' Reunion' cocktail evening for senior students and recent graduates
- The 'Introduction to the Dental Profession' seminar for recent graduates
- The 'Recent Graduates' Support Forum' for first and second year graduates
- Provision of advice on the ADAVB Mentoring Program
- Monitoring of current workforce and employment issues facing recent graduates and recommendations to the ADAVB
- Representation on the CPD Committee and development of the 2016/17 Early Clinical Essentials CPD program series
- Representation on the ADA Inc. Recent Graduates Advisory Panel
- Content contributions for the quarterly Recent Graduates & Students section of the *Victorian Dentist* newsletter and eNews
- Facebook competition to encourage students and recent graduates to follow ADAVB on social media
- Provision of advice regarding ADAVB's involvement in student activities and representation of ADAVB at selected university events.

The RG&SC continues to make recommendations to enhance ADAVB's services and presence to further engage these member groups.

I thank Ms Sonia Georgiades and the committee for their valuable contributions and ongoing efforts. Special thanks go to the RG&SC Co-Chair, Dr Andrew Sproll (July 2016 to April 2017), for his dedication and commitment towards the RG&SC.

Dr Kevin Lai
RG&SC Co-Chair



SPORTS AND SOCIAL COMMITTEE

The primary role of the Sports and Social Committee is to organise events to bring together ADAVB members in a relaxed sporting and social environment.

The events that were organised, included:

- ADAVB Fun Run 2016 Melbourne Marathon Festival in October 2016
- Spring Golf Day at Royal Melbourne Golf Club in October 2016
- Motorsports Day at Sandown in November 2016
- Fly-Fishing Weekend at Millbrook Lakes (near Ballarat) in December 2016
- Tennis Day at Kooyong Lawn Tennis Club in February 2017
- Autumn Golf Day at Metropolitan Golf Club in May 2017.

Thank you to the committee members and Ms Roula Papatheodorou for their contribution in running the successful events of 2016/17.

Dr Laurie Wordsworth
Chair



THIRD PARTY COMMITTEE

The TPC monitors and advises on third party influences in the dental profession, including health funds, corporates and government funding agencies. The main activities undertaken by the TPC focused largely on health funds. These activities included:

- Addressed health fund incident reports submitted by members
- Provided input on the ADA Inc. Time to Switch campaign which encourages patients to switch health funds if they are unhappy with their dental rebates or health funds' behaviour, and facilitates complaints to the Private Health Insurance Ombudsman
- Involvement in the ADAVB Private Health Insurance Forum in late 2016
- Informed members about the implications of health funds diverting specialist referrals to general health fund preferred providers
- Monitored ACCC action against Medibank
- Delivered presentations to new graduates explaining third party involvement in dentistry and correct use of the ADA Schedule and Glossary.

The TPC recognises that health funds have a major impact on the dental profession and are one of the biggest concerns of members, and continues to work towards helping members who are negatively affected.

Another key focus is the billing processes and fees of funding agencies such as the TAC and WorkSafe. A significant amount of work has been done by the ADAVB, and further action is required to improve administrative processes and fee levels to ensure the best possible oral health outcomes for patients.

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. Sonia's professionalism and ability is crucial to the productive function of the committee.

Dr Angelo Pacella
Chair

External Committee Reports

DENTAL MUSEUM COMMITTEE OF MANAGEMENT

The last 12 months were a time of renewal and change for the Henry Forman Atkinson Dental Museum. The museum was refurbished and an entrance panel at the front of the museum displays John Scurry's portrait of Professor Atkinson – a welcoming presence for visitors to the museum. The entrance panel explains the name of the museum and a timeline encompasses the museum revealing the key turning points in the history of dentistry. The themes in the exhibition include innovation, outreach dentistry, World War I, teaching of dentistry, early dentistry, women in dentistry, tooth care and dentures.

The refurbished museum was launched on Wednesday 25 October. The launch event was attended by staff, students, and alumni of the Melbourne Dental School who have supported and contributed to the museum over many years.

The launch celebrated the significant contribution of volunteers to the life of the museum. In particular, Dr Neville Regan was recognised for over 20 years of voluntary work. Professor John Clement was appointed Honorary Curator to the Henry Forman Atkinson Dental Museum.

Items from the collection were also included in the new Arts West building at the University of Melbourne in a display case on the ground floor, where they will remain on a long-term basis.

The museum was incorporated into University of Melbourne open day and orientation week programs. Students, staff and alumni from the University of Melbourne, and secondary school and community groups visited the museum during these programs. The museum was advertised in Culture Victoria and on the Tourism Victoria website.

The museum received generous gifts from dental alumni for the collection. Professor Atkinson's family kindly donated more than 100 items to the museum, which will become the 'Henry Forman Atkinson Collection'.

Dr Jacky Healy

DENTAL HEALTH SERVICES VICTORIA – POPULATION HEALTH COMMITTEE

The Population Health Committee is a committee of Dental Health Services Victoria that aims to improve oral health in Victoria. The committee is made up of a diverse group of organisations that includes many stakeholders in dental health. The Population Health Committee concurrently acts as the Victorian Oral Health Planning Advisory Group (VOHPAG).

The ADAVB has been represented for the last five years on this committee by Mr Garry Pearson and Dr Greg Morris.

The current oral health strategic plan for Victoria comes to an end in 2017. A meeting was held in March to focus on the development of a strategic plan for the next five years; with a long-term vision of what oral health success would look like in Victoria in 2030. The committee draws upon the broader dental professional committee and allocated allied health and committee groups with the aim of building capacity and sustainability within Victoria.

The strategic plan is designed to supplement and enhance the national oral health plan for Australia. The new strategic plan will be published in the next few months.

Other areas the committee is involved in include:

- Less sugar bright smiles
- Implementation of Australia's National Oral Health Plan
- Involvement in the Better Health Channel
- Strengthening health promotion and building capacity.

Dr Greg Morris

GRAMPIANS ORAL HEALTH NETWORK

The Grampians Oral Health Network (GOHN) has been meeting since funding from DHSV was made available in 2007. It develops better networking among the many agencies involved in the delivery of oral health services, particularly to vulnerable sections of our communities.

It comprises of representatives from six regional agencies: DHSV, DHHS, ADAVB, Partners in Recovery, Western Victoria Primary Health Network PHN and Ballarat Community Health. With all parties agreeing that this is a worthy group, it meets in Ararat quarterly.

Despite funding reductions, the group continues to organise the best possible delivery of oral health care.

GOHN follows DHSV strategies, which were recently set out at the agency's well-received forum. Issues that have been forwarded this year include:

- Portable chair purchases – protocols for their use in schools and aged care
- Legalities of consent processes for homeless youth
- Ballarat's Peer Review program for public dentists.

Professional development programs include dealing with patients with mental health issues, addiction and behavioural issues, and staff self-care. These have been conducted in partnership with the Partners in Recovery Group.

There have been reports of a shortage of dental assistants, allegedly because some are unwilling to travel to certain areas. Agencies try to help each other with DA training.

Surprisingly, no applications for a full-time, Level 3 dentist position in Ararat were received.

Dental Weighted Activity Units' targets and allocations are under discussion as well as the self-auditing of agencies. DHSV analyses these reports.

There have also been discussions about vending machine contents in various community situations and oral health promotion in conjunction with general health promotions such as Smiles for Miles.

Dr Anne Stewart

HEALTHY FAMILIES, HEALTHY SMILES PROJECT REFERENCE GROUP

The Healthy Families, Healthy Smiles Project Reference Group (HFHS-PRG) aims to improve the oral health of Victorian children aged three years and younger and pregnant women by building capacity of health and early childhood professionals to promote oral health.

Key activities in the reporting period:

- Training more than 200 professionals, such as early childhood educators and maternal child health workers
- Partnering with other health and education organisations to promote oral health
- The *Healthy Families, Healthy Smiles* newsletter was distributed to approximately 400 stakeholders
- Two new resources were developed: 'Little Koori Smiles' flipchart (in partnership with VACCHO) has been designed and is entering pilot phase; and the 'Little teeth book' has been completed and is undergoing review
- The previously developed 'Baby teeth count too!' educational resource was recognised as an exceptional contribution and shortlisted for the Victorian Early Years Awards.

The program was developed several years ago, and is in the maintenance phase. The reference group meets biannually, and input from ADAVB is minimal. ADAVB representative attendance at meetings this financial year has not been required. Currently ADAVB has been kept up to date with minutes of HFHS-PRG meetings, and there is an ongoing offer of support to HFHS-PRG from the ADAVB.

Dr Samantha Lew



**AUSTRALIAN DENTAL ASSOCIATION
VICTORIAN BRANCH INCORPORATED
AND ITS CONTROLLED ENTITY**

**FINANCIAL STATEMENTS
FOR THE YEAR ENDED
30 JUNE 2017**

**STATEMENT OF PROFIT AND LOSS AND OTHER COMPREHENSIVE INCOME
FOR THE YEAR ENDED 30 JUNE 2017**

		Economic Entity		Parent Entity	
	Note	2017 \$	2016 \$	2017 \$	2016 \$
Continuing operations					
Revenue	2	3,940,516	4,492,514	3,917,885	4,375,526
Finance income		186,906	168,026	181,419	161,708
Staffing and related expenses		(2,179,405)	(2,122,806)	(2,179,405)	(2,122,806)
Meetings, functions and events		(408,765)	(503,883)	(258,802)	(470,276)
Administration expenses		(813,840)	(825,669)	(744,247)	(792,364)
Depreciation expense	3	(287,574)	(311,174)	(287,574)	(311,174)
Other expenses		(505,862)	(490,960)	(511,979)	(484,033)
(Loss)/Surplus before income tax		(68,024)	406,048	117,297	356,581
Income tax expense	4	-	-	-	-
(Loss)/Surplus for the year		(68,024)	406,048	117,297	356,581
Other comprehensive income					
<i>Items that may be subsequently reclassified to profit or loss</i>					
Net fair value gain (loss) on available for sale financial assets		208,409	(80,055)	208,409	(80,055)
<i>Items that have been reclassified to profit or loss</i>					
Reclassification of fair value profit on available for sale financial assets to profit and loss		(58,173)	(16,021)	(58,173)	(16,021)
Total comprehensive income for the year		82,212	309,972	267,533	260,505
(Loss)/Surplus attributable to:					
Members of the entity		(68,024)	406,048	117,297	356,581
(Loss)/Surplus for the year		(68,024)	406,048	117,297	356,581
Total comprehensive income attributable to:					
Members of the entity		82,212	309,972	267,533	260,505
Total comprehensive income for the year		82,212	309,972	267,533	260,505

The accompanying notes form part of these financial statements.

STATEMENT OF FINANCIAL POSITION
AS AT 30 JUNE 2017

	Note	Economic Entity		Parent Entity	
		2017	2016	2017	2016
		\$	\$	\$	\$
ASSETS					
CURRENT ASSETS					
Cash and cash equivalents	7	3,644,109	4,824,712	3,359,205	4,335,881
Trade and other receivables	8	167,442	183,803	187,652	252,336
Financial assets	9	1,175,000	905,000	1,175,000	905,000
Other current assets		<u>80,354</u>	<u>71,749</u>	<u>79,071</u>	<u>70,672</u>
TOTAL CURRENT ASSETS		<u>5,066,905</u>	<u>5,985,264</u>	<u>4,800,928</u>	<u>5,563,889</u>
NON-CURRENT ASSETS					
Financial assets	9	2,867,081	1,715,606	2,867,081	1,715,606
Property, plant and equipment	11	<u>5,036,857</u>	<u>5,246,467</u>	<u>5,036,857</u>	<u>5,246,467</u>
TOTAL NON-CURRENT ASSETS		<u>7,903,938</u>	<u>6,962,073</u>	<u>7,903,938</u>	<u>6,962,073</u>
TOTAL ASSETS		<u>12,970,843</u>	<u>12,947,337</u>	<u>12,704,866</u>	<u>12,525,962</u>
LIABILITIES					
CURRENT LIABILITIES					
Trade and other payables	12	3,414,673	3,518,783	3,406,726	3,540,759
Employee provisions	13	<u>368,485</u>	<u>318,828</u>	<u>368,485</u>	<u>318,828</u>
TOTAL CURRENT LIABILITIES		<u>3,783,158</u>	<u>3,837,611</u>	<u>3,775,211</u>	<u>3,859,587</u>
NON-CURRENT LIABILITIES					
Employee provisions	13	<u>39,847</u>	<u>44,100</u>	<u>39,847</u>	<u>44,100</u>
TOTAL NON-CURRENT LIABILITIES		<u>39,847</u>	<u>44,100</u>	<u>39,847</u>	<u>44,100</u>
TOTAL LIABILITIES		<u>3,823,005</u>	<u>3,881,711</u>	<u>3,815,058</u>	<u>3,903,687</u>
NET ASSETS		<u>9,147,838</u>	<u>9,065,626</u>	<u>8,889,808</u>	<u>8,622,275</u>
EQUITY					
Reserves	15	274,333	124,097	274,333	124,097
Retained earnings		<u>8,873,505</u>	<u>8,941,529</u>	<u>8,615,475</u>	<u>8,498,178</u>
TOTAL EQUITY		<u>9,147,838</u>	<u>9,065,626</u>	<u>8,889,808</u>	<u>8,622,275</u>

The accompanying notes form part of these financial statements.

**STATEMENT OF CHANGES IN EQUITY
FOR THE YEAR ENDED 30 JUNE 2017**

	Retained Earnings	Reserves	Total
	\$	\$	\$
Economic Entity			
Balance at 1 July 2015	8,535,481	220,173	8,755,654
Surplus for the year	406,048	-	406,048
Other comprehensive income (loss)	-	(96,076)	(96,076)
Total comprehensive income for the year	406,048	(96,076)	309,972
Balance at 30 June 2016	<u>8,941,529</u>	<u>124,097</u>	<u>9,065,626</u>
Balance at 1 July 2016	8,941,529	124,097	9,065,626
(Loss)/Surplus for the year	(68,024)	-	(68,024)
Other comprehensive income	-	150,236	150,236
Total comprehensive income for the year	(68,024)	150,236	82,212
Balance at 30 June 2017	<u>8,873,505</u>	<u>274,333</u>	<u>9,147,838</u>
	Retained Earnings	Reserves	Total
	\$	\$	\$
Parent Entity			
Balance at 1 July 2015	8,141,597	220,173	8,361,770
Surplus for the year	356,581	-	356,581
Other comprehensive income (loss)	-	(96,076)	(96,076)
Total comprehensive income for the year	356,581	(96,076)	260,505
Balance at 30 June 2016	<u>8,498,178</u>	<u>124,097</u>	<u>8,622,275</u>
Balance at 1 July 2016	8,498,178	124,097	8,622,275
Surplus for the year	117,297	-	117,297
Other comprehensive income	-	150,236	150,236
Total comprehensive income for the year	117,297	150,236	267,533
Balance at 30 June 2017	<u>8,615,475</u>	<u>274,333</u>	<u>8,889,808</u>

The accompanying notes form part of these financial statements.

STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED 30 JUNE 2017

	Note	Economic Entity		Parent Entity	
		2017	2016	2017	2016
		\$	\$	\$	\$
CASH FLOW FROM OPERATING ACTIVITIES					
Receipts from members & customers		4,351,530	4,645,228	4,374,358	4,454,671
Payments to suppliers and employees		(4,369,836)	(3,897,475)	(4,183,250)	(3,803,522)
Interest received		186,906	168,026	181,419	161,708
Income tax paid		-	-	-	-
Net cash provided by/(used in) operating activities	18(b)	168,600	915,779	372,527	812,857
CASH FLOW FROM INVESTING ACTIVITIES					
Proceeds from sale of investments		189,580	409,997	189,580	409,997
Purchase of investments		(1,460,819)	(339,619)	(1,460,819)	(339,619)
Proceeds from sale of plant and equipment		-	12,573	-	12,573
Purchase of plant and equipment		(77,964)	(73,219)	(77,964)	(73,219)
Net cash provided by investing activities		(1,349,203)	9,732	(1,349,203)	9,732
Net increase/(decrease) in cash and cash equivalents		(1,180,603)	925,511	(976,676)	822,589
Cash and cash equivalents at beginning of financial year		4,824,712	3,899,201	4,335,881	3,513,292
Cash and cash equivalents at end of financial year	7 & 18(a)	3,644,109	4,824,712	3,359,205	4,335,881

The accompanying notes form part of these financial statements.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2017

The financial statements cover Australian Dental Association Victorian Branch Incorporated ('ADAVB') as an individual entity and ADAVB and its controlled entity as an economic 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.

Accounting Policies

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

(b) 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.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2017

NOTE 1: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

(b) Income Tax (Continued)

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.

(c) Inventories

Inventories are measured at the lower of cost and net realisable value.

(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 economic 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 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.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2017

NOTE 1: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

(e) Financial Instruments

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 economic 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.

Amortised cost is calculated as: (i) the amount at which the financial asset or financial liability is measured at initial recognition; (ii) less principal repayments; (iii) plus or minus the cumulative amortisation of the difference, if any, between the amount initially recognised and the maturity amount calculated using the effective interest method; and (iv) less any reduction for impairment.

The *effective interest* method is used to allocate interest income or interest expense over the relevant period and is equivalent to the rate that exactly discounts estimated future cash payments or receipts (including fees, transaction costs and other premiums or discounts) through the expected life (or when this cannot be reliably predicted, the contractual term) of the financial instrument to the net carrying amount of the financial asset or financial liability. Revisions to expected future net cash flows will necessitate an adjustment to the carrying value with a consequential recognition of an income or expense in profit or loss.

The economic entity does not designate any interests in subsidiaries, associates or joint venture entities as being subject to the requirements of Accounting Standards specifically applicable to financial instruments.

i. Loans and receivables

Loans and receivables are non-derivative financial assets with fixed or determinable payments that are not quoted in an active market and are stated at amortised cost.

ii. 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 are designated as such by management. They comprise investments in the equity of other entities where there is neither a fixed maturity nor fixed or determinable payments.

iii. Held to Maturity Instruments

HTM Instruments are non-derivative financial assets with fixed or determinable payments and fixed maturity other than loans and receivables.

Fair value

Fair value is determined based on current bid prices for all quoted investments. Valuation techniques are applied to determine the fair value for all unlisted securities, including recent arm's length transactions, reference to similar instruments and option pricing models. HTM Investments are measured at amortized cost.

Impairment

At each reporting date, the economic entity assesses whether there is objective evidence that a financial instrument has been impaired. In the case of available-for-sale financial instruments, a prolonged decline in the value of the instrument is considered to determine whether an impairment loss has arisen. Impairment losses are recognised in the statement of comprehensive income.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2017

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

Leases of fixed assets where substantially all the risks and benefits incidental to the ownership of the asset, but not the legal ownership that are transferred to the economic entity are classified as finance leases.

Finance leases are capitalised by recording an asset and a liability at the lower of the amounts equal to the fair value of the leased property or the present value of the minimum lease payments, including any guaranteed residual values. Lease payments are allocated between the reduction of the lease liability and the lease interest expense for the period.

Leased assets are depreciated on a straight-line basis over their estimated useful lives where it is likely that the economic entity will obtain ownership of the asset or over the term of the lease.

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.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2017

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.

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.

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

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.

(l) 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 economic entity.

Key estimates — Impairment

The economic 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 has been recognised for the year ended 30 June 2017.

(n) Adoption of New and Revised Accounting Standards

During the current year, the economic entity has adopted all of the new and revised Australian Accounting Standards and Interpretations applicable to its operations which became mandatory.

The adoption of these Standards has not had a significant impact on the financial statements of the economic 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
AASB 9: Financial Instruments and the relevant amending standards	1 January 2018	30 June 2019
AASB15:Revenue from Contracts with Customers	1 January 2018	30 June 2019

The reported results and position of the entity will not change on adoption of these pronouncements as they do not result in any changes to the entities accounting policies. The entity does not intend to adopt any of these pronouncements before their effective dates.

**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2017**

	Economic Entity		Parent Entity	
	2017	2016	2017	2016
	\$	\$	\$	\$
NOTE 2: REVENUE AND OTHER INCOME				
Revenue				
- Subscriptions	2,320,005	2,306,915	2,320,005	2,306,915
- Meetings, functions and events	340,064	915,365	321,258	836,866
- Commission received and administration fees	846,009	766,751	846,009	766,751
- Other income	<u>434,438</u>	<u>503,483</u>	<u>430,613</u>	<u>464,994</u>
	<u>3,940,516</u>	<u>4,492,514</u>	<u>3,917,885</u>	<u>4,375,526</u>
NOTE 3: SURPLUS/(DEFICIT) FOR THE YEAR				
<i>(a) Expenses:</i>				
Employee benefits	<u>2,179,405</u>	<u>2,122,806</u>	<u>2,179,405</u>	<u>2,122,806</u>
Depreciation:				
- Freehold Buildings	200,642	175,191	200,642	175,191
- Plant and equipment	86,932	82,163	86,932	82,163
- Reading Room Journals	<u>-</u>	<u>53,820</u>	<u>-</u>	<u>53,820</u>
	<u>287,574</u>	<u>311,174</u>	<u>287,574</u>	<u>311,174</u>
Rental expense on operating leases	<u>21,475</u>	<u>21,475</u>	<u>21,475</u>	<u>21,475</u>
NOTE 4: INCOME TAX EXPENSE				
<i>(a) The components of the tax expense comprise:</i>				
- Current tax	(36,103)	(27,385)	(36,103)	(27,385)
- Deferred tax	<u>36,103</u>	<u>27,385</u>	<u>36,103</u>	<u>27,385</u>
	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>

**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2017**

Note	Economic Entity		Parent Entity	
	2017	2016	2017	2016
	\$	\$	\$	\$
NOTE 4: INCOME TAX EXPENSE (Continued)				
(b) The prima facie tax on surplus before tax is reconciled to the income tax expense as follows:				
Prima facie income tax payable on surplus before tax at 30% (2016:30%)	(20,407)	121,814	35,189	106,974
Add/(Less):				
Tax effect of:				
- Non-assessable income	(862,313)	(1,049,776)	(851,024)	(1,014,680)
- Non-deductible expenses	846,617	900,577	779,732	880,321
- Unused tax losses not recognised	36,103	27,385	36,103	27,385
Income tax expense recognised in profit or loss	-	-	-	-

NOTE 5: KEY MANAGEMENT PERSONNEL REMUNERATION

	Short-Term Benefits	Long Service Leave	Total
	\$	\$	\$
2017			
Total compensation	342,596	19,476	362,072
2016			
Total compensation	333,433	15,609	349,042

Note	Economic Entity		Parent Entity	
	2017	2016	2017	2016
	\$	\$	\$	\$

NOTE 6: AUDITOR'S REMUNERATION

Remuneration of the auditor of the economic entity for:

- auditing or reviewing the financial report	18,000	16,540	15,500	14,040
- taxation services	1,000	1,000	1,000	1,000
	19,000	17,540	16,500	15,040

**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2017**

	Economic Entity		Parent Entity	
	2017	2016	2017	2016
	\$	\$	\$	\$
NOTE 7: CASH AND CASH EQUIVALENTS				
Cash and Cash Equivalents	<u>3,644,109</u>	<u>4,824,712</u>	<u>3,359,205</u>	<u>4,335,881</u>
	<u>3,644,109</u>	<u>4,824,712</u>	<u>3,359,205</u>	<u>4,335,881</u>

The effective interest rate on short-term bank deposits was 2% (2016: nil %)

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

	<u>3,644,109</u>	<u>4,824,712</u>	<u>3,359,205</u>	<u>4,335,881</u>
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	Economic Entity		Parent Entity	
	2017	2016	2017	2016
	\$	\$	\$	\$
NOTE 8: TRADE AND OTHER RECEIVABLES				
Current				
Other debtors	112,433	110,901	112,433	110,901
Newsletter debtors	11,852	10,522	11,852	10,522
Provision for impairment of receivables (a)	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>
	<u>124,285</u>	<u>121,423</u>	<u>124,285</u>	<u>121,423</u>
GST input credit	43,157	62,380	42,556	62,216
Receivable from controlled entity (b)	<u>-</u>	<u>-</u>	<u>20,811</u>	<u>68,697</u>
	<u>167,442</u>	<u>183,803</u>	<u>187,652</u>	<u>252,336</u>

(a) Provision for Impairment of Receivables

Current trade receivables are non-interest bearing and are generally receivable within 30 days. No impairment was required at 30 June 2017 (2016: Nil).

(b) Receivable from controlled entity

During the year the ADAVB did not provide any seed funding to its controlled entity, eviDent Foundation Ltd for the purpose of providing finance to continue its operations.

(c) Credit Risk

The economic entity and the parent entity have no significant concentration of credit risk with respect to any single counterparty or group of counterparties other than those receivables specifically provided for and mentioned within Note 8. The main source of credit risk to the economic entity and the parent entity is considered to relate to the class of assets described as 'trade and other receivables'.

The following table details the both the economic entity's and the parent entity's trade and other receivables exposed to credit risk (prior to collateral and other credit enhancements) with ageing analysis and impairment provided for thereon. Amounts are considered as 'past due' when the debt has not been settled within the terms and conditions agreed between the economic entity/parent entity and the customer or counterparty to the transaction. Receivables that are past due are assessed for impairment by ascertaining solvency of the debtors and are provided for where there are specific circumstances indicating that the debt may not be fully repaid to economic entity/parent entity. The balances of receivables that remain within initial trade terms (as detailed in the table) are considered to be of high credit quality.

Collateral held as security

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

**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2017**

NOTE 8: TRADE AND OTHER RECEIVABLES (continued)

Economic Entity	Gross Amount \$	Past due but not impaired \$	Past due but not impaired (days overdue)				Within initial trade terms \$
			<30 \$	31-60 \$	61-90 \$	>90 \$	
2017							
Other debtors	112,433	-	27,000	76,078	7,346	1,844	-
Newsletter debtors	11,852	-	6,825	2,602	1,448	1,142	-
GST input credit	43,157	-	-	-	-	-	43,157
Total	167,442	-	33,825	78,680	8,794	2,986	43,157

The economic entity does not hold any financial assets whose terms have been renegotiated, but which would otherwise be past due or impaired.

	Gross Amount \$	Past due but not impaired \$	Past due but not impaired (days overdue)				Within initial trade terms \$
			<30 \$	31-60 \$	61-90 \$	>90 \$	
2016							
Other debtors	110,901	-	94,811	15,540	550	-	-
Newsletter debtors	10,522	-	5,530	3,956	342	694	-
GST input credit	62,380	-	-	-	-	-	62,380
Total	183,803	-	100,341	19,496	892	694	62,380

Parent Entity	Gross Amount \$	Past due but not impaired \$	Past due but not impaired (days overdue)				Within initial trade terms \$
			<30 \$	31-60 \$	61-90 \$	>90 \$	
2017							
Other debtors	112,433	-	27,000	76,078	7,346	1,844	-
Controlled entity debtor	20,811	-	20,811	-	-	-	-
Newsletter debtors	11,852	-	6,825	2,602	1,448	1,142	-
GST input credit	42,556	-	-	-	-	-	42,556
Total	187,652	-	54,636	78,680	8,794	2,986	42,556

2016							
Other debtors	110,901	-	94,811	15,540	550	-	-
Controlled entity debtor	68,697	-	68,697	-	-	-	-
Newsletter debtors	10,522	-	5,530	3,956	342	694	-
GST input credit	62,216	-	-	-	-	-	62,216
Total	252,336	-	169,038	19,496	892	694	62,216

The parent entity does not hold any financial assets whose terms have been renegotiated, but which would otherwise be past due or impaired.

**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2017**

	Economic Entity		Parent Entity	
	2017	2016	2017	2016
	\$	\$	\$	\$
NOTE 9: FINANCIAL ASSETS				
Current				
HTM Investments				
Held to Maturity Deposits				
	<u>1,175,000</u>	<u>905,000</u>	<u>1,175,000</u>	<u>905,000</u>
Non-current				
Available-for-sale financial assets:				
- Shares in listed corporations – at market value	<u>2,867,081</u>	<u>1,715,606</u>	<u>2,867,081</u>	<u>1,715,606</u>
	<u>2,867,101</u>	<u>1,715,606</u>	<u>2,867,081</u>	<u>1,715,606</u>

NOTE 10: CONTROLLED ENTITY

	Country of Incorporation	Percentage Owned*	
		2017	2016
		%	%
<i>Parent Entity</i>			
Australian Dental Association Victorian Branch Incorporated ('ADAVB')	Australia		-
<i>Subsidiaries of ADAVB</i>			
eviDent Foundation Ltd	Australia	100%	100%

* Percentage owned refers to voting power in proportion to membership

**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2017**

	Economic Entity		Parent Entity	
	2017	2016	2017	2016
	\$	\$	\$	\$
NOTE 11: PROPERTY, PLANT AND EQUIPMENT			*	
<i>Owned</i>				
Buildings				
At cost	5,090,400	5,090,400	5,090,400	5,090,400
Less accumulated depreciation	<u>(1,192,002)</u>	<u>(1,039,290)</u>	<u>(1,192,002)</u>	<u>(1,039,290)</u>
	<u>3,898,398</u>	<u>4,051,110</u>	<u>3,898,398</u>	<u>4,051,110</u>
Building Improvements				
At cost	1,198,257	1,198,257	1,198,257	1,198,257
Less accumulated depreciation	<u>(309,100)</u>	<u>(261,170)</u>	<u>(309,100)</u>	<u>(261,170)</u>
	<u>889,157</u>	<u>937,087</u>	<u>889,157</u>	<u>937,087</u>
Furniture and Equipment				
At cost	1,124,274	1,046,310	1,124,274	1,046,310
Less accumulated depreciation	<u>(874,972)</u>	<u>(788,040)</u>	<u>(874,972)</u>	<u>(788,040)</u>
	<u>249,302</u>	<u>258,270</u>	<u>249,302</u>	<u>258,270</u>
Reading Room				
At cost	534,465	534,465	534,465	534,465
Less accumulated depreciation	<u>(534,465)</u>	<u>(534,465)</u>	<u>(534,465)</u>	<u>(534,465)</u>
	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>
Total Property, Plant and Equipment	<u>5,036,857</u>	<u>5,246,467</u>	<u>5,036,857</u>	<u>5,246,467</u>

(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.
Furniture & fittings

Economic Entity & Parent Entity 2017	Buildings	Building Improve- ments	Furniture and Equipment	Reading Room	Total
	\$	\$	\$	\$	\$
Carrying amount at beginning of the year	4,051,110	937,087	258,270	-	5,246,467
Additions	-	-	77,964	-	77,964
Depreciation expense	<u>(152,712)</u>	<u>(47,930)</u>	<u>(86,932)</u>	<u>-</u>	<u>(287,574)</u>
Carrying amount at end of year	<u>3,898,398</u>	<u>889,157</u>	<u>249,302</u>	<u>-</u>	<u>5,036,857</u>
Economic Entity & Parent Entity 2016	Buildings	Building Improve- ments	Furniture and Equipment	Reading Room	Total
	\$	\$	\$	\$	\$
Carrying amount at beginning of the year	4,178,370	985,018	280,041	53,566	5,496,995
Additions	-	-	72,965	254	73,219
Disposals	-	-	(12,773)	-	(12,773)
Depreciation expense	<u>(127,260)</u>	<u>(47,931)</u>	<u>(82,163)</u>	<u>(53,820)</u>	<u>(311,174)</u>
Carrying amount at end of year	<u>4,051,110</u>	<u>937,087</u>	<u>258,270</u>	<u>-</u>	<u>5,246,467</u>

**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2017**

Note	Economic Entity		Parent Entity	
	2017	2016	2017	2016
	\$	\$	\$	\$
NOTE 12: TRADE AND OTHER PAYABLES				
Current				
Trade creditors	352,204	446,747	344,256	472,729
Subscriptions in advance	1,450,837	1,546,493	1,450,837	1,546,493
Other financial liabilities	1,211,107	1,134,945	1,211,107	1,134,945
Fees/Grants received in advance	200,973	147,865	200,973	147,865
Sundry creditors and accruals	<u>199,552</u>	<u>242,733</u>	<u>199,552</u>	<u>238,727</u>
	<u>3,414,673</u>	<u>3,518,783</u>	<u>3,406,725</u>	<u>3,540,759</u>
 <i>(b) Financial liabilities at amortised cost classified as trade and other payables</i>				
Trade and other payables:				
- Total Current	3,414,673	3,518,783	3,406,725	3,540,759
- Total Non-Current	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>
	3,414,673	3,518,783	3,406,725	3,540,759
Less: Amounts received in advance	<u>(1,651,810)</u>	<u>(1,694,358)</u>	<u>(1,651,810)</u>	<u>(1,694,358)</u>
Total financial liabilities as trade and other payables	<u>1,762,863</u>	<u>1,824,425</u>	<u>1,754,915</u>	<u>1,846,401</u>

NOTE 13: PROVISIONS

	Economic Entity		Parent Entity	
	2017	2016	2017	2016
	\$	\$	\$	\$
Analysis of Employee Provisions				
Current	368,485	318,828	368,485	318,828
Non-Current	<u>39,847</u>	<u>44,100</u>	<u>39,847</u>	<u>44,100</u>
	<u>408,332</u>	<u>362,928</u>	<u>408,332</u>	<u>362,928</u>

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.

**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2017**

NOTE 14: CAPITAL MANAGEMENT

Management controls the capital of the Association to ensure that adequate cash flows are generated to fund its financial requirements returns from investments are maximised. The Finance Risk and Audit Committee ensures that the overall risk management strategy is in line with this objective.

The Finance Risk and Audit Committee operates under policies approved by Council.

The Association's capital consists of financial liabilities, supported by financial assets.

Management effectively manages the Association's capital by assessing the Association's financial risks and responding to changes in these risks and in the market. These responses may include the consideration of debt levels.

There have been no changes to the strategy adopted by management to control the capital of the Association since the previous year. The strategy of the ADAVB is to have no borrowings.

Note	Economic Entity		Parent Entity	
	2017	2016	2017	2016
	\$	\$	\$	\$
Total borrowings				-
Trade and other payables	3,823,005	3,881,711	3,815,058	3,903,687
Less cash and cash equivalents	(3,644,109)	(4,824,712)	(3,359,205)	(4,335,881)
Net debt	(178,896)	(943,001)	(455,853)	(432,194)
Total equity	9,147,838	9,065,626	8,889,808	8,622,275
Total capital	9,326,734	10,008,627	9,345,661	9,054,469
Gearing ratio	-%	-%	-%	-%

NOTE 15: RESERVES

(a) Revaluation Reserve

The Revaluation Reserve records revaluation increments and decrements (that do not represent impairment write-downs) that relate to financial assets that are classified as available-for-sale.

NOTE 16: LEASING COMMITMENTS

(a) Operating lease commitments

Non-cancellable operating leases contracted for but not capitalised in the financial statements:

Note	Economic Entity		Parent Entity	
	2017	2016	2017	2016
	\$	\$	\$	\$
Payable				
- not later than one year	21,475	21,475	21,475	21,475
- later than one year but not later than five years	29,949	51,423	29,949	51,423
	51,424	72,898	51,424	72,898

Non-cancellable operating leases relate to office equipment with lease terms ranging from 1 to 5 years

**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2017**

Note	Economic Entity		Parent Entity	
	2017 \$	2016 \$	2017 \$	2016 \$
NOTE 17: RELATED PARTIES				
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	<u>2,243,158</u>	<u>2,257,382</u>	<u>2,243,158</u>	<u>2,257,382</u>
The following ADAVB Councillors are also ADA Councillors: Dr. A J Barnes, A/Prof. N Hewson and Dr. S Liew				
NOTE 18: CASH FLOW INFORMATION				
<i>(a) Reconciliation of cash</i>				
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	<u>3,644,109</u>	<u>4,824,712</u>	<u>3,359,205</u>	<u>4,335,881</u>
<i>(b) Reconciliation of cash flow from operations with surplus for the year</i>				
Surplus for the year	(68,024)	406,048	117,297	356,581
Non-cash flows in income	-	-	-	-
Depreciation	287,574	311,174	287,574	311,174
(Gain)/Loss on disposal of plant and equipment	-	-	-	-
Gain on disposal of investments	-	-	-	-
Changes in assets and liabilities:				
Decrease(Increase) in trade & other receivables	16,361	(87,629)	64,684	(161,198)
Decrease in prepayments	(8,605)	23,620	(8,399)	19,342
(Decrease)/increase in trade payables	(104,110)	208,540	(134,033)	232,932
Increase(Decrease) in other financial liabilities	-	36,622	-	36,622
Increase in provisions	<u>45,404</u>	<u>17,404</u>	<u>45,404</u>	<u>17,404</u>
Net cash from operating activities	<u>168,600</u>	<u>915,779</u>	<u>372,527</u>	<u>812,857</u>

**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2017**

NOTE 19: 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 value 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 2017
Economic Entity and Parent Entity	Level 1	Level 2	Level 3	Total
	\$	\$	\$	\$
Financial assets				
Investments - available for sale	2,867,081	-	-	2,867,081
	2,867,081	-	-	2,867,081
Non - Financial assets				
Buildings & Improvements	-	4,787,555	-	4,787,555
	-	4,787,555	-	4,787,555

Fair Value Measurement Building and Improvements

The fair value of buildings and improvements is determined at least every three years based on valuations by independent Valuers. At the end of each intervening period, the Council and Finance Risk and Audit Committee review the independent valuation and, where appropriate, update the fair value measurement to reflect current market conditions.

**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2017**

NOTE 20: 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 economic entity and the parent entity.

NOTE 21: CONTINGENT LIABILITIES

At reporting date there are no contingent liabilities (2016: \$nil)

NOTE 22: 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

STATEMENT BY THE MEMBERS OF THE COUNCIL

In the opinion of the Council the financial statements and notes, as set out on pages 30 to 50:

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 2017 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 Susan Wise
President



Dr Mark Bowman
Chair Finance Risk and Audit Committee

Dated this 28th day of August 2017

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 2017 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 2017 and their results for the year ended 30 June 2017.

A handwritten signature in black ink, reading "Matt Hopcraft". The signature is written in a cursive, flowing style. The first name "Matt" is written in a large, stylized 'M', and the last name "Hopcraft" follows in a similar cursive script.

Clinical A/Prof. Matthew Hopcraft
Chief Executive Officer

Dated this 28th day of August 2017



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 2017, 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 2017 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 council is responsible for the other information. The other information comprises the information included in the Association's annual report for the year ended 30 June 2017, 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.

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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.

A further description of our responsibilities for the audit of the financial report is located at the Auditing and Assurance Standards Board website at: http://www.auasb.gov.au/auditors_files/ar3.pdf. This description forms part of our auditor's report.

CROWE HORWATH MELBOURNE

A handwritten signature in black ink, appearing to read 'G. Robertson'.

Gordon Robertson
Partner

Melbourne, Victoria
28 August 2017

BRANCH AWARDS AT 2016/17

HONORARY LIFE MEMBERS

1959	Professor W J Tuckfield	2004	Mr G L Pearson (ADAVB CEO)
1959	Dr F A Aird	2006	Dr G Knight
1959	W S Wilkinson	2006	Dr J Locke
1959	Dr J M Lewis	2007	A/Prof G Quail OAM
1961	Dr R M Gillies	2008	A/Prof A Heggie
1961	Dr H R Cash	2008	Dr A Parker OAM
1962	Dr G Finlay MM	2008	Mr D Wiesenfeld
1968	Professor A B P Amies CMG	2009	Dr D Curnow
1969	Dr K T Adamson CMG	2011	Emeritus Prof L Brearley
1975	Dr J M Wark CBE		Messer AM
1977	Dr D F Spring OBE	2011	Dr S Cottrell
1979	Dr C R Newbury CBE	2012	Mr E Maurant
1980	Dr B G H Drysdale OAM	2013	Dr E Crawford AM
1984	Dr E W Kings OBE	2013	Laureate Prof E Reynolds AO
1984	Dr S G Kings AM	2013	Dr D Lawry
1989	Dr R G Hardham	2014	Dr J Boucher
1990	Dr S C Warneke AM	2014	Dr C Callahan
1991	Assoc. Prof. J Harcourt OAM	2015	Dr M Bowman
1992	Dr F T Widdop AM	2015	Dr R Green
1995	Dr B E Taylor	2015	Dr G Morris
1998	Dr R K Newbury	2016	Prof D Manton
1998	Dr L G O'Brien AO	2017	Dr G Burt
1999	Dr P R Finch	2017	Dr S Chen
2000	Dr P W Field	2017	A/Prof J Shand
2000	Dr D S Houghton		
2001	A/Prof N D Hewson		
2005	Dr J E Matthews		
2010	Dr G D Condon		

AWARD FOR DISTINGUISHED SERVICE

1985	Mrs E K Valmont (ADAVB staff)
1986	Dr R I Gillies
1987	Mr S Jensen (ADIA Member)
1988	Professor 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	Professor M J Tyas AM
1999	Assoc. Professor 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)

DENTISTRY ACHIEVEMENT AWARD

1998	Dr J A M Robertson AM
1999	Dr B Feiglin
2002	Dr G Dickinson
2002	Assoc. Prof. B Levant
2002	Dr C R Newbury CBE
2002	Dr G R Oakley AM
2002	Prof. E Storey ED
2003	Dr B G H Drysdale OAM
2003	Dr S C Warneke AM
2004	Dr A Lawrence
2004	Dr P Zimet
2004	Dr J Rattray
2004	Dr D Highfield
2005	Dr P Dalglish
2005	Dr P Wong
2007	Dr G Nervo
2008	A/Prof N 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

BRANCH STAFF

Mr G Pearson	Chief Executive Officer
Dr E Agnew	Community Relations Manager/ Professional Consultant
Mr G Aldous	Communications Manager (Retired Nov 16)
Mrs Y Bachtar	Receptionist
Ms R Bourchier	CPD Coordinator (Resigned May 17)
Dr S Brennan	Community Relations Officer/ Professional Consultant
Dr J Campbell	Community Relations Officer/ Professional Consultant (Locum)
Ms Lisa Legge	Executive Assistant
Ms T Davine	Practice Plus Consultant
Dr D Evans	Community Relations Officer/ Professional Consultant
Ms S Georgiades	Senior Administrative Officer
Ms C Kaur	CPD and Training Manager
Dr N Kilpatrick	Community Relations Officer/ Professional Consultant (Locum)
Ms A Lane	Practice Plus Co-Ordinator
Ms S Ljaskevic	Communications Manager
Ms N Mai	CPD Co-Ordinator
Ms T Mapper	Communications & Events Administrator
Ms S McMillan	Practice Plus Consultant
Dr A Monteith	Community Relations Officer/ Professional Consultant
Dr J O'Connor	Manager, Policy and Research
Ms J Oldfield	Communications Officer
Ms M Omizzolo	Community Relations Assistant
Dr R Paluch	Community Relations Officer/ Professional Consultant (Locum)
Ms R Papatheodorou	Communications & Events Administrator (Resigned April 17)
Ms M Quinn	Operations Manager/ eviDent Foundation, Chief Executive Officer
Dr A Robertson	Community Relations Officer/ Professional Consultant (Locum)
Mr J Stephens	Accountant
Ms C Workman	Membership Officer

PROFESSIONAL SERVICES

Auditors	Crowe Horwath
Solicitors/Lawyers	Health Legal (until March 16)
	Meridian Lawyers (From April 16)



**The Australian Dental Association
Victorian Branch Inc.**

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