GOVERNMENT OF WESTERN AUSTRALIA

PathWest
LABORATORY MEDICINE WA

Annual Report 2024/25

Science that serves

Statement of compliance

For year ended 30 June 2025

The Honourable Meredith Hammat MLA, Minister for Health; Mental Health

In accordance with section 63 of the *Financial Management Act 2006*, we hereby submit for your information and presentation to Parliament, the Annual Report of PathWest Laboratory Medicine WA for the financial year ended 30 June 2025.

The Annual Report has been prepared in accordance with the provisions of the *Financial Management Act 2006*.

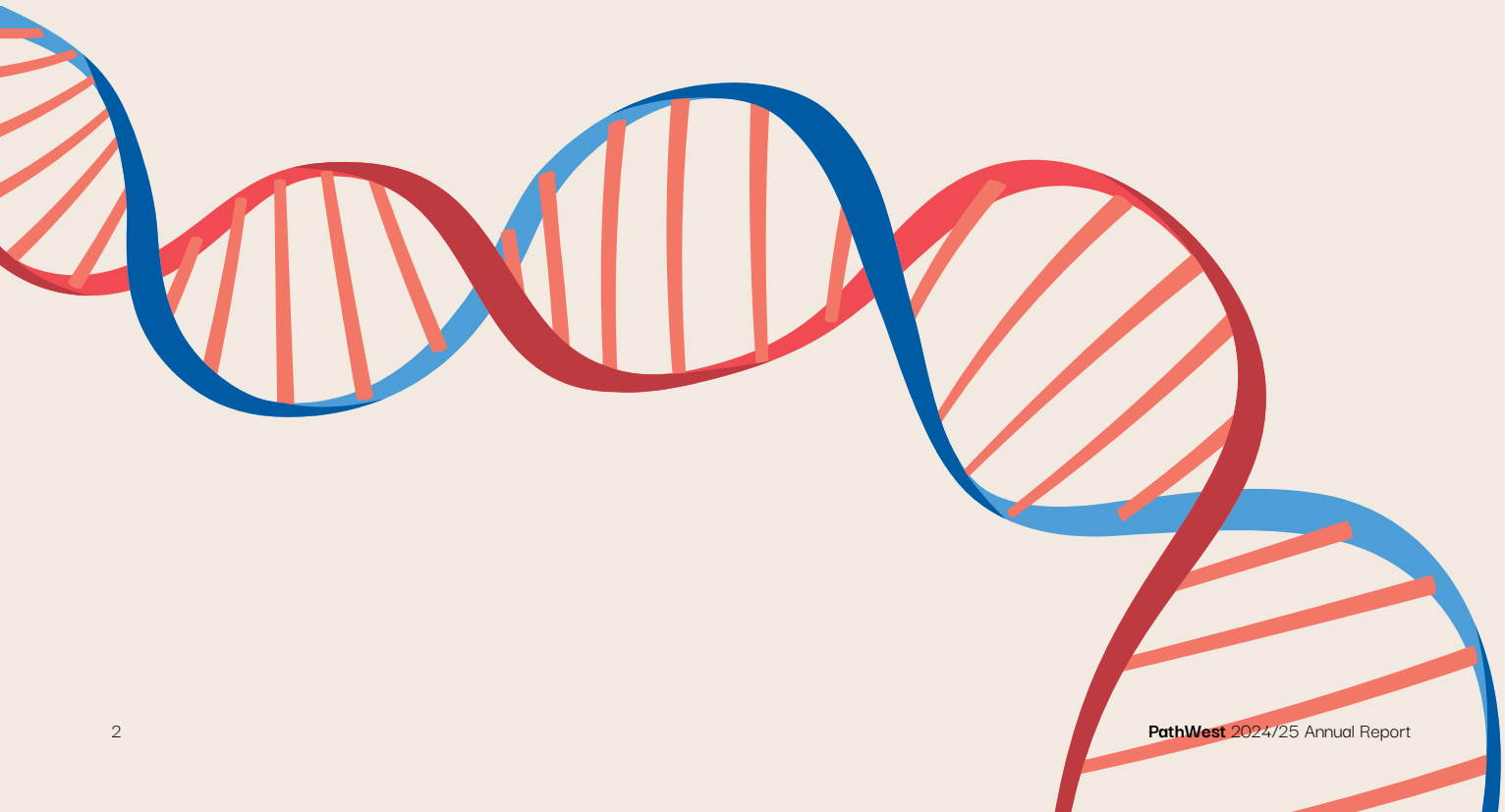
Angie Paskevicius
Chair
PathWest Board
5 October 2025

Samantha Elder
Chair, Finance, Risk and Audit Committee
PathWest Board
5 October 2025

Acknowledgement of our Aboriginal community

PathWest Laboratory Medicine WA (PathWest) acknowledges the Traditional Owners throughout Western Australia and their continuing connection to, and custodianship of, the dynamic cultures.

We acknowledge the wisdom of Aboriginal Elders both past, present and emerging and pay respect to Aboriginal communities of today.



Contents

Sarah's story

How revolutionary science gave Sarah a second chance

In November 2023, Sarah - a vibrant, 41-year-old mother of two and a fitness instructor - received a diagnosis that would change her life: Acute Lymphoblastic Leukaemia (ALL), an aggressive cancer of the blood and bone marrow that affects white blood cells. The news was devastating, but Sarah faced it with courage and determination.

Her treatment began with four rounds of intensive chemotherapy to target the cancer and prepare her body for the next critical step. In March 2024, she received a stem cell transplant. The donor, a complete stranger from overseas, became an unexpected lifeline in her journey to recovery.

Behind the scenes, a multidisciplinary team of scientists, clinicians, and logistics experts worked seamlessly to ensure the donor cells were safely transported and met the highest standards of quality and compatibility.

But just weeks later, Sarah's cancer returned. The hope of a cure felt heartbreakingly distant. Standard treatments had failed, and her future was uncertain. But medical science offered another unique opportunity.

On May 5 2025, Sarah became the second adult in Western Australia to receive CAR-T cell therapy for ALL – a revolutionary treatment that reprograms the body's own immune cells to target and destroy cancer. The therapy was made possible through the coordinated efforts of PathWest's **Bone Marrow Transplant and Immunology laboratories**, hospital clinicians, **Lifeblood**, the **World Marrow Donor Registry**, commercial partners, and government support.

This milestone for Sarah marks more than just a personal triumph – it signals a new era in cancer care. With PathWest at the forefront, Western Australia now offers advanced cell therapies to patients battling rare and aggressive cancers.

These therapies are not only transforming outcomes in blood cancers like Sarah's, but are also being trialled in solid organ cancers and immune diseases, expanding the horizon of hope for many more.

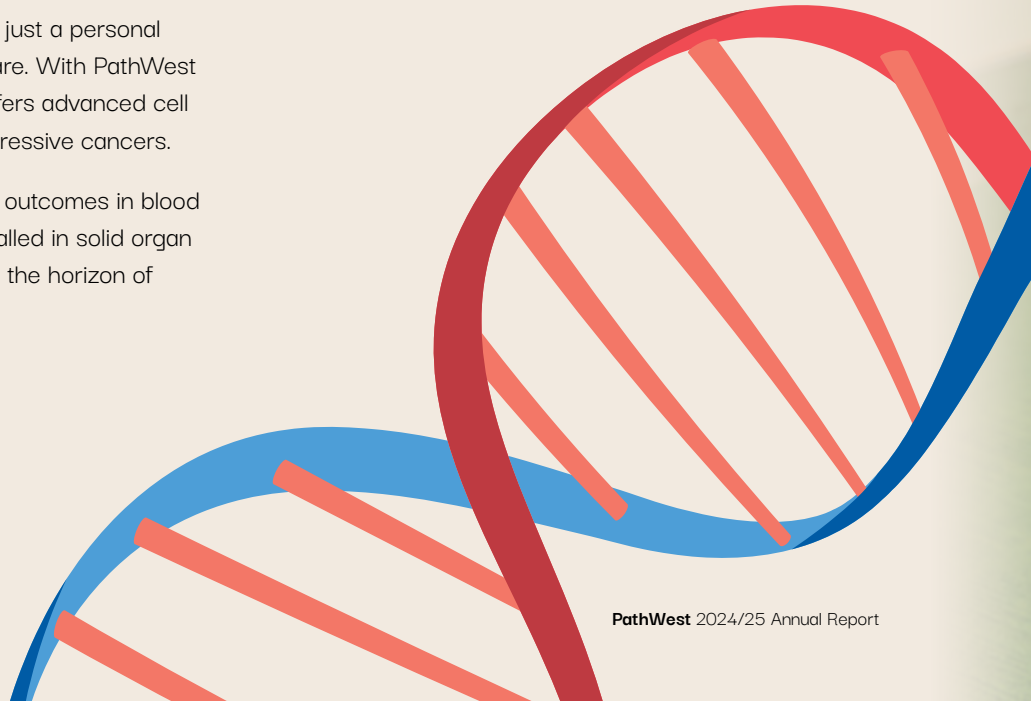
Sarah's story is a testament to the potential of cell therapy and the dedication of the teams who make it possible. At PathWest, up to 100 people contribute to each patient's journey, from laboratory scientists and pathologists to quality assurance experts and couriers. As one of only three Foundation for the Accreditation of Cellular Therapy (FACT) -accredited facilities in Australia, PathWest continues to lead the way in delivering life-saving therapies.

"A big thank you because PathWest are at the forefront of everything... the ongoing support with every blood test that we do, they're very compassionate and gentle, and they give you the time of day to get what is needed done."

At the heart of every clinical decision and laboratory process is a patient like Sarah—someone whose life depends on our precision, dedication, and care.

Her journey is a powerful example of how science, when guided by purpose, can transform lives.

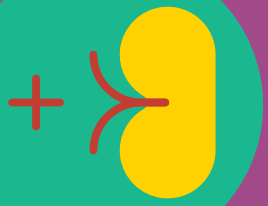
Scan to watch Sarah share her story in her own words and learn more about her treatment journey.



Welcome
Year in review

14,357,172 → Laboratory Tests

Donor Organs Matched



→ 150

263k+ → Phone Calls

34k → Crime Scene Exhibits

Regional Scholarships

→ 9

3,200+ → Post Mortem Exams

Foreword

We are pleased to present the 2024/25 Annual Report for PathWest Laboratory Medicine WA.

This year marks a significant milestone for PathWest – 20 years of delivering trusted, world-class pathology services to the people of Western Australia. As we reflect on this legacy, we also look ahead with optimism and purpose, guided by our theme for this year's report: ***Science that serves***.

At PathWest, science is more than a discipline – it is how we serve, support, and stand beside our communities. It is the force behind every diagnosis, every treatment decision, every moment of clarity for patients and families. It is the foundation of public health, justice, and innovation.

In 2024/25, our teams demonstrated the power of science in service to our communities. Together, they delivered more than 14 million tests, upholding world-leading standards of quality and accuracy, and provided clinicians with trusted diagnostics. Each test reflects the dedication of staff working behind the scenes to provide answers and assurance to patients and families.

Among the many lives touched by our work was that of Sarah Malone, one of the first adults in Western Australia to receive CAR-T cell therapy for acute lymphoblastic leukaemia, a groundbreaking treatment made possible through the coordinated efforts of our Bone Marrow Transplant and Immunology laboratories. In this report, Sarah generously shares her own story, exemplifying how science, compassion, and collaboration can transform lives.

Throughout the year, our people introduced new diagnostic capabilities that are already making a difference for Western Australians. We are working to achieve the reality of whole genome sequencing to provide long-awaited answers for families facing rare diseases. Nanopore sequencing is allowing faster responses to outbreaks. Digital pathology is creating new and critical opportunities for pathologists to collaborate on complex diagnostic cases, helping to ensure the most accurate diagnosis for each individual patient. Expanded newborn screening is giving families the reassurance that life-threatening conditions can be detected early, when intervention matters most.

Our forensic scientists also continued to advance justice through innovation. With the introduction of Forensic Investigative Genetic Genealogy (FIGG), PathWest played a pivotal role in solving decades-old cases, bringing closure to families and strengthening community confidence in justice.

The dedication of our people extends beyond science. Staff across PathWest championed sustainability, reducing our environmental impact through initiatives such as biodegradable blood delivery bags which saved over 29,000 plastic bags annually, supporting the "Think Before You Test" program to reduce unnecessary testing, and the introduction of our first electric courier vehicle. These projects reflect a workforce motivated not only by clinical outcomes but also by responsibility to future generations.

We also advanced our Child Safeguarding Program, embedding trauma-informed care into every aspect of our paediatric services. This initiative supports more than 60,000 paediatric collections annually, ensuring that even our youngest patients receive care that is safe, respectful, and empowering.

We are proud of our workforce, which continues to grow in capability and diversity. This year, we supported nearly 5,000 days of student placements, expanded regional scholarships, and celebrated staff recognised in the WA Health Excellence Awards, including winners in workplace wellbeing and primary care integration.

We also celebrate the outstanding achievement of our Chief Pathologist, Clinical Professor Priyanthi Kumarasinghe, who was awarded the Distinguished Fellow Award by the Royal College of Pathologists of Australasia. This prestigious honour is reserved for Fellows who have made exceptional contributions to pathology through leadership, research, and education, and who have attained a position of eminence in their field. Professor Kumarasinghe's recognition reflects her decades of dedication to diagnostic excellence and her influence in shaping the future of pathology in Australia and beyond.

At the heart of every achievement is our people. Our clinicians and laboratory staff, as well as our teams behind the scenes, all contribute meaningfully to the safety, quality, and impact of our services. Their work is essential, and their dedication is deeply valued.

To our staff, thank you. Your expertise, dedication, and care are the heartbeat of our organisation. To our partners and stakeholders, thank you for your collaboration and trust. Finally, to the patients, families and communities we serve, thank you for trusting us to be part of your healthcare journey.

As we celebrate 20 years of service, we remain focused on the future. Our strategic projects, from digital transformation to genomic innovation, will ensure PathWest remains responsive, resilient, and ready to meet the evolving needs of Western Australians.

Together, we continue to deliver ***Science that serves***, building a healthier, safer, and more connected Western Australia.

Dr Narelle Hadlow
Chief Executive
PathWest

Angie Paskevicius
Board Chair
PathWest

Financial summary

COST OF SERVICE Details from Statement of Comprehensive Income	2024/25 estimate ($'000)	2024/25 actual ($'000)	Variance ($'000)
Total cost of service	**442,849**	**490,571**	**47,722**
Net cost of service	**385,103**	**427,626**	**42,523**

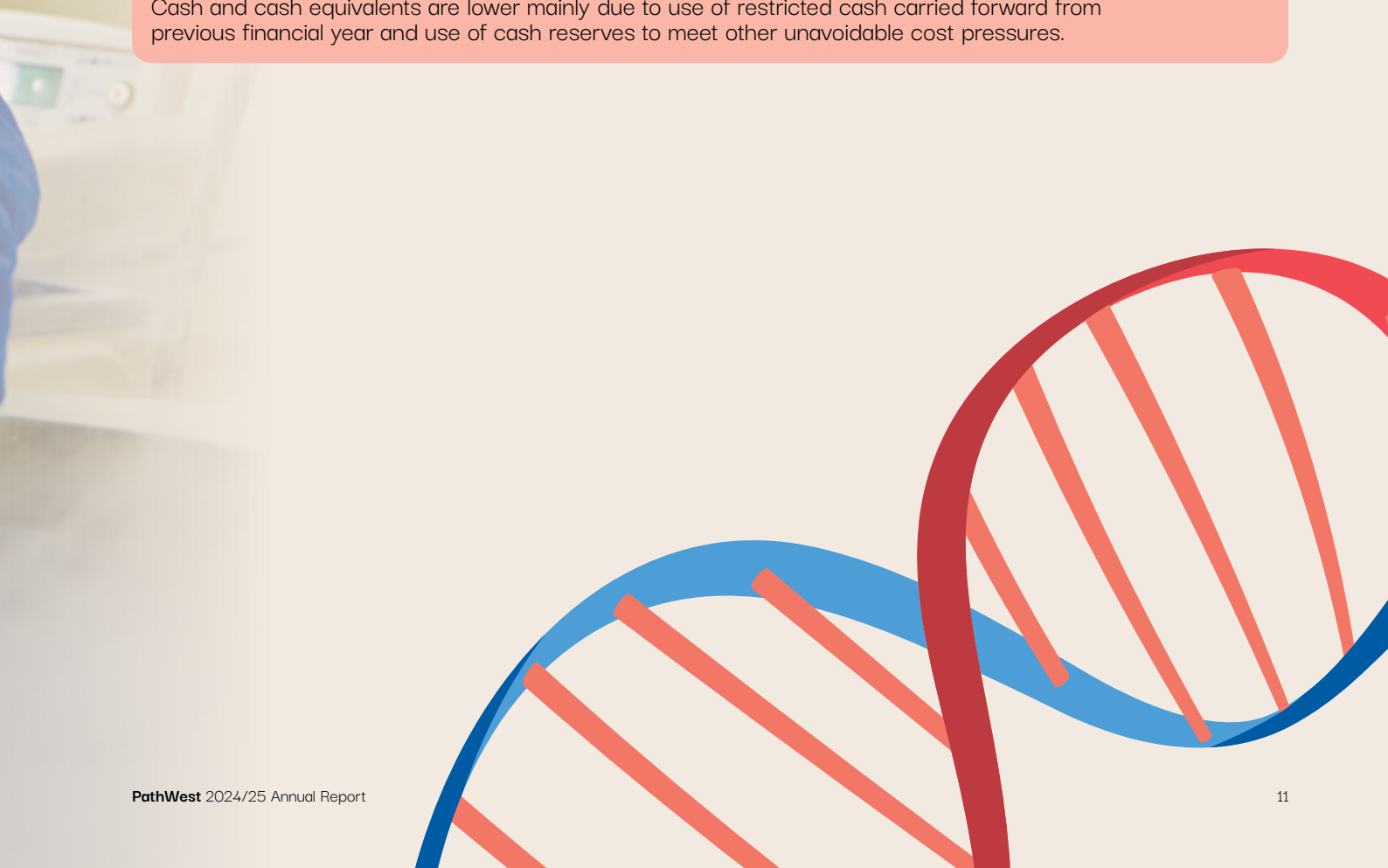
Total cost of service is 11% higher than estimate mainly due to higher staffing and consumables' cost associated with higher than estimated testing activity, unbudgeted wages policy impacts and increased indexation on goods and services.

EQUITY Details from Statement of Financial Position	2024/25 estimate ($'000)	2024/25 actual ($'000)	Variance ($'000)
Total equity	**282,900**	**288,637**	**5,737**

Not applicable

CASH Details from Statement of Cash Flow	2024/25 estimate ($'000)	2024/25 actual ($'000)	Variance ($'000)
Cash Equivalents	**32,134**	**26,877**	**(5,257)**

Cash and cash equivalents are lower mainly due to use of restricted cash carried forward from previous financial year and use of cash reserves to meet other unavoidable cost pressures.



Outcomes summary

Key Performance Indicators (KPIs) assist PathWest to measure our achievement of the outcomes outlined in the Outcome Based Management (OBM) Framework. Please see page 85 for full Key Performance Indicators.

Outcome 2: Prevention, health promotion and aged and continuing care services that help Western Australians to live healthy and safe lives.

Key effectiveness indicator

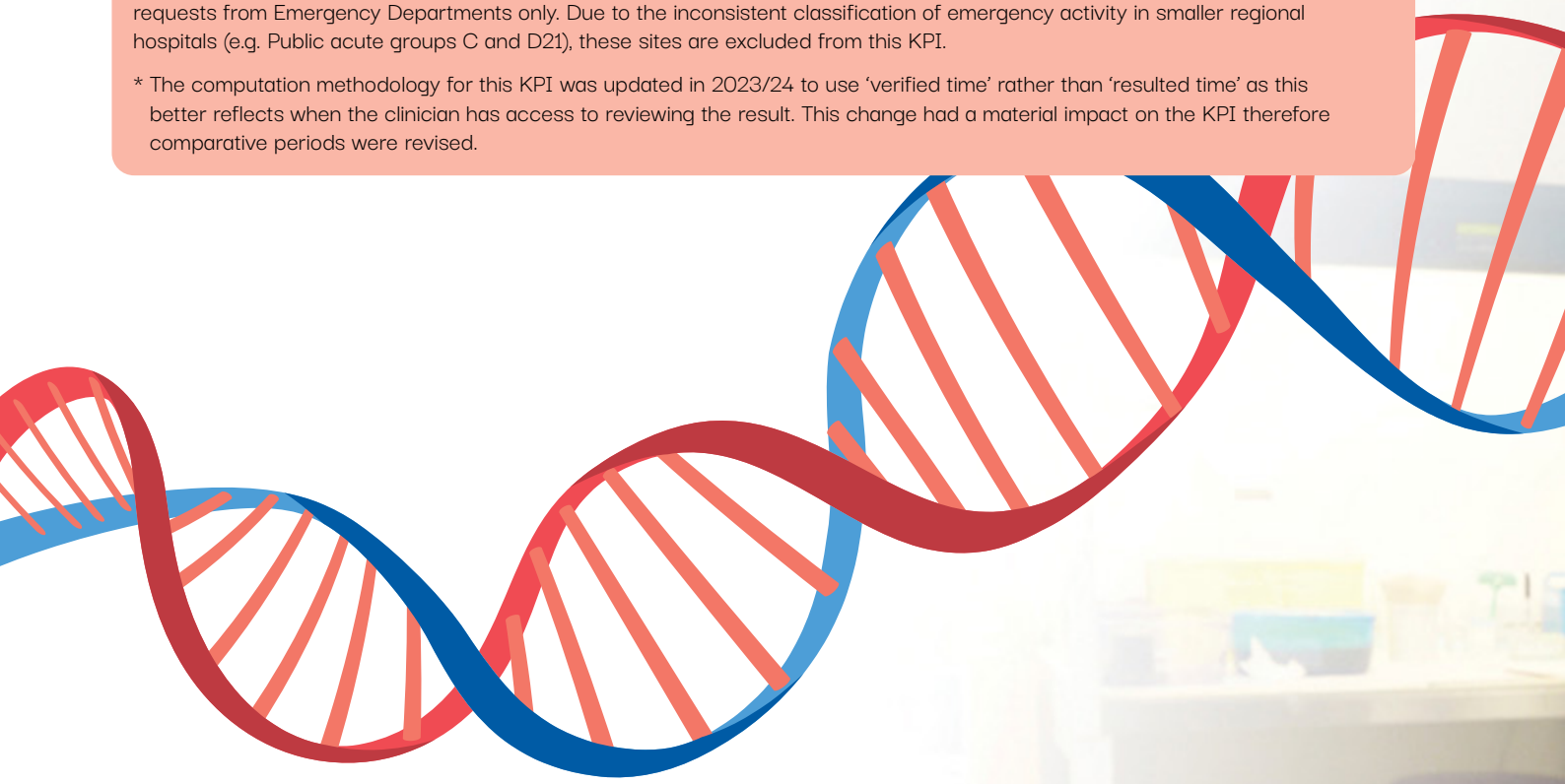
KPI 1: Percentage of PathWest test results available to Emergency Departments within the required timeframe (in laboratory to verified time): (a) Haemoglobin (40 minutes); (b) Potassium (40 minutes); (c) Troponin (50 minutes).

Results: 671,527 tests from 11 hospital Emergency Departments were assessed against the targets during 2024/25. All three KPIs were met, with stable or improved performance noted over the previous year.

Test	2021/22 Revised*	2022/23 Revised*	2023/24 Actual	2024/25 Target	2024/25 Actual
Haemoglobin	97%	97%	96%	88%	96%
Plasma Potassium	72%	74%	75%	67%	77%
Troponin I	71%	73%	75%	74%	75%

Note: This KPI is based on Australian Council on Healthcare Standards' (ACHS) indicators which are specific to pathology requests from Emergency Departments only. Due to the inconsistent classification of emergency activity in smaller regional hospitals (e.g. Public acute groups C and D21), these sites are excluded from this KPI.

* The computation methodology for this KPI was updated in 2023/24 to use 'verified time' rather than 'resulted time' as this better reflects when the clinician has access to reviewing the result. This change had a material impact on the KPI therefore comparative periods were revised.




PathWest
PathWest

Key effectiveness indicator

KPI 2: Percentage of PathWest Quality Assurance Program (QAP) results within an acceptable range

Results: 140,032 QAP test results submitted to the Royal College of Pathologists Australasia (RCPA) for validation were included in the KPI measurement for 2024/25. The reported results are based on submissions due and tendered during 2024/25.

Division	2021/22 Actual	2022/23 Actual	2023/24 Actual	2024/25 Target	2024/25 Actual
Anatomical Pathology	99%	98%	99%	100%	100%
South-East Division	98%	98%	98%	100%	98%
North-West Division	98%	97%	98%	100%	97%
Regional Services	96%	98%	98%	100%	97%
PathWest Total	**97%**	**98%**	**98%**	**100%**	**97%**

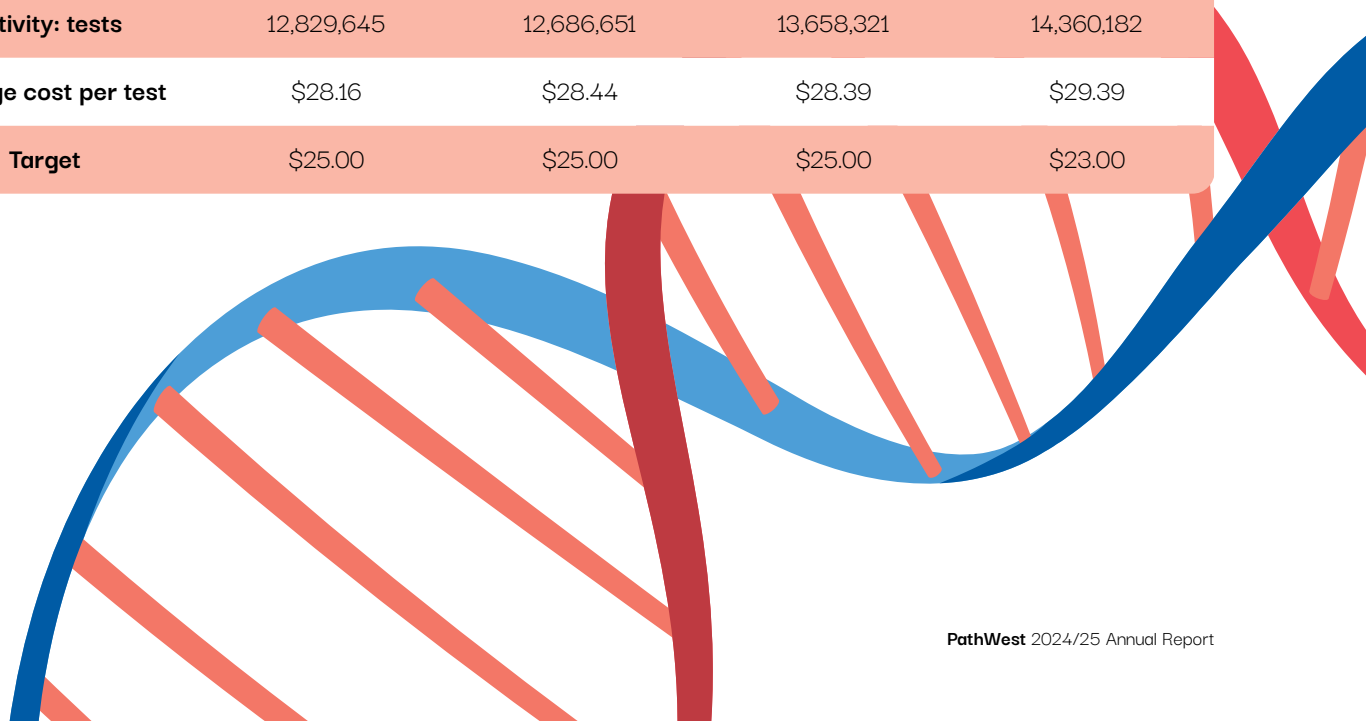
* While there is not an industry defined target, PathWest uses the theoretical target of 100% passed to drive continuous quality improvement across the organisation.

Key effectiveness indicator

KPI 3: Average cost of pathology services per test

Results: Increasing demand for pathology services resulted in an increase in test activity compared to 2023/24. The increase in expenditure and average cost per test was largely due to increases in CPI and wages policy (5% wage increase for most staff), an increase in costs for services provided free of charge by Health Support Services and costs associated with processing increased volume of tests.

Division	2021/22	2022/23	2023/24	2024/25
Expenditure	$361,257,121	$360,826,890	$387,703,464	$422,061,778
Activity: tests	12,829,645	12,686,651	13,658,321	14,360,182
Average cost per test	$28.16	$28.44	$28.39	$29.39
Target	$25.00	$25.00	$25.00	$23.00



Who we are

At a glance

9
Metropolitan laboratories

18
Regional and remote laboratories

1
State Mortuary

1
Media manufacturing unit.

1
Forensic Biology laboratory

25
Metropolitan collection sites

55
Regional collection sites

Supporting health, justice and industry across Western Australia

PathWest is Western Australia's public pathology provider, delivering trusted, fully accredited, world-class diagnostic, forensic, and commercial testing services that support the health, safety, and wellbeing of our communities.

With an extensive network of public hospital laboratories, community-based patient collection centres, and specialist testing facilities, PathWest provides the largest and most comprehensive range of testing services in WA. Our work spans clinical diagnostics, forensic, and commercial testing, playing a vital role in patient care, public health, justice, and medical research across the State.

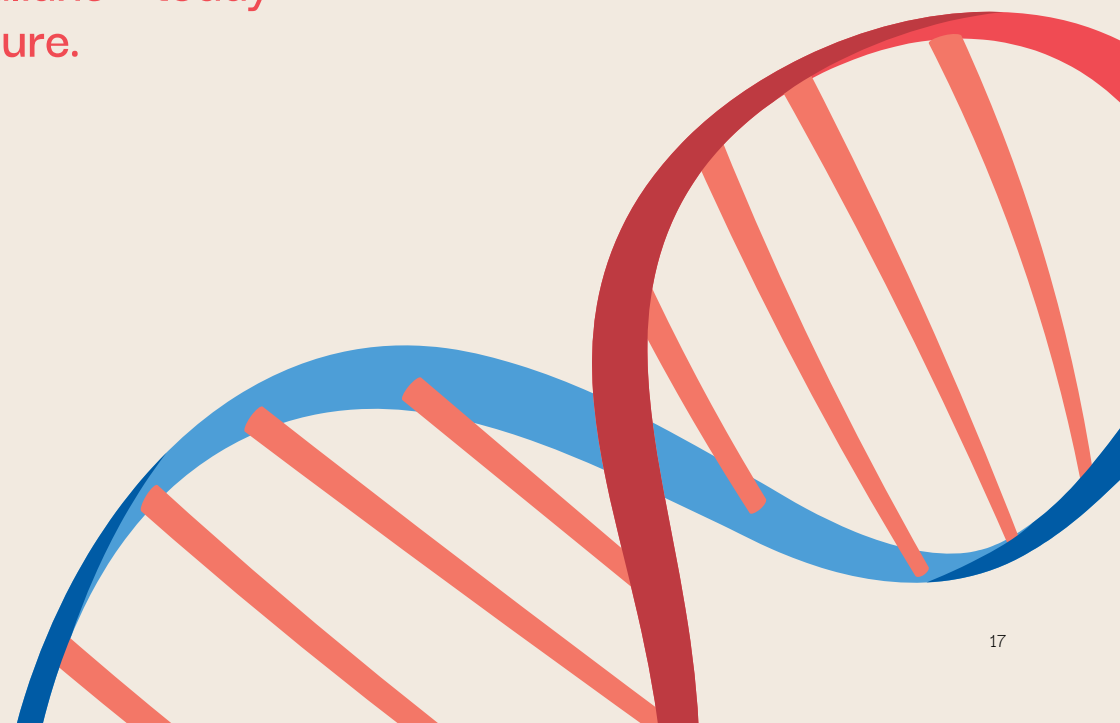
From major metropolitan hospitals to the most regional and remote towns, PathWest provides critical insights that support healthcare professionals, law enforcement, and commercial clients in making informed decisions.

Our testing services:

- Diagnose diseases, infections and cancers
- Predict susceptibility to disease and health risks
- Prevent disease by identifying modifiable risk factors
- Determine patient prognosis and treatment pathways
- Personalise care to achieve the best clinical outcomes
- Support criminal investigations through DNA profiling and biological evidence analysis
- Assist in victim identification and coronial enquiries
- Collaborate with law enforcement and the justice system to uphold public safety
- Provide tailored commercial testing solutions to meet regulatory and operational needs
- Ensure rapid, reliable results that support innovation, compliance, and decision-making.

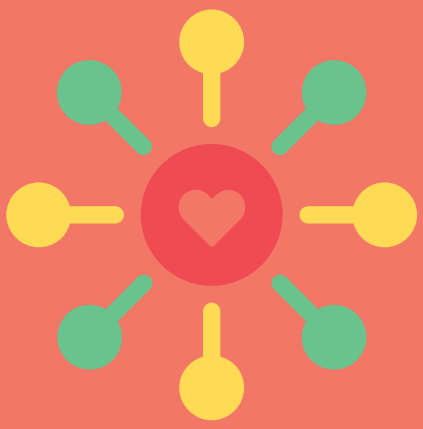
As healthcare, justice, and industry continue to advance, so do we. PathWest remains dedicated to innovation, collaboration and staying closely connected to what matters most – delivering testing services that improve health, safety, and justice outcomes across the State.

We are proud to be supporting the health and wellbeing of Western Australians – today and into the future.



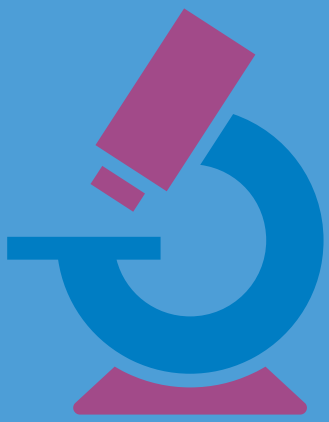
Purpose, vision and values

Purpose



Improving the health, wellbeing and safety of our communities.

Vision



PathWest is a leader in our field and positively impacts our society and environment through the pursuit of excellence and innovation.

Values

C.A.R.E

Care
for our communities and our staff

Our services exist to care for our communities and keep them healthy and safe. We foster a caring culture with each other and those we serve.

Accountability
for our actions

We acknowledge our commitments and keep our promises. We take responsibility for our actions and our role in delivering excellent outcomes.

Respect
for ourselves and others

Our differences and uniqueness are embraced. By respecting who we work with and engage with, we create a safe and productive environment.

Excellence
at all times

What we do affects lives. We recognise the need to foster innovation and perform our duties and tasks to the best of our abilities and to the highest standards.

Strategic direction

PathWest's Strategic Plan 2021-2025 was shaped through extensive engagement with staff, patients, and other stakeholders. It defines our aspirations and goals, outlines the strategic positioning required to meet stakeholder needs, and sets out the actions necessary to achieve success.

As part of the broader WA Health system, PathWest's Strategic Plan aligns with the WA Government's priorities – building safe, strong, and fair communities; empowering local and regional areas to thrive; and delivering high-quality, sustainable, and accountable healthcare for all Western Australians.

The Plan is built around key strategic pillars – community, staff, services, governance, research, teaching, and the environment – which reflect our vision to lead in pathology and our commitment to excellence, innovation, and positive societal impact.

While this strategic plan continues to guide our current initiatives, work is actively underway to develop the next strategic plan, ensuring alignment with emerging priorities and future opportunities.

Place customers and communities at the heart of what we do

We exist for the communities and citizens of Western Australia. We are here to serve and look after them. Our success is measured in their gain.

Deliver world class pathology and forensic services

We are defined by the quality of the services we provide. They are critical statewide services and we have a passion for and responsibility to pursue and deliver excellence.

Engage, develop and inspire our people

Our staff are our biggest asset. Without their knowledge, skills and valued contributions we cannot succeed. Our collective commitment to develop and excel is a fundamental element of who we are.

Excel in research, innovation and teaching

Our staff have the skills to create new boundaries, and advance knowledge and learning. We seek to embrace and enable our role in this goal.

Maintain robust governance and financial sustainability

The effective and safe management of key resources is critical. We have a duty to provide a safe environment and highly functioning organisation delivering key public services.

Protect our environment

We care for and respect our planet. We recognise the need to address the impact our activities have on its health and future. Doing our part to look after our environment is a fundamental part of caring for our communities.

Figure 1: PathWest Strategic Pillars, PathWest Strategic Plan 2021-25

Patient impact

Pre-analytical services

Science that serves – behind-the-scenes care that powers diagnostics

The impact on patient care

Reliable and timely sample collection with over 10,000 daily collections across hospitals, clinics and specialised services.

Faster diagnosis and treatment through efficient transport and 24/7 specimen processing.

Improved emergency care with dedicated cannulation services in Emergency Departments.

Responsive support with 97% of patient and clinician calls answered in under one minute.

Safer care for children thanks to trauma-informed procedures developed under the child safeguarding program.

Pre-Analytical Services is an integral department of PathWest responsible for the pathology processes prior to testing. Pre-Analytical Services comprises three divisions including Specimen Collection (Phlebotomy), Pathology Transport and the Central Specimen Reception Area (CSRA). These divisions collectively service multiple collection centres, laboratories, and other locations throughout the Perth Metropolitan area, across extended hours, including 24 hours a day in some locations.

Our Phlebotomy services comprise 220 collection staff and perform approximately 10,200 collections a day for inpatients and through collection centres in six major metropolitan hospitals, 15 community collection centres and in prisons, Emergency Departments, Department of Justice, Mental Health Facilities and Sexual Health Clinics. In 2024/25, our Phlebotomy services commenced use of reusable tourniquets that are sterilised between use, significantly reducing our environmental footprint.

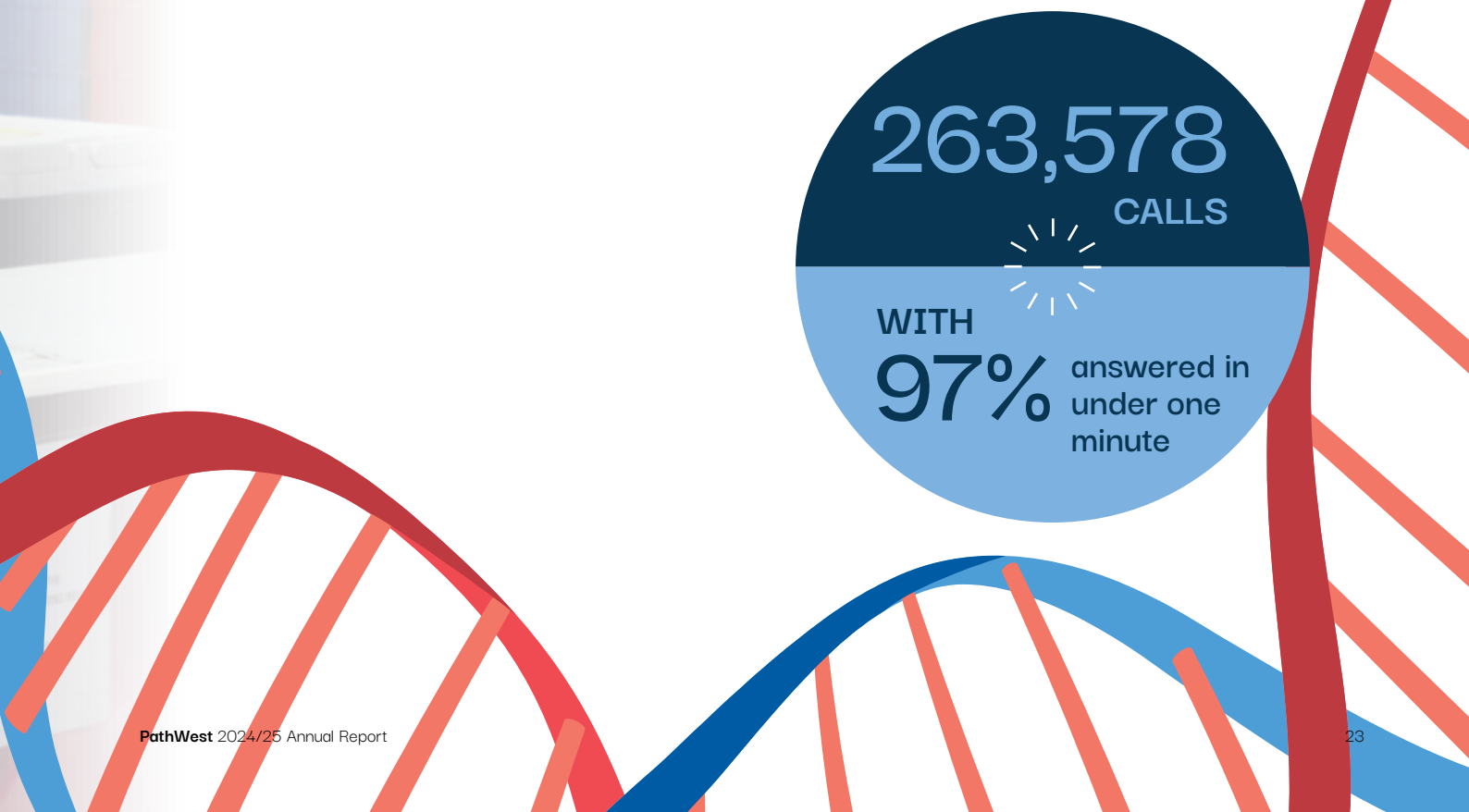
Our transport division, integral to our network's efficiency, services the above locations, private clinics and collects samples from airports from regional centres and is highly adaptable to meet critical patient needs such as transport of blood products. It also plays a key role in the distribution of critical equipment, documents, consumables and other goods.

CSRA operates three 24/7 laboratories for the receipt, processing, registering and distribution to laboratories of samples for timely testing for patient diagnosis. CSRA also manages Clinical Trials at Fiona Stanley Hospital (FSH), Royal Perth Hospital (RPH) and QEII Medical Centre to enhance medical treatments and interventions, the Customer Contact Centre, Data Integrity Unit and Mailroom.

CSRA continues to expand its Cannulation Service for Hospital Emergency Departments and with the inclusion of Armadale Health Service in early 2025, PathWest now services five hospital Emergency Departments in the Perth Metropolitan area. This important service allows medical staff to focus on other key medical services within Emergency Departments.

Our Customer Contact Centre, a key source of information for patients and clinicians, received 263,578 calls over the 12 months to June 2025 with 97% answered in under one minute, reflecting PathWest's commitment to excellent customer service.

Significant work has occurred under the Child Safeguarding Program in the management of paediatric patients by Pre-Analytical Services, including the development of a new Standard Operating Procedure aimed at reducing childhood trauma through concise instructions on how to puncture a needle safely whilst obtaining consent from a child.



Our statement of commitment to child safety

"PathWest is committed to ensuring the safety and wellbeing of all children who interact with pathology collection services. We recognise and respect the diverse needs of children and their families, ensuring our services are inclusive, welcoming, and culturally sensitive.

We align our practices with the National Principles for Child Safe Organisations, reinforcing our responsibility to provide a secure and supportive environment for all children and families accessing our services."

PathWest is deeply committed to providing safe, respectful and empowering care for children accessing our services. In June 2025, we launched the first phase of our Child Safeguarding Program, which included the release of our Statement of Commitment to Child Safety and "Ready, Set, Test!".

Grounded in the National Principles for Child Safe Organisations, the Child Safeguarding Program supports a whole-of-government approach to creating inclusive, trauma-informed environments for children and families accessing healthcare.

Pathology collection is one of the most frequent medical procedures that children experience.

Research shows:

- Up to **80%** of young children experience high distress during collections
- **63%** of children and 50% of adolescents fear needle procedures
- **25%** of adults with untreated childhood needle phobia avoid healthcare.

These experiences can lead to long-term trauma and poor health outcomes.

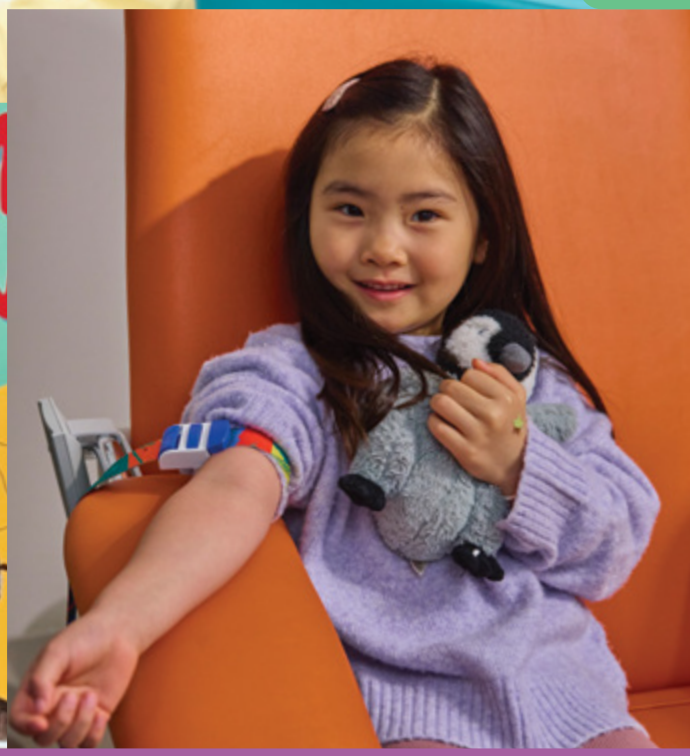
With over **60,500** paediatric collections annually, PathWest developed **Ready, Set, Test!** – a trauma-informed approach that prioritises emotional safety and empowers children, families, and staff.

Key features include:

- **Comfort Cards** to help staff personalise care based on each child's needs
- **Caregiver Education** for practical resources to support families
- **Paediatric Standard Operating Procedures (SOPs)** to standardise, child-centred procedures
- **Child-Friendly Feedback Channels,** giving children a voice in their care
- **Collaborative Design** co-created with Health Service Providers.


Thank yo
being


GAM
PLAN
READY SET TEST!
PathWe
LABORATORY MEDICI




READY SET TEST!

Haematology

Science that serves – precision diagnostics and life-saving therapies

The impact on patient care

Faster, more accurate diagnoses for conditions like anaemia, clotting disorders, and blood cancers – leading to quicker treatment decisions and better health outcomes.

Improved cancer monitoring through advanced testing that tracks treatment effectiveness and supports personalised care.

Access to advanced therapies such as stem cell collection and clinical trials like CAR-T cell therapy, offering life-changing options.

Safe and reliable transfusions across the state, ensuring patients receive safe, compatible blood transfusions when they need them most.

Better support for rare and complex conditions through biobanking and advanced genetic testing, enabling access to more accurate and emerging therapies.

Haematology offers a wide range of tests key to the diagnosis, monitoring and treatment of blood disorders. These tests cover conditions ranging from abnormalities of blood counts such as anaemia through to cancers (e.g. blood/bone marrow tests for Leukaemia/lymphoma) and bleeding and clotting disorders. Tests are performed on different samples such as blood, bone marrow and other tissues and include automated (e.g. standard blood count) and manual (microscopic examination of blood/bone marrow) processes. Routine and complex Haematology testing occurs statewide encompassing 27 PathWest laboratories.

In 2024/25 Haematology reported over 2.9 million test results of which over 1.6 million of these were full blood counts with 449 000 blood films reviewed across the State. Coagulation tests and reviewing patient clotting accounted for 313 000 tests over the same period. Haematology continued to demonstrate ongoing growth with a 6% increase in testing between 2024 and 2025.

PathWest also provides comprehensive transfusion services statewide managing more than 30,000 blood product orders in 2024/25, with regional laboratories performing over 6000 crossmatches, providing compatible blood products for transfusions to hospital patients.

In 2025, new flow cytometers were installed at the QEII and FSH laboratories, improving diagnostic capabilities and affording measurable residual disease testing, a key test in monitoring multiple types of blood cancers.

Haematology's specialist Cellular Therapy and Biobanking laboratory at QEII supported patients undergoing stem cell collection and infusion and a variety of clinical trials and research activities. Stem cells for nearly 100 patients from Sir Charles Gairdner Hospital supported autologous stem cell therapy for a similar number of patients. This process facilitates potentially curative therapy for patients living with lymphoma and life-prolonging treatment in Myeloma. It is performed alongside routine biobanking (>1200 samples banked) and clinical trials for new cellular therapies such as CAR-T Cell and tumour infiltrating lymphocyte studies.

The Bone Marrow Transplant Laboratory at FSH continued to support a growing clinical program with a projected 2025 processing rate of over 370 products. CAR-T cell therapy and other Immune Effector Cell therapies currently sit at 39 for 2025 (January to June 30). This is a 139% increase on the total numbers for full year 2024 demonstrating the development and uptake of new therapies.

Staff at QEII's Haematology laboratory worked closely with liver transplant surgeons to establish a normothermic machine perfusion (NMP) process at Sir Charles Gairdner Hospital. NMP allows a donated liver to be warmed and undergo a functional assessment before the decision is made to proceed with transplant. This facilitated some organs that may otherwise have been unsuitable for transplant to be used successfully. This is key given the steadily rising demand for transplantation and significant morbidity and mortality while awaiting transplant. Our QEII Haematology Laboratory is also providing blood product support (red cells and plasma) for liver perfusion, working in conjunction with QEII Biochemistry which is conducting liver function testing.


PathWest

Exceptional support in theatre: praise for the transfusion medicine team

The Transfusion Medicine Team received heartfelt praise for their outstanding support during a complex cardiothoracic procedure at FSH.

Following a challenging case on 3 October 2024, Dr Jolene Lim, Consultant Cardiothoracic Anaesthetist, shared her appreciation on behalf of the cardiac anaesthetic consultant team:

"I would like to extend a huge thank you and compliment the Transfusion Medicine Team for their support in the care of our patient who required a massive transfusion during a pacemaker lead extraction. These cases are often challenging and dynamic, requiring significant support when complications arise."

Dr Lim also acknowledged the team's ongoing contribution to cardiothoracic procedures:

"Many thanks once again for your team's support during this case and on a daily basis for many other cardiothoracic cases. I know that it can be very demanding and really appreciate the support from you and your team, which is essential to us being able to undertake such cases here."

This feedback highlights the skill, dedication, and teamwork of the Transfusion Medicine Team. Their calm expertise and consistent support continue to make a vital difference in complex and fast-paced clinical settings – another example of science that serves in action.

Biochemistry

Science that serves – fast, accurate testing from birth to critical care

The impact on patient care

Faster, more accurate diagnosis and monitoring through high-volume testing and advanced technologies like mass spectrometry and Point of Care (POC) devices.

Improved emergency and rural care with 24/7 testing across 26 laboratories and bedside diagnostics at 56 sites statewide.

Early detection of serious conditions in newborns, with over 30,000 babies screened for life-threatening disorders.

Better treatment outcomes through therapeutic drug monitoring and personalised testing to avoid toxic side effects.

Enhanced diagnosis of complex kidney and endocrine disorders, with new tests offering more reliable results and tailored care.

PathWest's Clinical Biochemistry laboratories analyse blood, urine, and other fluids to assess metabolic health, diagnose disease, and monitor treatment. These tests help determine a patient's metabolic status and monitor their response to treatment. Biochemistry also conducts research to develop new diagnostic tests and improve analytical methods.

Operating 24/7 in 26 laboratories across Western Australia to enable rapid turnaround for urgent requests, Biochemistry supports urgent care in trauma centres, Emergency Departments, and rural hospitals.

In 2024/25, Biochemistry processed:

- 1,882,973 test requests
- 572,143 Point of Care (POC) tests across 56 sites using more than 280 devices.

Over 49% of all PathWest requests involved Biochemistry, with 4.9% POC, reflecting the increasing use of this technology by clinicians.

Training has been a significant focus in 2024/25. Recognising the increasing role of POC testing, Biochemistry routinely liaises with POC testing operators to improve testing success rates and reduce operator errors. Biochemistry has also coordinated the delivery of best practice training in phlebotomy and capillary collection to POC testing staff. Newly onboarded interns have been trained to support proficient operation of blood gas analysers for improved patient care.

The WA Newborn Bloodspot Screening Program tested 30,623 babies for 53 life-threatening conditions, with consistently over 99.5% of babies being screened for the last 20 years, using a tiny sample of blood from a newborn baby's heel. The Biochemical Genetics Unit also performs urgent complex analyses such as metabolic screens, amino acid and acylcarnitine profiles on acutely unwell children or adults to inform diagnosis and treatment outcomes.

Through collaboration with clinical partners, our Toxicology and Pharmacology unit has developed new therapeutic monitoring tests to improve clinician treatment for patients and avoid toxic side effects.

For patients with endocrine disorders such as Diabetes Insipidus (DI) or Syndrome of Inappropriate Antidiuretic Hormone Secretion (SIADH), Biochemistry is introducing Copeptin testing–a more stable and accurate alternative to measuring antidiuretic hormone (ADH). Previously only available in Eastern Australia, this test improves diagnosis of water balance disorders and is now accessible in WA thanks to PathWest's Translational Research and Audit Fund.

Kidney function testing is one of PathWest's most requested services, with over 1,000 tests performed daily. While standard tests are effective for most, they can be less reliable in very young, elderly, or acutely ill patients. To address this, Biochemistry has introduced Cystatin C testing, a more sensitive method for assessing kidney health in complex cases, leading to more accurate diagnoses and personalised treatment plans.

Microbiology

Science that serves – protecting communities through innovation and rapid response

The impact on patient care

Early detection and tracking of infectious diseases like Respiratory syncytial virus (RSV), measles, and Mpox through genomic and wastewater surveillance.

Support for newborn health through the RSV immunisation program and monitoring of circulating virus strains to ensure vaccine effectiveness.

Safer water, food, and environments through rapid response to contamination events and expanded environmental testing.

Faster and more accessible cervical screening with self-collection enabled by upgraded HPV DNA testing platforms.

Rapid diagnosis of respiratory illnesses and reliable screening for hepatitis, HIV and syphilis, with improved testing algorithms and confirmation methods aligned with national standards.

Increased capacity and reliability in Microbiology services through upgrades to media manufacturing and laboratory platforms.

Both QEII and FSH tertiary laboratories service complex inpatient needs within their respective hospital, including ICU, burns, trauma, transplantation, paediatric, women's and children's, respiratory medicine and cancer care and provide an onsite rapid respiratory and Meningitis / Encephalitis PCR.

Microbiology Pathogen Genomics and Surveillance Unit (PGSU) supports population level health using genomic sequencing to monitor and characterise infectious diseases of public health concern, guiding the public health response and policies to prevent further illness. In 2024/25, WA launched the Respiratory Syncytial Virus (RSV) infant immunisation program to prevent severe infection. In partnership with the Department of Health and The Kids Institute PSGU performed genomic characterisation of circulating RSV strains to check for mutations and ensure the effectiveness of the immunisation program.

The Environmental Microbiology Unit (EMU) protects public health by detecting pathogens and hygiene indicators that present risks to human health in water, food and environmental samples. This assists in preventing outbreaks of illness (an early warning system) such as Listeria monocytogenes, Salmonella species, Escherichia coli, etc. The unit is highly responsive to sewerage, food safety or contamination events to support remediation and public health outcomes and works with PGSU to help regulators and clients track outbreaks.

Key achievements include expansion of wastewater surveillance to measles and Mpox (formerly known as monkeypox). The introduction of digital PCR technology and the development of optimised assays for Influenza A/B, RSV and SARS-CoV-2 has enhanced the sensitivity and scope of surveillance. The wastewater surveillance efforts have continued to improve sample recovery, turnaround times and reliability with the introduction of RT-PCR and concentration technologies such as the Concentrating Pipette. EMU also worked with PGSU, Department of Health and Ozfoodnet, in tracing multiple Listeria monocytogenes and Salmonella detections in food samples.

EMU processed 39% more tests this year, with the Waters Laboratory processing over 1,300 tests on a busy day. EMU continues to provide timely and high-quality results to clients despite enhanced demand from the Aboriginal Communities Water Services Program and Perth Children's Hospital (PCH) sample testing.

Molecular diagnostics identifies the causative agent of an infection by examining genetic material of a virus, bacteria or other type of organism. During the reporting period an additional COBAS 6800 was acquired, removing downtime and providing the required scalability to support transition to HPV DNA testing for the National Cervical Screening Program. Validation of the HPV DNA assay for use on this new platform has been submitted to NATA for inclusion in the laboratory's scope of accreditation. This is the first step towards eliminating the need to refer self-collected samples externally.

The QEII Microbiology PCR laboratory has introduced a 'one test detects all' screening assay for upper respiratory virus testing. The Biofire Rapid Multiplex PCR platform has facilitated a rapid result (two hours from receipt at laboratory) for Bordetella pertussis (Whooping Cough) to assist with the rise in requests over the reporting period.

QEII Microbiology Serology performs 500,000 requests per month with 70% for hepatitis, HIV and Syphilis, including HIV confirmation testing for private laboratories. The unit is a TGA accredited facility that performs infectious disease serology testing for bone, tissue and faecal microbiome donors. QEII Serology department has become a national leader in moving to PCR confirmation for HIV with reflex Rapid Geenius HIV antibody testing if not PCR confirmed and changing longstanding testing algorithms. The department has developed a new Syphilis testing algorithm in collaboration with other national laboratories, following advice that an existing antibody confirmation test for Syphilis would be discontinued. The new testing algorithms ensure PathWest continues to meet regulatory and Public Health responsibilities.

During the reporting period, FSH Microbiology converted a time-consuming dermatophyte (fungal) culture which lacked sensitivity, to a dermatophyte PCR to improve efficiency and diagnostic performance. Notably this test is approximately twice as sensitive as culture, and results are available under seven days as opposed to formerly weeks.

The PCR testing for blood borne virus has been enhanced by introducing combination testing, this has also expanded application to sperm donors, milk donors and needlestick donors. Positive feedback has been received from infectious diseases' teams about rapid application of blood borne virus diagnostics to needlestick donors.

The Media Manufacturing Unit upgraded significant infrastructure with the replacement of a large boiler and fleet of autoclaves essential to ensuring continued optimal performance. The new autoclave units were installed progressively whilst decommissioning the old equipment and refurbishing the autoclave room, to ensure ongoing service was maintained.

Immunology

PathWest Immunology has one of the largest Immunology test catalogues in Australia and offers a suite of routine and specialised tests for both local and other Australian jurisdictions and New Zealand. Immunology also plays a crucial role in the success and safety of organ and tissue transplants nationally and internationally.

Autoimmunity is a condition where the body's immune system mistakenly attacks its own healthy cells, tissues, and organs, leading to inflammation and potential damage. The immune system may produce autoantibodies (antibodies targeting self) which are linked to different autoimmune diseases. These autoantibodies can be detected in a person's blood sample, aiding doctors in diagnosis of autoimmune disease e.g. celiac disease, rheumatoid arthritis, pernicious anaemia and anti phospholipid syndrome (which results in blood clots and recurrent miscarriages).

In 2025, PathWest finalised the procurement of the Phadia 2500 to consolidate testing and increase the volume of routine testing of some autoantibodies, as well as allergy testing and Mast Cell Tryptase, which is used to determine whether a patient has had an anaphylactic reaction.

Immunology performs routine Antinuclear Antibodies (ANA), Anti-neutrophil Cytoplasmic Antibodies (ANCA) and Tissue Antibodies, testing. Given overlapping symptoms associated with many autoimmune diseases, these tests are often the appropriate starting point from which to conduct more specific testing i.e. for diseases such as Lupus or for different forms of vasculitis.

Immunology delivers a statewide urgent vasculitis testing service targeting a group of disorders that disrupt blood flow in vessels due to inflammation, with tests run routinely three times a week or urgently within or after hours for public and private hospitals. Between October 2024 and June 2025, 23 urgent tests were conducted with 25% or six positive results, with rapid identification facilitating early treatment and reducing the potential damage to organs.

Science that serves – advancing diagnosis, treatment, and transplant safety

The impact on patient care

Accurate diagnosis of autoimmune diseases like lupus, coeliac disease, and rheumatoid arthritis through specialised blood tests.

Faster and more reliable allergy and anaphylaxis testing, improving emergency care and long-term management.

Early detection of serious immune conditions in children, including newborn screening for Severe Combined Immunodeficiency (SCID), enabling timely treatment.

Better management of chronic infections like HIV and tuberculosis through advanced monitoring and genotyping.

Safer organ transplants with precise donor-recipient matching and antibody screening to reduce rejecting risk.

Access to nationally unique tests, ensuring patients across Western Australia benefit from cutting-edge diagnostics and early intervention.

Specific autoimmune testing services are also undertaken for a range of autoantibodies including Myosotis Autoantibody Testing for chronic muscle inflammation caused by the immune system attacking muscle tissues throughout the body causing weakness, pain and swelling. In 2024/25, PathWest procured a new Immunoblot Instrument, automating testing for many autoantibodies including myositis antibodies.

Immunology delivers a statewide specialist neuronal autoantibody service investigating antibodies that attack the brain, spinal cord and peripheral nervous system. Immunology services these tests for some other Australian Jurisdictions and New Zealand.

Infection Immunology includes HIV viral load and HIV mutation molecular analysis to monitor the progression of HIV and effectiveness of antiretroviral therapy against the HIV virus. HIV genotyping detects mutations in the HIV virus that cause resistance to antiretroviral drugs and plays an important role in treatment decisions for people living with HIV.

Tuberculosis testing and population screening, using QuantiFERON is also undertaken. The QuantiFERON-TB Gold assay is a blood test used to detect latent tuberculosis (TB) infection. It measures the release of interferon-gamma (IFN-[]) from a patient's white blood cells when exposed to specific antigens from Mycobacterium tuberculosis. This test is an alternative to the Tuberculin Skin Test (TST) and is often preferred due to its higher specificity.

Immune Function tests, developed primarily for the paediatric population comprise two main types:

- Humoral tests investigating immune components in the blood such as antibodies to infections and vaccines and complement factors which aid in the immune cell response to infections; and
- Cellular tests which investigate immune cells i.e. lymphocyte subsets which can detect deficiencies that can cause severe infections, or cellular tests where immune cells in the blood sample are stimulated and assessed as to whether these are functioning appropriately.

Statewide newborn screening for Severe Combined Immunodeficiency and other immunity errors started at PathWest in 2024 with patients referred to PCH for follow up and confirmatory testing by Immunology, importantly facilitating early treatment options including transplant.

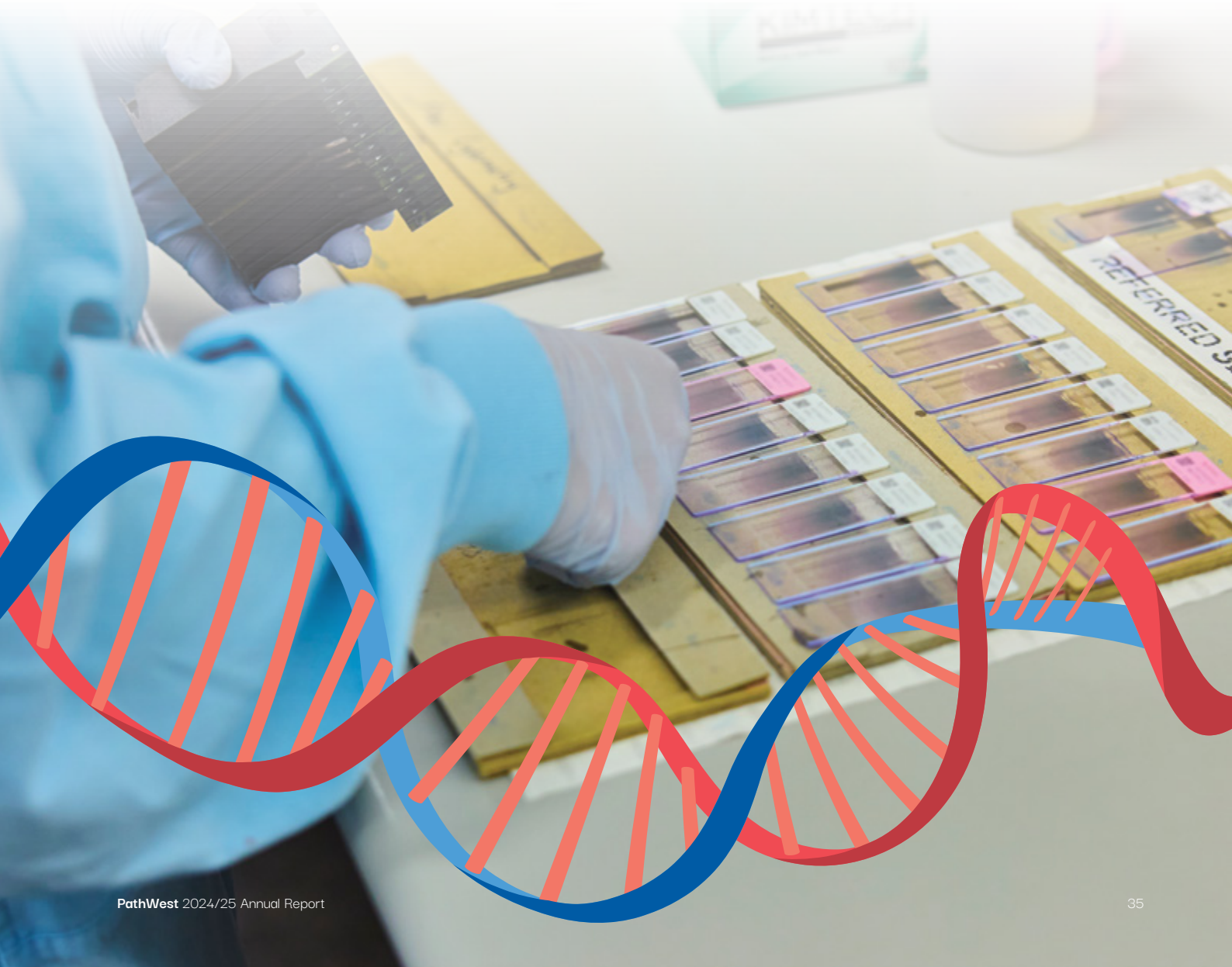
Immunology also plays a significant role in solid organ transplants as well as related and unrelated bone marrow transplants. Human Leukocyte Antigen (HLA) typing of donors and recipients for transplanted organs as well as HLA testing for known genetic associations such as coeliac disease, Narcolepsy, Rheumatoid Arthritis and Ankylosing Spondylitis. HLA typing is also used to test drug sensitivities to aid in personalised medicine such as hypersensitivity to anti-retroviral therapy Abacavir and other drugs such as Vancomycin and Allopurinol. HLA Antibody screening is performed to determine whether a recipient is likely to react or has started to reject their transplanted organ after transplantation, providing a chance to salvage the transplant prior to complete rejection.

Through our HLA typing service the Immunology department has successfully assisted in the allogeneic bone marrow transplant of 75 West Australian patients allowing them a curative approach to their blood cancers.

Immunology also assists with HLA typing donors for the Stem Cell Donors Australia registry, providing the option for donors nationally and internationally to be accessed for stem cell donations and assisting people with blood cancers.

Our national solid organ transplant service successfully typed and matched organs for West Australian patients:

Deceased Donor Kidney:	72*
Living Donor Kidney:	21
Kidney Paired Donation (KPD):	5
Heart:	10
Liver:	24
Lung:	18
* 28 kidneys from interstate	



Anatomical pathology

Science that serves – precision diagnosis and compassionate care

The impact on patient care

Accurate, timely diagnoses through advanced tissue and cell analysis, helping guide effective treatment plans.

Improved access to cancer therapies with cutting-edge genomic profiling tools like Novaseq and Genexus.

Faster reporting and results thanks to digital pathology, automated systems, and streamlined workflows.

Expanded care for families affected by stillbirth through dedicated paediatric and perinatal pathology services.

Equitable healthcare with research focused on improving outcomes for remote and Aboriginal communities.

Excellence in care and education, with highly trained specialists and national recognition for teaching and research.

Anatomical Pathology comprises Histopathology, Cytopathology and Molecular Pathology which all involve diagnosis of disease through microscopic examination and testing of body tissues, fluids, individual cells down to genes and proteins contained within cells. Samples taken during diagnostic procedures are tested and reported to the managing clinician, including on whether disease is present and characteristics of disease that may influence treatment and health outcomes.

The subspecialisation model has strengthened with new lead pathologists or heads of department appointed in Immunohistochemistry, Molecular Pathology, Neuropathology and Gastrointestinal Pathology to foster excellence and enhance service delivery in Anatomical Pathology.

Molecular Anatomical Pathology with the support of the Community Health and Hospital Program, successfully acquired and commenced validation of the state-of-the-art Novaseq and Genexus instruments that will enhance comprehensive genomic profiling for WA cancer patients. This service affords cutting edge therapies and clinical trials which will have notable impacts on health care delivery. A research project was conducted with Harry Perkins Research Institute and Oncology to improve knowledge of lung cancer in remote and Aboriginal populations.

Enhancements to workflow included implementation of the Dragon Dictation system, procurement of modern liquid-based cytology equipment, and Digital Pathology infrastructure with provision of whole slide imaging and digital image analysis.

Our Pathologists, Registrars and Scientists presented at pathology conferences and meetings with several awarded prizes for ‘best scientific poster’, ‘best oral presentation’; and the International Academy of Pathology and Australian Society of Cytology meetings, highlighting high calibre research and innovation occurring in PathWest Anatomical Pathology. Two Pathologists were also recognised by the University of Western Australia for their contribution to Medical Education through Excellence in Teaching Awards for training of radiology, pathology and radiation oncology trainees. A steady stream of clinical observers provides junior doctors with insights into a pathology career.

The Paediatric and Perinatal Pathology service has received further Federal Funding for its Stillbirth Project which has built capacity to respond to families affected by stillbirth. A lead pathologist and staff have received awards for their skilful and sensitive work in this area.

Feature Story

Rapid on-site evaluation transforms care for lung cancer patient

Dr Sue Sparrow with the interventional respiratory team at SCGH

When a patient was urgently referred with suspected lung cancer that had already spread, time was critical. Thanks to expertise of PathWest Anatomical Pathologist, Dr Sue Sparrow, a preliminary diagnosis was provided at the time of biopsy - a process known as Rapid On-Site Evaluation (ROSE).

This immediate result enabled the patient to begin treatment just four days after their initial presentation to clinic, providing the best possible chance of improved outcomes and reducing the emotional toll of uncertainty for the patient and their family.

ROSE allows pathologists to assess tissue samples in real time during procedures, ensuring that adequate and appropriate material is collected for diagnosis. It also facilitates faster clinical decision-making and reduces the need for repeat procedures.

As Western Australia enters the era of lung cancer screening, this highly skilled, responsive service will become even more vital in supporting early detection and timely intervention.

“This level of care could not have happened anywhere else in WA - or even Australia, and internationally.”

- Respiratory Team Physician

Diagnostic genomics

Science that serves – decoding health through DNA

The impact on patient care

Personalised care through genetic testing that informs diagnosis, treatment and prevention – often with implications for the whole family.

Safer pregnancies with RhD Non-Invasive Prenatal Testing reducing unnecessary exposure to blood products for thousands of expectant mothers.

Faster access to answers for rare diseases, thanks to advanced tools like Episign and high-volume sequencing with NovaSeq XP.

Improved cancer diagnosis through digitised cytogenomics and expanded FISH testing, enabling more precise and timely treatment decisions.

National leadership in genomic innovation, helping expand access to innovative testing for all Australians.

We all relate to the expression "It is in your genes...". Anecdotal in a social setting, in Pathology, Diagnostic Genomics provides evidence of a person's genetic makeup to determine whether it is affecting health management; is predictive of short or long-term clinical associations; or to identify where a health issue runs in families and prevention can be personalised based on specific genetic information.

Diagnostic Genomics provides a comprehensive suite of genetic and genomic testing as part of the standard of care but is also receiving national and international recognition for cutting edge developments in genetic pathology.

In November 2024, PathWest Diagnostic Genomics was the first public pathology service in Australia to deliver Rhesus D Non-invasive prenatal testing (RHD NIPT) to all Rhesus D-negative pregnant women in WA who have not developed antibodies against the RhD blood group. A test with higher accuracy than alternative tests which measures the fetal fraction of a cell-free DNA in maternal plasma, the test eliminates the need for unnecessary anti-D immunoprophylaxis (Anti-D) in pregnancies where the fetus is predicted to be Rhesus D-negative.

Approximately 15% of women of European descent are Rhesus D negative and processing > 200 RHD NIPT tests per month with <14-day turnaround time, has indicated Rhesus D-negative status in the fetus for approximately 30% of referrals, significantly reducing exposure to human-derived blood product anti-D.

The rollout has included a local guideline on antenatal RHD NIPT for the prediction of fetal RhD status and targeted Anti-D and statewide rollout and integration into primary care with coordination by the Office of Population Health Genomics and the Chief Nursing and Midwifery Office, Department of Health. Diagnostic Genomics has also worked with PathWest Communications and Marketing teams to rollout education activities on RHD NIPT.

Diagnostic Genomics has validated additional tests in 2024/25 including:

- Epigenetic signature assessment through EpiSign, providing ~10% additional diagnoses for patients with rare disease.
- The Telethon funded Genomic Sequencing Machine, NovaSeq XP, which provides capacity to process a large quantity of genetic data at a time.
- Digitisation of cytogenomics which supports analysis of chromosome abnormalities to further understand genomic disorders and cancer.
- 52 new fluorescence in situ hybridisation probes for oncology and cytogenetic testing.
- Validation support for other states in RHD NIPT testing to expand availability of testing.

Congratulations to the Diagnostic Genomics and King Edward Memorial Hospital Haematology teams for their outstanding achievement as finalists in the Excellence in Primary Health Care Integration category. Their collaborative project, Introduction of Non-Invasive Fetal Rhesus D Genotyping for Pregnant Women in Western Australia, was delivered in partnership with the North Metropolitan Health Service (Maternal Fetal Medicine) and the Department of Health (WA Health), including the Office of Population Health Genomics, the Blood Unit, and the Office of the Chief Medical Officer.


PathWest

Forensic biology

Science that serves –
DNA science serving justice

The impact on patient care

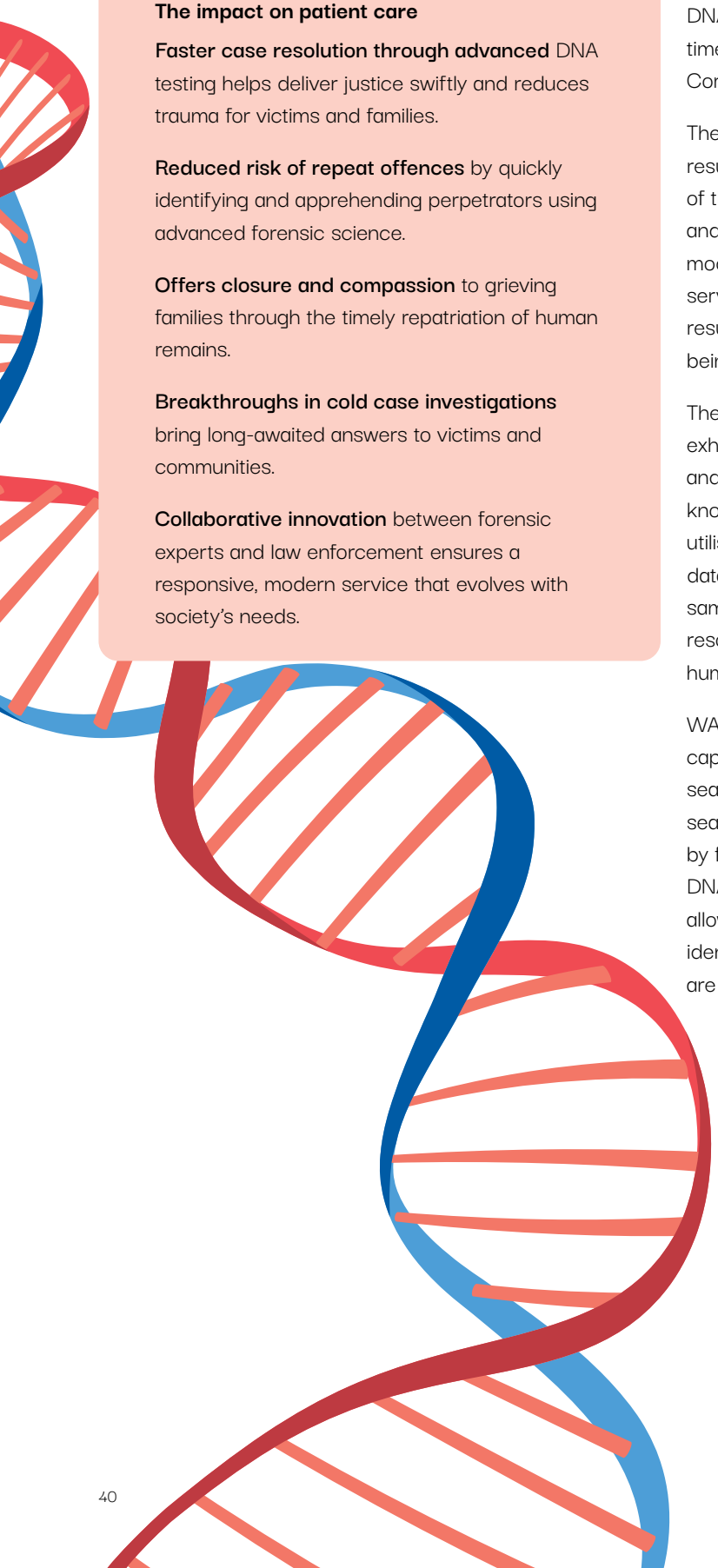
Faster case resolution through advanced DNA testing helps deliver justice swiftly and reduces trauma for victims and families.

Reduced risk of repeat offences by quickly identifying and apprehending perpetrators using advanced forensic science.

Offers closure and compassion to grieving families through the timely repatriation of human remains.

Breakthroughs in cold case investigations bring long-awaited answers to victims and communities.

Collaborative innovation between forensic experts and law enforcement ensures a responsive, modern service that evolves with society's needs.



The Forensic Biology Department (FBD) conducts DNA testing for the Western Australian Police Force (WAPF) and State Coroner to assist in resolving criminal and Coronial cases for the Western Australian Community. Expediting DNA testing allows Police to resolve cases faster, limiting the time offenders have to commit more crimes and allowing the Coroner to repatriate human remains to families.

The FBD utilises innovative DNA techniques to improve DNA results and make DNA testing more efficient. Implementation of these techniques, coupled with collaboration with WAPF and other external stakeholders ensures provision of a modern, highly advanced and responsive Forensic Biology service, supporting WAPF in investigation of crime and resulting in some of the oldest and most serious crimes being solved.

The Cold Case Team is integral to the review and analysis of exhibits and samples from historic unsolved serious crimes and unidentified human remains cases. A new capability known as Forensic Investigative Genetic Genealogy (FIGG) utilises advanced DNA testing methods and public genealogy databases to identify potential relatives of unknown DNA samples to identify a DNA donor profile to assist in the resolution of homicide, sex assault, as well as unidentified human remains' cases in Western Australia.

WAPF and FBD have solved multiple cold cases using this capability with all cases having DNA profiles available for searching which could not be identified through routine searches of the State and national DNA databases, or by familial searching. The application of more sensitive DNA analysis and the use of public genealogy databases allowed more distant biological relatives to be identified, and identification made. A significant number of additional cases are currently subject to testing under FIGG.

Forensic pathology

Science that serves – uncovering truth and supporting families

The impact on patient care

Improved accuracy and efficiency in investigations through enhanced facilities and technologies to support more precise and less invasive autopsies.

Faster turnaround times through onsite Forensic Neuropathology and upgraded systems, reducing delays in reporting and helping families receive answers sooner.

Enhanced expertise and care through the addition of highly trained forensic pathologists and registrars, ensuring complex cases are handled with precision, leading to better outcomes and greater public confidence in forensic services.

Support for justice and public health through our role in homicide and suspicious death investigations, contributing to community safety and public health monitoring.

PathWest Forensic Pathology continues to leverage improved facilities afforded by the refurbishment of the State Mortuary to support delivery of services to the Coroner, including homicides and suspicious deaths.

During 2024/25, the State Mortuary admitted 3600 Coronial cases, performed over 3200 examinations and admitted nearly 1200 non-Coronial cases from SCGH.

The introduction of SoftForensics in November 2023 continues to facilitate improved data entry aligned to forensic procedures and document filing and extraction capabilities. PathWest will continue to refine the system to meet forensic requirements.

A CT scanner, acquired in 2019, is now an integral component of the Coronial autopsy process, with over 99% of cases scanned. Providing a less invasive examination, it has facilitated a reduction in the State Mortuary's full internal autopsy rate, now sitting at 44%, down from 50% in 2024/25.

Forensic Neuropathology, previously located at an alternate site, was incorporated into the State Mortuary in 2024/25. This has supported improved turnaround times, given the capacity for onsite preliminary diagnosis and consultations. A Forensic Registrar, with considerable interstate experience in Forensic Neuropathology has also joined the team and once qualified as a Forensic Pathologist, will increase capacity and redundancy in neuropathology at the State Mortuary.

With a recognised shortfall in Australia of Forensic Pathologists, training facilities at the refurbished State Mortuary are also well-utilised.

In 2024/25, PathWest proudly onboarded its 11th Forensic Pathologist following attainment of the Fellowship of the Royal College of Pathologists of Australasia (FRCPA), with a further internationally qualified Forensic Pathologist also being awarded this qualification. Pathwest also hosted a Sri Lankan Fellow for 12 months, who assisted the team with autopsies and learning CT interpretation skills.

PathWest Forensic Pathology also continues to teach varied external groups including students from the University of Western Australia and the University of Notre Dame, WA Police Force and Australian Defence Force, as well as presenting at national and international conferences.

Regional and support services

Science that serves – bringing vital diagnostics to every corner of Western Australia

The impact on patient care

Reliable access to urgent and routine testing in remote areas, reducing the need for regional patients to travel long distances to receive quality care.

Faster diagnosis and treatment through integrated testing with metropolitan laboratories, ensuring timely and accurate results, which support quicker clinical decisions.

Rapid health response during outbreaks, helping to contain disease spread and protect community health.

Emergency lifesaving support through the supply of local critical blood products and collaboration in urgent care situations.

Community-focused care with regional staff being embedded in their communities, offering personalised, culturally-aware care that patients trust.

Regional Support Services (RSS) branch laboratories ensure regional and remote communities have appropriate access to pathology services, like metropolitan communities. Our multidisciplinary urgent and routine pathology services are provided at 22 sites across regional Western Australia, with collection services at 50 regional and remote centres, with many of these having access to no other pathology services.

Regional Services' laboratories uniquely offer services across many areas of pathology including Microbiology, Diagnostic Molecular testing, Haematology, Coagulation Studies, Transfusion Medicine, Point of Care Testing and Biochemistry, and are integrated with our tertiary laboratories in Perth. Our scientists are multi-disciplinary, able to offer a range of testing required by regional communities and respond effectively to regional challenges e.g. cyclones, flooding events or major crashes.

Many of our collection centre staff work hundreds of kilometres from the nearest PathWest laboratory, cover a large geographical area and support a diverse range of communities.

With logistics integral to our service model, 2024/25 saw the advancement of digital courier tracking across PathWest, led by Regional Services. While pending full deployment, the project demonstrates how smarter use of current systems and new technology can enhance efficiency, traceability, and patient safety. A highly collaborative project involving teams from Pre-Analytical Services (PAS), Anatomical Pathology, and PathWest ICT, the project reflects PathWest's commitment to continuous improvement through innovation and how it handles precious patient samples with the utmost care.

A measles outbreak in our State's southwest resulted in a rapid response from the WA Country Health Service's, Population Health, and PathWest's Bunbury laboratory with the erection of a Measles sample collection tent and servicing within 72 hours. This collective effort played a significant role in preventing a widespread outbreak of this highly infectious disease.

With staff and patient safety paramount for PathWest, enhanced Personal Duress Alarms were rolled out to frontline staff in collection centres and high-risk inpatient wards. Connected to a triage service, these devices alert nearby emergency services to a safety incident involving PathWest staff. Embraced by PathWest's regional and remote staff, the project resulted from a collaboration between RSS and Pre-Analytical Services.

Our Acting Medical Scientist in Charge at Northam worked proactively with the Hospital facilities team, PathWest Haematology and Operational Management and the WA Country Health Service Regional Midwife Consultant to support the proposed re-establishment of an elective caesarean section service at Northam Hospital. This important patient centred service aimed at facilitating caesarian births in the Western Wheatbelt involved the purchase and calibration of an appropriate blood product freezer and training of local staff in the provision of blood products to support this service.

Frontline staff working in regional and remote locations are heavily embedded in our communities, are highly responsive and collaborative in the provision of lifesaving healthcare and often represent the only face of pathology. They are strongly valued by our communities.

In February 2025, our Kalgoorlie Laboratory and team of clinicians at Kalgoorlie Regional Hospital stabilised a Kalgoorlie man with a severed arm for transfer to Royal Perth Hospital, including through the supply of 97 lifesaving blood products through Lifeblood and our Kalgoorlie laboratory.

Feature Story

Two emergencies, one team

At PathWest Kalgoorlie, a high-pressure emergency in February 2025 put the regional laboratory team's training, professionalism, and teamwork to the test. Their response demonstrated the critical role pathology plays in urgent care.

Just after midday, an urgent announcement over the hospital's PA system signalled a serious trauma incident nearby. Within minutes, the situation escalated to the Emergency Department, and the PathWest laboratory was called into action.

A patient with catastrophic injuries had arrived, and the ED team urgently requested multiple units of O Negative blood. The Kalgoorlie laboratory responded immediately, issuing the blood without delay. As the patient's condition worsened, the hospital activated its Massive Transfusion Protocol (MTP), requiring rapid coordination and careful inventory management. With six units issued and supply running low, the team worked under intense pressure, balancing urgency with clinical precision.

While managing the MTP, a second critical case emerged–a paediatric blood test revealed a concerning result. The team quickly shifted focus, reviewing a blood film for potential leukaemic indicators, all while continuing to support the ongoing transfusion protocol.

Despite the dual emergencies, the Kalgoorlie team remained composed and focused. Their ability to respond swiftly and accurately ensured both patients received the urgent care they needed.

Led by Medical Scientist in Charge, Mylene Wills, the team exemplified the strength of regional pathology services. In challenging environments, their decisive action and collaboration made a life-saving difference.

With their contribution, the trauma patient was stabilised and transferred for further treatment via the Royal Flying Doctor Service. The second case was escalated appropriately, ensuring timely follow-up and care.

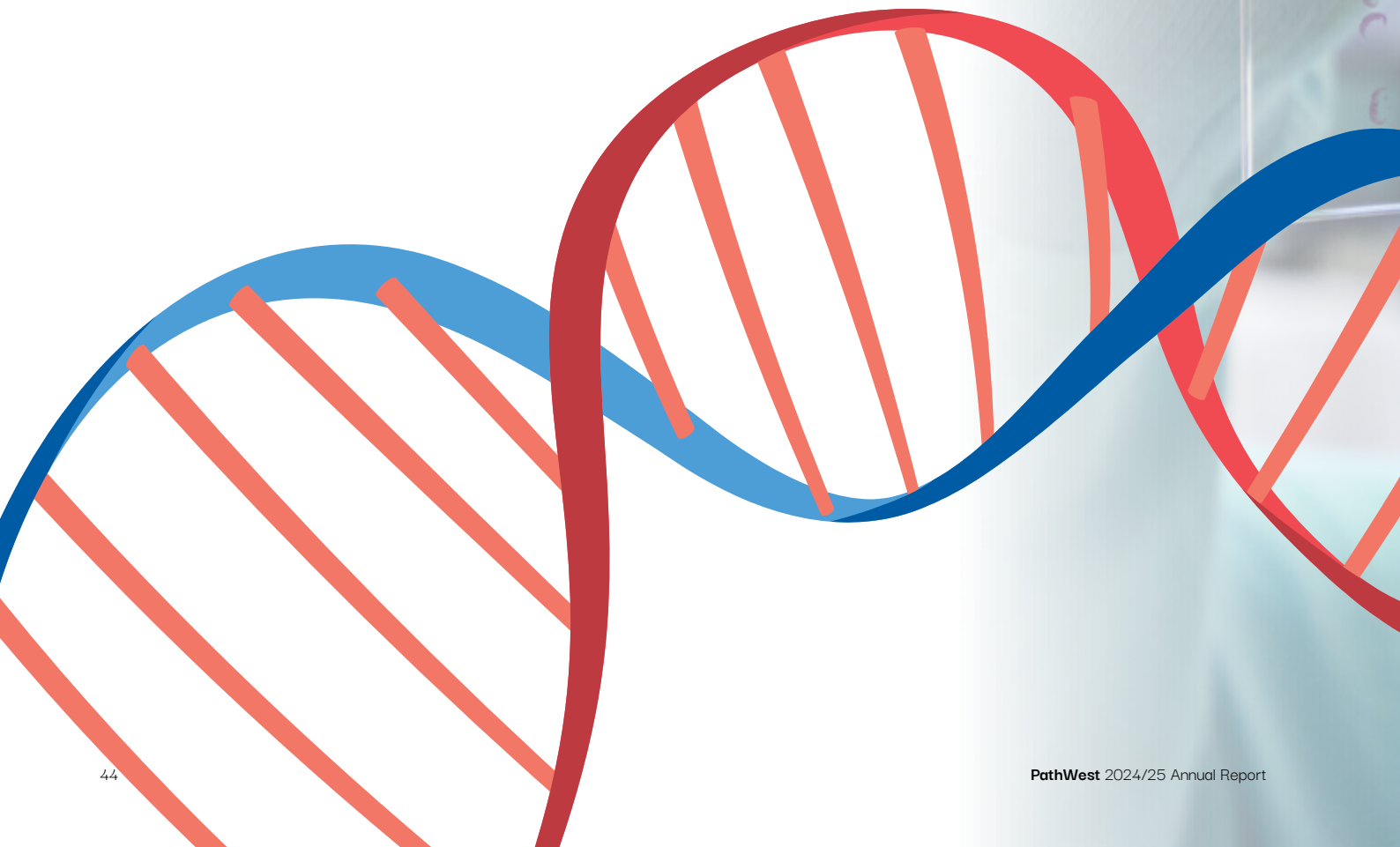
This incident highlights the essential role of regional laboratories–not just in routine diagnostics, but in moments where science, service, and humanity intersect.

Research and innovation

The establishment of the Research and Innovation Directorate will play a critical role in advancing research and innovation activities across the organisation. The newly created Directorate serves as a central hub for research governance, support, and strategic dissemination of research outcomes into the public domain. The Directorate structure has been defined with clear integration with laboratory areas and core corporate functions (Office of the Chief Executive, Office of the Chief Pathologist, ICT, Finance, and People, Culture and Capability), significantly streamlining processes, reducing fragmentation and approval cycle times.

Major initiatives underway

- Clinical Trials Roadmap: The Director, Research and Innovation, represents PathWest on this Department of Health Initiative in mapping the broader WA health clinical trials roadmap, positioning PathWest as a key player in shaping the future of health research in WA.
- Biobanking framework: The Director, Research and Innovation, represents PathWest in State level discussions in mapping policy, governance and inventory standards to support ethically robust, future-ready, biorepositories.
- Systems to improve portfolio oversight are actively being implemented, including a multipurpose REDCap registry that will provide comprehensive visibility of research activities across PathWest.
- Direct contribution to WA Health priorities in genomics, medical research, and trial capability.
- Active engagement with WA Country Health Service to support regional research delivery, including TeleTrials, further extending PathWest's reach and impact and promoting equity in healthcare access.



Information communications technology

Science that serves – powering pathology through secure, reliable technology

What does this mean for our patients?

Reliable systems that protect sensitive patient data and ensure uninterrupted access to critical diagnostic services.

Faster, more secure results delivery through migration to a new delivery platform, improving efficiency for health providers.

Enhanced system performance and resilience through the Laboratory Information System (LIS) Infrastructure Modernisation Project.

Stronger cyber-security and compliance through upgraded database protections, vulnerability scanning, and system monitoring.

Empowered staff with dependable digital tools that support high-quality patient care.

The ICT Department at PathWest is the digital backbone of our statewide laboratory and corporate operations, from sample registration and testing to secure results delivery underpinned by corporate support functions. ICT's work directly contributes to high quality patient care by ensuring clinicians have timely, accurate, and secure access to pathology results to facilitate effective diagnosis and treatment. We empower PathWest's scientific and medical staff with reliable and secure tools and systems.

ICT's work is fundamental to PathWest's operations given the sensitive nature and high volume of data managed and critical real-time demands of pathology services. System reliability and security are paramount, and a robust ICT environment protects patient information, processes diagnostic tests efficiently, and delivers results securely. ICT's work is integral to building trust and ensuring healthcare information integrity.

The PathWest Laboratory Information System (LIS) Infrastructure Modernisation Project was a significant focus of 2024/25. This critical initiative involved substantial work towards migrating to new, enhanced ICT infrastructure, designed to significantly boost system security, resilience, and overall performance. Extensive testing has been completed, demonstrating the system's readiness for its upcoming Go Live in the first quarter of 2025/26..

The migration from PathWest Direct to HealthLink for external results delivery has enhanced efficiency and improved access for PathWest's external customers, ensuring faster, more reliable receipt of vital patient information. This streamlines operations for referring clinicians, ultimately benefiting patient care.

ICT's collaborations with Health Support Services have been instrumental in significantly enhancing internal controls by improving database security, upgrading vulnerability scanning and management, and enhancing system event logging and monitoring. These efforts reinforce PathWest's system security posture and ensures compliance with best practices.

Governance

Governance

Enabling legislation

The *Health Services Act 2016 WA* (HSA 2016) introduced changes to the governance of the WA health system by clarifying roles, responsibilities, and accountabilities and by devolving decision making to the local level.

Section 32 of the HSA 2016 provides for the establishment of Health Service Providers. PathWest was established as a Board governed Health Service Provider by the Minister for Health under section 32(1)(b) of the HSA 2016 on 1 July 2020.

Section 70(1)(b) of the HSA 2016 stipulates that the PathWest Board is the governing body of the statutory authority and is to perform or exercise all the functions of PathWest under this Act or any other written law.

Communication between PathWest and the Minister for Health, Parliamentary representatives, Ministers, and the WA health system is governed by a Communication Agreement, with clear lines of accountability and responsibility noted within.

Accountable authority

The PathWest Board is the accountable authority for PathWest in 2024/25.

Responsible Minister

PathWest is responsible to:

- Honourable Meredith Hammat MLA, Minister for Health; Mental Health
- Honourable John Carey MLA, Minister for Planning and Lands; Housing and Works; Health Infrastructure
- Honourable Sabine Winton MLA, Minister for Education; Early Childhood; Preventative Health; Wheatbelt
- Honourable Simone McGurk MLA, Minister for Creative Industries; Heritage; Industrial Relations; Aged Care and Seniors; Women
- Honourable Stephen Dawson MLC, Minister for Regional Development; Ports; Science and Innovation; Medical Research; Kimberley.

Sharing responsibilities with other agencies

PathWest works closely with several government and non-government agencies to deliver pathology and forensic services for the State to achieve the targets set out in the WA Health 2024/25 Outcome Based Management Key Performance Indicator Data Definition Manual. This includes but is not limited to WA Police, Coroner, Department of Justice, ChemCentre, a suite of non-government organisations, in addition to the Department of Health and other Health Service Providers.

Structure

As a Board-governed Health Service Provider, PathWest is responsible and accountable to the Minister for Health and the Director General, Department of Health, as the System Manager.

The Minister for Health appoints the PathWest Board Chair and members, with the Board legally responsible and accountable for providing safe and efficient pathology and forensic services to WA. The System Manager is responsible for the overall management, performance, and strategic direction of the WA health system, ensuring the delivery of high quality, safe and timely health services.

The System Manager is the employing authority of the PathWest Chief Executive, who is responsible for the day-to-day operations of PathWest.

Minister for Health
Hon Meredith Hammat

Minister for Health Infrastructure
Hon John Carey

Minister for Preventative Health
Hon Sabine Winton

Minister for Aged Care and Seniors
Hon Simone McGurk

Minister for Medical Research
Hon Stephen Dawson

Director General, Department of Health (System Manager)
Dr Shirley Bowen

PathWest Board
Board Chair Ms Angie Paskevicius, Nine Board Members

Chief Executive, PathWest
Dr Narelle Hadlow

- General Counsel
- Chief Pathologist
- Executive Director Finance, Procurement and Commercial Services
- Executive Director Operations
- Chief Technology Officer
- Executive Director People, Capability and Culture
- Director, Office of the Chief Executive

PathWest board

PathWest was established as a Board governed statutory authority on 1 July 2020.

The Board was appointed by the Minister for Health pursuant to Section 34 of the HSA 2016 and sets the strategic and operational direction of PathWest within the scope of the policy frameworks set by the System Manager.

The Board comprises professionals with experience across the fields of medicine and healthcare, finance, community, and consumer engagement. The Board works closely with the PathWest Chief Executive, who manages the operations of the organisation, to deliver safe and efficient services to the communities of WA.

The Board met on 10 occasions during 2024/25 and was supported by the following three Committees and an Advisory Council:

- Finance, Risk and Audit Committee
- People and Culture Committee
- Safety and Quality Committee
- Forensic Biology Advisory Council.

Meet the Board

Ms Angie Paskevicius

Board Chair

Ms Angie Paskevicius is an experienced Chair, Non-Executive Director, and Chief Executive Officer, with over 30 years' experience as a health practitioner, business owner, senior executive, and executive coach, across public, private and not-for-profit sectors. Her previous roles include Chief Executive Officer and Executive Director at Holyoake, Chair of Interchange WA and Non-Executive Director of Mid-West Ports Authority. Currently, Angie is the Chair of 360 Health + Community and Leadership WA, and an Executive Coach. She is a Fellow of the Australian Institute of Company Directors, the Australian Institute of Management and the Institute of Public Administration Australia WA.

Prof Tarun Weeramanthri AM

Deputy Board Chair

Prof Tarun Weeramanthri AM is a public health physician with extensive healthcare and senior executive experience. His previous roles include Chief Health Officer in the Northern Territory Department of Health and Community Services (2004 to 2007), and Chief Health Officer and Assistant Director General for Public and Aboriginal Health in the Western Australian Department of Health (2008 to 2018). He is Immediate Past President of the Public Health Association of Australia, an Adjunct Professor at the School of Population and Global Health, University of Western Australia, and an independent public health consultant.

Mr Kevin Taylor

Board Member

Chair, Safety and Quality Committee

Mr Kevin Taylor is an experienced senior executive with expertise in strategic and operational management for over 30 years. Formerly as a Senior Executive at St John of God Health Care, Kevin was responsible for national portfolios including Corporate and Community Services and was the Chief Executive Office for St John of God Pathology for over 16 years. Kevin also previously contributed to the strategic development of pathology and laboratory medicine in Timor Leste.

PathWest board

Meet the Board

Ms Samantha Elder

Board Member
Chair, Finance Risk and Audit Committee

Ms Samantha Elder has extensive senior, executive and non-executive director experience across a wide range of industries, including public and private healthcare, mining, oil and gas services, and manufacturing. A qualified accountant, she brings more than 25 years' experience in both multinational corporations and not-for-profit organisations. While much of her career has been based in Australia, Sam has also held senior roles in the United Kingdom, United Arab Emirates, and Canada. Sam is the Director of Finance and Performance at St John of God Healthcare.

Mr Tony Vis

Board Member
Chair, People and Culture Committee

Mr Tony Vis is an experienced non-executive director and chair with extensive experience in community services and corporate governance. He has held Chief Executive Officer, senior executive and legal roles with major organisations across insurance, aged care, healthcare, disability, property, and legal sectors. Tony's other board roles include Member of the Carers Advisory Council WA, Chair of Southern Cross Care (WA) Inc, Deputy Chair of Therapy Focus Limited; and Council Member of Disability Assembly WA Limited. He is a Fellow of the Institute of Company Directors.

Prof Christobel Saunders AO

Board Member

Prof Christobel Saunders AO is internationally recognised as one of Australia's most prominent research-orientated cancer surgeons, and is the James Stewart Chair of Surgery, Head of Department in Surgery at the University of Melbourne (Royal Melbourne Hospital precinct), Director of Medical Research at Melbourne Medical School, and consultant surgeon in the Department of General Surgery at Royal Melbourne Hospital and the Peter MacCallum Cancer Institute. She is a member of the Order of Australia (2018) and has received a number of international awards and recognitions, including WA Scientist of the Year (2017). With more than 30 years' experience in breast cancer research, she is closely involved in strategic planning and management of health and cancer services in Australia, through membership of the Medicare Review Advisory Committee and various other prominent medical and cancer advisory bodies.

Ms Susan Rooney
Board Member

Ms Susan Rooney has held Chief Executive Officer, executive, and board positions in not-for-profit and government organisations operating in complex environments including health, community services, emergency services, and disability services. Susan's roles include Chief Executive Officer of Vinnies WA (2017 – July 2025) and Chief Executive Officer of Cancer Council WA (2002 to 2017). She has a Master of Business Administration; a Bachelor of Applied Science (Physiotherapy); is a graduate of the Australian Institute of Company Directors, and a Fellow of the Australian Institute of Management.

Prof Gelareh Farshid
Board Member

Prof Gelareh Farshid is an internationally recognised consultant Anatomical Pathologist, with principal interests in breast, soft tissue and bone pathology. Gelareh is a Senior Consultant Pathologist at SA Pathology in the Surgical Pathology and Cytopathology Directorates at Royal Adelaide Hospital and Clinical Professor in the Schools of Medicine and Medical Sciences at the University of Adelaide. She has held prominent positions with the Executive Board of the International Academy of Pathology and serves on other boards advising on breast cancer trials, sarcoma and Anatomical Pathology.

Mr Paul O'Farrell
Board Member

Mr Paul O'Farrell is an experienced corporate advisor, banking professional and chartered accountant with over 30 years of international banking and risk management knowledge with PricewaterhouseCoopers, National Australia Bank, and Bankwest. He is a member of the Audit and Risk Committee for Racing and Wagering Western Australia, holds several private company directorships and was on the Board of Richmond Fellowship and Chair of its Governance Committee. He is a Fellow of Chartered Accountants Ireland and Advisory Board Centre, and a Member of Chartered Accountants Australia and New Zealand, Accredited Advisor for the Family Business Association, and a Graduate of the Australian Institute of Company Directors.

PathWest executive committee

PathWest Executive is accountable and responsible for managing the performance of services across the organisation.

At 30 June 2025, the PathWest Executive Committee included:

- Dr Narelle Hadlow, Chief Executive
- Dr Priyanthi Kumarasinghe, Chief Pathologist
- Mr Sandy Kerr, Executive Director, Finance, Procurement and Commercial Services
- Mr Paul Schneider, Executive Director, Operations
- Ms Jo McCran, Executive Director, People, Capability and Culture
- Mr Tim Evans, Chief Technology Officer
- Ms Katherine Galvin, Director Office of the Chief Executive
- Ms Emma Obst, General Counsel.

The people behind the science

Staff snapshot

We had 2,591 staff working across 2,094 full-time equivalent (FTE) positions.

Our workforce professions – FTE positions:

847.8
Scientist

641.0
Technical

110.6
Pathologist

63.3
ICT

5.8
Security

1.0
Anthropologist

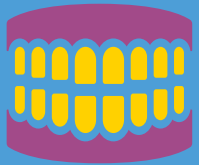
214.2
Administration and Clerical

135.5
Phlebotomist

50.2
Registrar

23.0
Courier

0.6
Odontologist



2,094
FTE Positions

Feature Story

Driving healthcare forward: the unsung role of courier services

In pathology, every sample tells a story, and behind each one is a journey. From swabs and biopsies to blood tubes and containers, tens of thousands of specimens move across Western Australia every day. While scientists and pathologists analyse results, its our Courier Services team that ensures those samples arrive safely, securely, and on time.

Often unseen but always essential, our couriers are the quiet force connecting healthcare providers to laboratories. They are the first step in the diagnostic chain, enabling timely testing and clinical decision-making. Their work is not just about transport – it's about trust and care.

With a fleet of over 18 vehicles and a team of 20 trained professionals, our couriers cover more than 1.19 million kilometres each year, supporting over 180 sites daily across metropolitan and regional Western Australia. Their routes span hospital wards, nursing homes, GP practices, specialist clinics, and community collection centres.

But their role goes far beyond the wheel. Couriers manage:

- **Fleet operations:** Maintenance, licensing, compliance, and incident reporting
- **Operational coordination:** Route optimisation, urgent requests, and service records
- **Critical movements:** Urgent transfers like frozen section samples within 15 minutes – directly influencing surgical decisions.

They are trained in urgency grading, biohazard handling, and communication, ensuring every sample is treated with the care it deserves.

In a system where every minute counts, the integrity and timing of sample delivery are vital. Whether navigating late finishes, weekend shifts, or unexpected delays, our couriers adapt with professionalism and purpose. Their work supports rapid diagnostics, preserves sample integrity, and upholds the chain of custody – ultimately contributing to better patient outcomes.

Their dedication exemplifies science that serves: responsible, reliable, and collaborative. While they may not wear laboratory coats, their impact is felt in every result delivered, every diagnosis made, and every life touched. Together, they are driving healthcare forward – one safe journey at a time.

18	20	180	22,856 km	1,190,000 km
Fleet size: 18 vehicles	Team size: 20 couriers	Daily sites supported	Weekly distance	Annual distance

Workplace inclusiveness

PathWest is committed to a diverse and inclusive workplace. Research shows agencies that value diversity and inclusion achieve greater staff satisfaction, better customer service outcomes, and improved decision making and performance. The workforce is more connected, motivated and productive.

As part of the most recent WA Public Sector Census, our staff were asked about their diversity, whether they had shared this with our agency and, if not, the reason for not sharing. The confidence of staff to give voice to their identities, workplace experiences and concerns is an indication of the level of workplace trust, psychological safety and inclusion. Our results showed that:

- 50.9% of staff shared their cultural diversity information with our agency
- 50% of Aboriginal and Torres Strait Islander employees shared this with our agency.
- 28.6% of people with a disability shared this with our agency.

Staff indicated some of the reasons they had not shared this information with our agency were because they did not want to be treated differently, they feared being limited in the roles they were offered, or they did not think it would be kept confidential.

Having analysed the results and insights provided, we have identified actions to improve diversity and inclusion in the year ahead including:

- Further development of the Aboriginal Cadet and Graduate programs.
- Promotion and representation at the Perth Pride Parade.
- More inclusive employment practices during the recruitment and selection stage.

Employee development

Science that serves – building a skilled workforce to improve patient outcomes

The impact on patient care

A future-ready workforce trained through nearly 5,000 days of student placements ensures patients receive care from skilled, well-prepared professionals.

Regional placements help build local capacity, improving access to high-quality pathology services in remote and rural communities.

Expanded training in phlebotomy and pathology collection supports safer, faster specimen collection and improved patient experiences.

Leadership development programs equip staff to lead teams effectively, fostering a culture of excellence and continuous improvement in patient care.

Scholarship support for regional placements helps attract talent to underserved areas, strengthening local healthcare systems for patients.

Professional placements

PathWest supports professional student placements for accredited university programs, helping to build a proficient future-ready workforce. In 2024/25 PathWest facilitated 213 placements with Curtin, University of Western Australia and Murdoch students in a range of areas:

	Students supported	No. of placement weeks
Phlebotomy (1 to 2-week placements)	49	52
CSRA (4-week placements)	33	132
Disciplines (6 to 10-week placements) including regional placements.	81	814
Total	**163**	**998**

For 2024/25 this equates to 4,990 days of placements as part of this program.

Regional Placements

PathWest encourages students to experience placements in regional areas and branch laboratories to benefit from exposure to a multi-discipline laboratory and to harness the benefits and lifestyle of working in a regional community.

PathWest facilitated nine regional placements, including four in Armadale, two in Rockingham, one in Busselton, and two in Albany laboratories. PathWest is also continuing the Regional Scholarship Program for 2025/26 for five eligible Curtin University students to receive a $2,000 scholarship to support travel and accommodation for a regional placement.

Other Pathology Related Placements

PathWest also supports placements with pathology providers or those interested in pathology which enhances PathWest's exposure as an employer of choice. In 2024/25, 53 placements occurred equating to a total 125 weeks and included:

21 students undertaking a Certificate III Pathology Collection (Phlebotomy Course) from North Metrpolitan TAFE, South Regional TAFE and WA School of Pathology, with the majority placed in regional areas.

15 medical students, 14 medical professionals and three non-medical people undertaking an observership at PathWest.

Certificate III in Pathology Collection

The Certificate III in Pathology Collection (Phlebotomy Course) equips graduates with the knowledge, skills and practical experience to work as specimen collectors/ phlebotomists.

PathWest is procuring Registered Training Organisation (RTO) services to administer the course to enable PathWest to continue to deliver the accredited training. Two PathWest staff are being supported to undertake a Certificate IV in Training and Assessment, to ensure qualified trainers for the program.


PathWest

Employee development

Leadership development

PathWest undertakes in-house leadership development and coordinates external programs arranged, or funded, by the Institute for Health Leadership (IHL). Staff participated in the following leadership programs during 2024/25:

Management and Supervisors course: Thirty staff attended this three-day PathWest specific course (co-delivered by staff and an external provider). The course links PathWest requirements (policies, practices) to the leader's role, and develops leadership skills for current and emerging leaders.

Leadership Development: Thirteen staff (at HSU Level P3-P5 or G7-G10) attended an eight-day program from an external provider (and funded by IHL). This program covered leadership skills in a range of areas including leadership, culture and change, team and emotional intelligence, wellbeing, trust and high performance, communication, influencing and integration of skills learnt.

IHL Programs: These programs are sourced by IHL and focus on development of a range of leadership and coaching skills:

Leadership Masterclasses: Seventeen PathWest leaders attended 10 leadership masterclasses (typically one-day) focused on developing leadership capability in strategic leadership and strategic thinking, system awareness and leadership, driving innovation, leading high-performance teams, change management, positive influencing and collaborating with others and personal leadership topics.

Leadership Excellence Program: Two senior staff members attended this IHL program comprising six workshops delivered over a six-month period designed to equip participants with the skills to inspire change and promote a culture of leadership within their workplace.

Coaching Programs: Five staff attended coaching programs which introduced participants to various coaching models, concepts and tools to enable them to adopt a coaching approach to leadership and management. Programs ranged from executive coaching (two staff), coaching skills for Senior Leaders (one staff), and Coaching skills for Leaders (two staff).

Allied Health Leadership Program: Five staff attended a two-day leadership course aimed at mid-tier managers and scientists with supervisory responsibilities. The program was funded by the Department of Health, Chief Allied Health Office.

Topics covered emotional intelligence, courageous conversations, coaching and mentoring.

Professional development

Continued provision of half-day and one-day training courses (delivered in-house) designed to equip staff with the knowledge and skills in a range of areas to support their developmental needs. In 2024/25, 371 staff members participated in 29 courses offered by PathWest as part of professional development training. Courses included:

Train the Trainer	Excel courses
Assertive Communication	PowerBI
Improving Interpersonal Relationships	First Aid Essentials
Email Workload Mastery	Mental Health First Aid
Managing Challenging Behaviors	Change, Stress and Resilience
New and Emerging Leaders	Job Application and Interview Skills
Recruitment, Selection and Appointment	Leading Effective Performance Review Conversations

eLearning and Mandatory Training

The MyLearning system provides access to mandatory training courses as well as specialist courses. PathWest Training and Development oversees the Learning Management System to support compliance monitoring and delivery of mandatory training and assists course administrators with eLearning technical matters.

Mandatory training includes, but is not limited to:

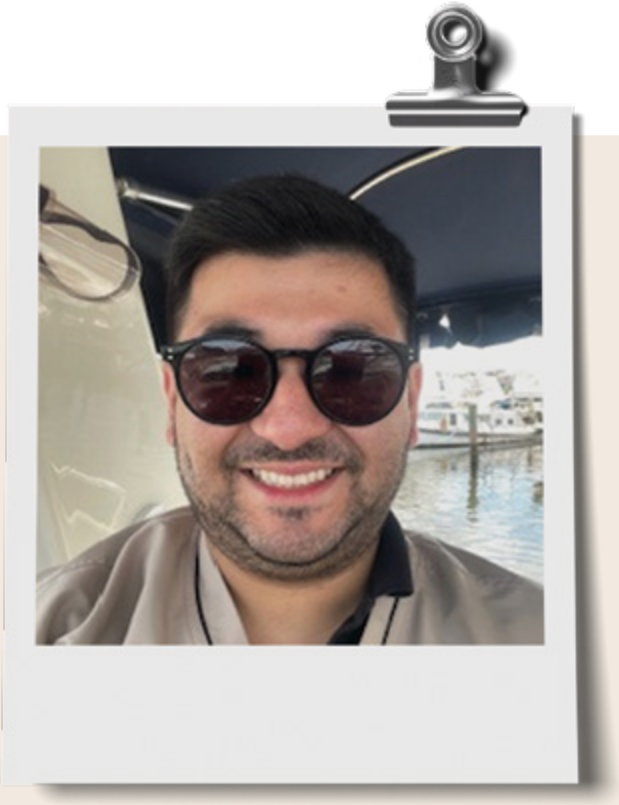
- Aboriginal Cultural eLearning
- Accountable and Ethical Decision-Making
- Chemical Safety
- Confidentiality
- Emergency Management Procedures
- Essential Cyber Security training
- PathWest Corporate Induction
- Prevention of Workplace Bullying
- Recordkeeping Awareness
- Work Health and Safety for Managers and Supervisors

e-Learning changes during the reporting period to meet organisational needs included the following new or updated e-Learning modules and their allocation to staff:

- Chemical and Laboratory Safety / General Chemical Awareness
- Duress Falcon Training
- Emergency Management Procedures
- Formalin Safety
- Prevention of Workplace Bullying
- Privileged Access eLearning and Cyber Security

Feature Story

Pathology under pressure: weathering cyclone Zelia in Port Hedland



When Severe Tropical Cyclone Zelia – one of the most powerful storms to hit Western Australia in recent years – barrelled toward the Pilbara coast in February 2025, Port Hedland braced for impact. With wind gusts of up to 290 kilometres per hour and flash flooding expected, the region was placed under a Code Red Alert, and residents were told it was too late to evacuate.

Inside Hedland Health Campus, Cristian Gomez, Acting Medical Scientist in Charge, and Aimee Tran, Medical Scientist, remained on site for nearly 48 hours as part of the lockdown protocol. Despite the challenging conditions, Cristian and Aimee continued to provide essential pathology services, ensuring continuity of care for patients and support for clinical teams.

Preparation began days before the lockdown, with Cristian and Aimee securing blood stock, reagents, and necessities like potable water and electricity. Unexpected challenges arose quickly: their accommodation had to be swapped with little notice, and they were required to perform additional testing for specimens that couldn't be flown out due to weather conditions. Support from PathWest's senior scientists and microbiologists helped them navigate the unknown.

"Everything I had to get done kept me busy and focused," Cristian reflected. "But what really stood out was the support – the constant check-ins – calls, texts – just to make sure we were ok. It meant a lot."

Throughout the lockdown, Cristian and Aimee shared responsibilities, alternating on-call duties to allow each other time to rest. Their teamwork and camaraderie were vital.

Their experience highlights the resilience and adaptability of PathWest's regional workforce. Throughout the lockdown, Cristian and Aimee maintained critical testing operations, supported hospital staff, and stayed in close contact with colleagues across the network, demonstrating the professionalism that underpins service delivery in regional and emergency settings.

While Port Hedland was ultimately spared the cyclone's most destructive impact, the experience left a deep impression. For Cristian and Aimee, it was a powerful reminder of the vital role regional staff play in Western Australia's healthcare system.

"We may be a small, faraway workforce, but we come together and support each other when it's most needed."

Their dedication under pressure reflects the heart of our mission: delivering science that serves all communities, in every circumstance. The experience not only tested their resilience – it deepened their connection to the work they do.

"Working in regional healthcare during emergencies shows you a different side of WA. You face challenges you never imagined, but they build character and prepare you for anything as a healthcare worker. The experience stays with you."

Celebrating excellence in pathology

Professor Priyanthi Kumarasinghe

Awarded Distinguished Fellowship

PathWest is proud to celebrate the exceptional achievement of Clinical Professor Priyanthi Kumarasinghe, Chief Pathologist, who was awarded the Distinguished Fellow Award by the Royal College of Pathologists of Australasia (RCPA) in February 2025.

This prestigious honour is one of the highest recognitions in the field of pathology, reserved for Fellows who have made outstanding contributions to the discipline through leadership, research, education, and service. It acknowledges individuals who have attained a position of eminence and whose work has had a lasting impact on the profession.

Professor Kumarasinghe's career spans decades of diagnostic excellence, innovation, and mentorship. In her dual roles as Chief Pathologist at PathWest and President of the International Academy of Pathology (Australasian Division), she has played a pivotal role in shaping clinical standards, fostering interdisciplinary collaboration, and elevating the role of pathology in improving patient outcomes not only across Western Australia, but nationally and internationally.

Beyond her clinical leadership, Professor Kumarasinghe is a passionate educator and a dedicated advocate for the next generation of pathologists. Her unwavering commitment to teaching and professional development has inspired countless trainees and colleagues, fostering a culture of excellence, curiosity, and care in both pathology practice and education.

Professor Kumarasinghe's contributions include:

- Authoring nearly 150 peer-reviewed publications.
- Co-editing the first Australian gastrointestinal pathology textbook.
- Contributing to WHO tumour classification systems and structured cancer reporting protocols.
- Leading national projects such as HER2 testing for gastric cancers, which earned her the inaugural award from RCPA's official journal Pathology

Her recognition is a moment of pride for PathWest, especially as it coincides with the organisation's 20-year anniversary celebrations, which highlighted its evolution and excellence in public pathology.

This honour underscores the impact that dedicated healthcare professionals like Professor Kumarasinghe have on advancing science, improving healthcare, and serving the community.

Celebrating our people

Honouring Excellence and Milestones at PathWest

At PathWest, we celebrate the achievements, contributions, and connections that make our workplace exceptional.

This year, we honoured excellence, embraced community, and marked meaningful milestones across our teams.

Non-invasive Fetal Rhesus D genotyping

Finalist in the **Excellence in Primary Health Care Integration** category. Led by Diagnostic Genomics and King Edward Memorial Hospital Haematology teams, in collaboration with North Metropolitan Health Service (Maternal Fetal Medicine) and Department of Health (WA Health, Office of Population Health Genomics and Blood Unit, Office of the Chief Medical Officer).

WA Excellence Allied Health Awards 2024

PathWest was proud to support the inaugural WA Excellence in Allied Health Awards as a Silver Sponsor.

Finalist and Nominee:

- Nicola Sawyer
  – **Finalist,** Allied Health Educator of the Year
- Jake Gazeley
  – **Nominee,** Allied Health Researcher of the Year

Nicola Sawyer was recognised for her leadership in education and CPD for medical scientists, while **Jake Gazeley's** pioneering work in wastewater genomic surveillance positioned WA as a national leader in public health innovation.

Celebrating our people

Recognition of Service Awards

In November 2024, PathWest celebrated 140 staff members with 10 or more years of service. Led by the Chief Executive and Board Chair, the ceremony honoured:

- 40 years – 8 recipients
- 30 years – 8 recipients
- 20 years – 54 recipients
- 10 years – 70 recipients

(recognised at departmental level)

This event highlighted the dedication and long-standing contributions of our people across the organisation.

Individual Honours and Retirements

Professor Michaela Lucas

Inducted into the 2025 WA Women's Hall of Fame (Health category) for her outstanding contributions to immunology, research, and advocacy.

Professor Priyanthi Kumarasinghe

Awarded the 2025 Distinguished Fellow Award by the Royal College of Pathologists of Australasia.

Professor Dominic Spagnolo

Retired after five decades of service, leaving a legacy of excellence in pathology.

Farewells

With gratitude, we acknowledge the contributions of A/Prof Benhur Amanuel, Dr Victoria Fabian, and Dr Felicity Frost.

Milestones and Achievements

- 20 Years of Expanded Newborn Bloodspot Screening
- LinkedIn Top Companies 2025 – Midsize Category
- Dr Nicole Swarbrick & Dr Marcus Dabner awarded UWA Excellence in Teaching Awards
- Dr Katie Lewis and Prof Wendy Erber were awarded multiple prestigious fellowships
- Liz Byrnes – Geoffrey Kellerman Award and 20 Years of Service
- Cold Case Breakthroughs – Forensic Biology team supported WA Police in solving 30 and 45- year-old cold cases.

Sustainability

Sustainability in action

PathWest continues to embed sustainability into its operations, guided by the principle that science should serve not only people, but also the planet. This year, we made significant progress in reducing our environmental footprint through innovation, collaboration, and practical action.

Reducing Emissions and Energy Use

- **Electric Vehicle (EV) integration:** Our first electric courier vehicle was introduced, travelling approximately 300km daily. This transition is projected to reduce carbon emissions by over 14 tonnes annually and save around $6,500 in fuel costs.
- **EV charging infrastructure:** Charging stations were installed at our Fiona Stanley Hospital site, supporting the shift to low-emission transport.
- **Energy efficiency upgrades:** Installation of Variable Speed Drives (VSDs) on air handling units and exhaust fans in J Block at QEII, along with extraction units, contributed to a reduction of 986,643kg CO2-e and $217,827 in electricity costs since February 2023.
- **Travel rationalisation:** Regional Support Services streamlined Medical Scientist-in-Charge training to reduce travel from twice to once per year, and staff travel to conference was minimised, further lowering our carbon footprint.

Waste Reduction and Circular Practices

- **Recycling initiatives:** Over 20 tonnes of waste were diverted from landfill through active recycling of items such as coffee cups, pods, soft plastics, polystyrene, medicine blister packs, and food organics and garden organics (FOGO) waste.
- **Reusable and biodegradable materials:** Biodegradable "blueys" trialled at Bentley Hospital are now in use across many sites, decomposing in 180 days compared to 450 years for plastic alternatives. Plastic slide holders are now washed and re-used, saving over 28kg of plastic waste. Multi-use silicone tourniquets have replaced single-use versions, saving approximately 500 units weekly.
- **Keep Cup distribution:** 500 reusable cups made from recycled coffee cups were distributed to staff to reduce single-use waste.

Supporting Education and Innovation

- **Training support:** Around 10,000 expired collection tubes and swabs were donated to universities and training centres for student education.
- **Mortuary refurbishment:** Formalin collection units were installed to improve chemical waste management.
- **Sustainable pathology dashboard:** In collaboration with South Metropolitan Health Service (SMHS), PathWest developed a dashboard to visualise the environmental impact of pathology test requests. The "Think Before You Test" tool encourages clinicians to reduce unnecessary testing and associated emissions.
- **National collaboration:** PathWest participated in Monash University's Sustainable Development Institute workshops, contributing to the national dialogue on sustainable healthcare practices.

Feature Story

Smart testing, sustainable impact

At our PathWest PCR laboratory at QEII, innovation is driving sustainability. A new "one test detects all" screening method for upper respiratory viruses, including COVID-19 and seven others, now allows multiple pathogens to be detected in a single tube and run.

This streamlined approach not only improves diagnostic efficiency during peak respiratory seasons, but also significantly reduces environmental impact.

Based on the test numbers for 2024/25, the laboratory is projected to save:

- 177,000 single-use plastic pipette tips
- 800 plastic microtiter plates
- A substantial volume of soft plastic waste

By processing fewer plates, we're also reducing instrument workload, extending equipment life, and lowering energy use – proving that smarter science can serve both patients and the planet.

Sustainability in action

Feature Story

Sustainable thinking, one bag at a time

At PathWest's Haematology laboratory in Fiona Stanley Hospital, a small change is making a big impact. In a move toward environmental sustainability, the team replaced single-use plastic blood delivery bags with biodegradable alternatives – saving over 29,000 plastic bags from landfill each year, and cutting costs by $1,100.

Until recently, blood products were transported from the Transfusion Medicine Unit to wards in thick, red plastic bags – durable, but destined for landfill. That changed when Clinical Nurse, **Maya Chandra,** from the Day Medical Procedures Unit (DMPU), noticed the environmental cost and proposed a greener solution. Medical Scientist, **Rebecca Briggs,** took the idea forward, trialling biodegradable bags in November 2024 with support from the Transfusion Medicine Unit and clinical teams.

"The red bags were strong but couldn't be recycled," Rebecca explained. "Maya's observation was spot on. We sourced and trialled a biodegradable option, and the response was overwhelmingly positive."

Feedback from nurses, porters, and laboratory staff confirmed the new bags performed just as well – if not better – than the originals.

L to R: DMPU Clinical Nurse Maya Chandra; Medical Scientist Rebecca Briggs; Senior Medical Scientist in Charge Transfusion Annette Le Viellez

Since March 2025, the biodegradable bags have been in routine use across FSH and the initiative has already caught the attention of other PathWest sites.

This project is a powerful example of how environmental awareness, collaboration, and innovation can come together to create meaningful change. Special thanks go to **Maya, Rebecca,** Senior Medical Scientist, **Annette Le Viellez,** and the entire Transfusion Medicine Unit team for leading the way.

From one idea, a ripple effect is already spreading – proof that science that serves can also be science that sustains.

Innovation

Innovation with impact

PathWest continues to lead in applying cutting-edge science to real-world healthcare challenges. Our innovation initiatives reflect a commitment to advancing diagnostics, improving patient outcomes, and supporting the health system with future-ready solutions.

This year's highlights include breakthroughs in personalised cancer treatment, the integration of artificial intelligence in genomic analysis, and the adoption of advanced sequencing technologies. From forensic applications to therapeutic drug monitoring, each initiative demonstrates how innovation at PathWest is not only driving scientific progress–but delivering meaningful impact for patients, clinicians, and communities across Western Australia.

AI in Genomic Data Analysis

Artificial intelligence is being introduced to accelerate the interpretation of complex genomic data. As demand for genomic testing grows, AI will help reduce turnaround times, improve accuracy, and support clinicians in making informed decisions. This marks a transformative step in integrating technology into frontline pathology.

Forensic Investigative Genetic Genealogy (FIGG)

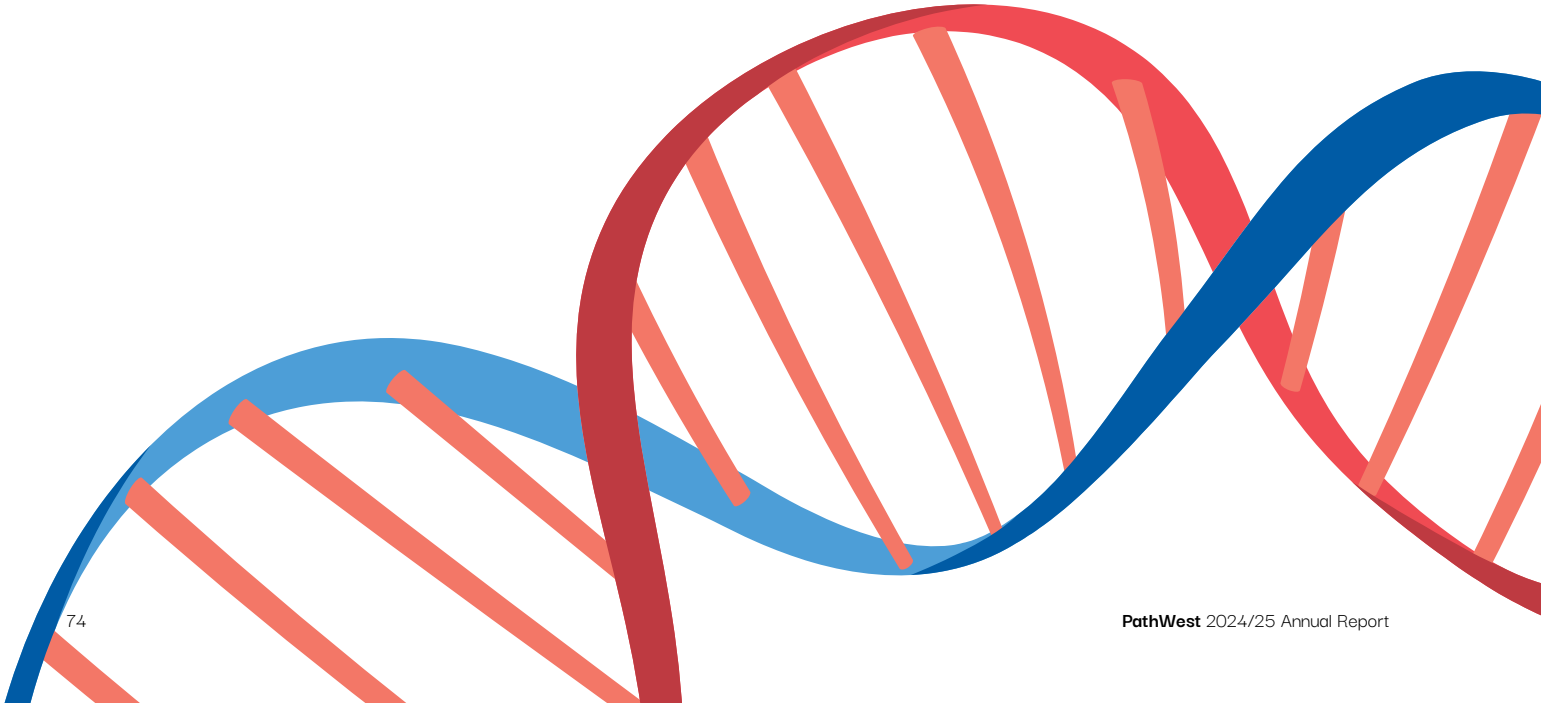
PathWest's Cold Case Team has adopted FIGG technology to solve decades-old crime. By combining advanced DNA testing with public genealogy databases, investigators have identified suspects, and human remains in cases dating back to the 1990s. This groundbreaking capability has led to multiple convictions and identifications, demonstrating the power of innovation in forensic science.

Nanopore Sequencing

Oxford Nanopore Technology is being trialled for metagenomic sequencing directly from clinical samples. This long-read sequencing can detect all microorganisms in a single test, including rare and emerging pathogens, and identify antimicrobial resistance genes in under six hours. It has already shown the capacity to enable accurate diagnoses in culture-negative infections and to inform more effective treatment decisions in critical care and transplant settings.

Therapeutic Drug Monitoring

PathWest is developing mass spectrometry panels to monitor 16 antibiotics commonly used in intensive care settings. These tests help clinicians optimise dosing for critically ill patients with altered liver or kidney function, improving treatment outcomes. Additional panels are being developed for cystic fibrosis therapies, supporting personalised medicine and cost-effective care.



Strategic projects

Strategic projects driving diagnostic advancement

PathWest continues to lead the way in applying scientific innovation to improve health outcomes across Western Australia. Our strategic initiatives this year reflect a strong commitment to advancing diagnostic capabilities, enhancing digital infrastructure, and expanding access to high-quality pathology services.

From the introduction of whole genome sequencing (WGS) to the implementation of digital pathology and specimen tracking systems, each project is designed to deliver measurable improvements in accuracy, efficiency, and patient care. These efforts demonstrate how PathWest is leveraging science to serve the community—ensuring our services remain responsive, future-focused, and aligned with the evolving needs of the health system.

Whole Genome Sequencing

PathWest, in collaboration with Genetic Health WA and North Metropolitan Health Service, launched a five-year Telethon-funded project to introduce WGS in WA. This marks the first time the entire human genome can be assessed locally, transforming diagnostics capabilities for children with rare diseases. The initiative will provide up to 1,000 families with life-changing insights, while also streamlining laboratory workflows and reducing costs through higher testing throughput. It represents a major leap forward in personalised medicine and equitable access to genomic testing across the state.

Traumatic Brain Injury Biomarkers

In partnership with RPH's Intensive Care Unit, PathWest is trialling biomarkers to improve the classification and diagnosis of traumatic brain injury. Traditional methods rely on the Glasgow Coma Scale (a simple way of measuring the depth of coma based on observations of eye-opening, speech, and movement), but new guidelines recommend supplementing this with biomarkers like GFAB and UCH-L1. These tests, taken within 24 hours of injury, offer more accurate triage and treatment pathways, especially when imaging is inconclusive. This project supports better outcomes for patients with complex neurological injuries.

eOrder Implementation

PathWest ICT has led the expansion of electronic pathology ordering (CPOE and eOrder) across WA hospitals. eOrder, a bedside tool for pathology requests and labelling, has significantly improved patient safety and diagnostic speed in Emergency Departments. The system also enhances transparency, auditability, and reduces administrative errors, reflecting a strong collaboration between ICT, WA Health Support Services, clinical teams, and pathology services.

Digital Morphology

A $500,000 OMRI grant is enabling the rollout of digital microscopy in two regional laboratories. This technology captures high resolution images of blood films, allowing remote view and faster diagnosis of conditions like leukaemia. It reduces delays caused by transporting slides to metropolitan laboratories and improves training for regional staff.

Digital Pathology

PathWest is installing high-throughput whole slide scanners and associated ICT infrastructure to enable digital image analysis in Anatomical Pathology. This will revolutionise diagnostic workflows, allowing sub-specialised services to be delivered remotely across WA. This initiative enhances collaboration, speeds diagnosis, and supports the future integration of AI and advanced analytics in pathology.

Newborn Screening Expansion

PathWest's newborn screening program, active since 1969, is undergoing rapid expansion. New tests like Sickle Cell Disease, Biotinidase deficiency, and X-linked Adrenoleukodystrophy are being developed, with implementation within 12-18 months. These additions align with emerging therapies and national mandates, ensuring early detection and treatment for life-threatening conditions and reinforcing PathWest's leadership in preventative health.

Specimen Tracking

A new digital courier tracking system is being developed to improve the traceability of patient samples during transport. Led by Regional Support Services, and supported by Pre-Analytical Services, Anatomical Pathology, and ICT, the initiative includes live data and mobile device integration with the Laboratory Information System. This project enhances efficiency, reduces risk, and ensures every sample is handled with precision and care.

Listening and responding

Your feedback

PathWest is committed to delivering high-quality pathology and specimen collection services across Western Australia. Central to this commitment is a culture of listening, recognising that meaningful service begins with understanding the experiences and expectations of those we serve.

Feedback Channels

PathWest encourages feedback from patients, healthcare providers, and community stakeholders to drive continuous improvement and celebrate staff excellence. Multiple accessible channels are available:

- Online – Anonymously via the PathWest Electronic Feedback forms or Care Opinion
- Email – feedback.pathwest@health.wa.gov.au
- Telephone – Call 13 PATH
- In person – Feedback forms are available at all collection centres
- Post – Addressed to: Manager, Business Development and Medical Liaison, Locked Bag 2009, Nedlands WA 6909

All feedback is managed through an electronic system that categorises submissions as complaints, compliments, concerns, or general contact. PathWest complies with the WA Health Complaints Management Policy, ensuring:

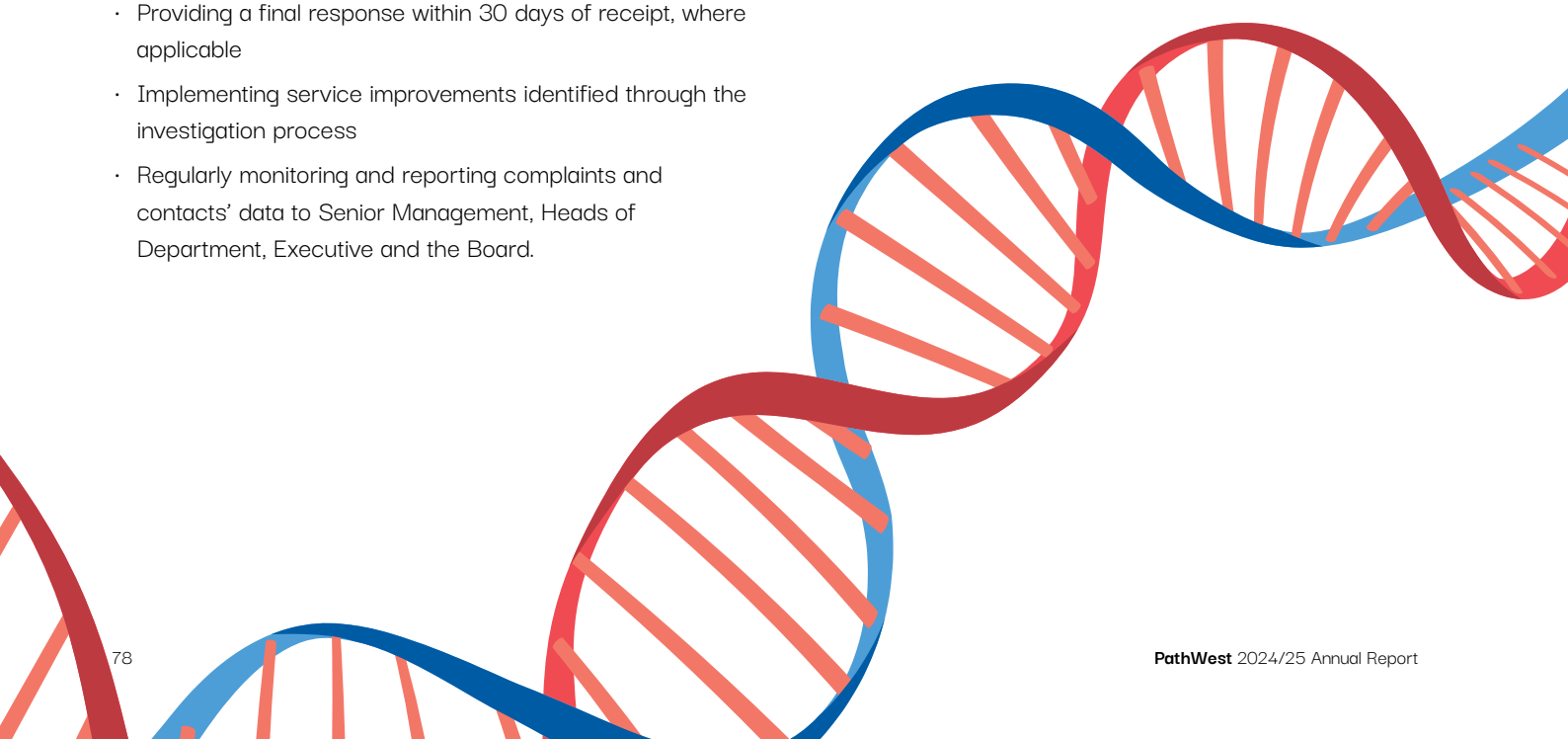
- Acknowledging feedback within five working days of receipt
- Informing patients, clients and customers of the resolution process
- Investigating all issues raised
- Providing a final response within 30 days of receipt, where applicable
- Implementing service improvements identified through the investigation process
- Regularly monitoring and reporting complaints and contacts' data to Senior Management, Heads of Department, Executive and the Board.

2024/25 Feedback Overview

During 2024/25 financial year, PathWest received a total of 400 feedback records, including 192 compliments. With over 10,200 collections conducted daily, 128 complaints, concerns, or contacts were received, reflecting a consistently high standard of service. Key themes identified in complaints and concerns included:

Category	Number
Access	44
Professional conduct	28
Quality of clinical care	24
Communication	23
Rights, respect and dignity	6
Corporate services	2
Costs	1
Total	**128**

PathWest continues to refine its feedback processes to ensure timely, responsive, and patient-centred service delivery. The volume of positive feedback received is a testament to the professionalism, expertise, and dedication of our staff in supporting the WA Health system and the broader community.



Compliments

Excellence in Pathology and Service

"PathWest has scientists and expertise that other WA laboratories don't. The model is the envy of other states."

"Only laboratory in WA that delivers non-standard testing and links clinical and environmental samples."

Our People Make the Difference

"She made my daughter feel safe and proud with the Bravery Award."

"He got my vein first go – after six failed attempts elsewhere."

Everyone was kind, professional, and kept checking I was ok."

Professionalism and Trust

"PathWest is the only provider I trust for public health decision-making."

"Your on-call scientist helped guide us through emergency Beriplex administration – you guys rock."

Quality and Reliability

"Always professional and reliable, even for urgent and complex work."

"Service has improved consistently over my 14 years in health."

Equity and Accessibility

"The accessible counter made all the difference – I wasn't made to feel like a nuisance."

"I drove over an hour because I trust the staff there."

Proactive engagement and satisfaction surveys

In addition to routine feedback, PathWest undertook comprehensive customer satisfaction surveys in 2024/25 across three key stakeholder groups: patients, health service providers (HSPs), and community-based referrers. This initiative aimed to deepen understanding of stakeholder experiences and inform strategic improvements.

Surveys were distributed via digital platforms, QR codes, and hardcopy formats to ensure accessibility across both metropolitan and regional areas. Over 3,800 individual survey questions were analysed, yielding valuable insights into service quality, communication, accessibility, and professionalism.

Key Insights and Actions

Patients commended staff professionalism and facility cleanliness, while identifying opportunities to improve waiting times and accessibility. In response, PathWest:

- Introduced real-time feedback tools
- Expanded child-friendly collection services, with the introduction of a trauma-informed approach to paediatric pathology collection
- Initiated planning for new collection centres in Armadale, Mirrabooka, Esperance, Albany, and Mandurah
- Secured a lease for a new collection centre in Rockingham, with fit-out work currently underway

Health Service Providers (HSPs) valued diagnostic report quality and staff expertise but noted delays in results delivery. PathWest responded by:

- Implementing SoftWebPlus, a digital order entry and result solution, to enhance electronic results access and efficiency

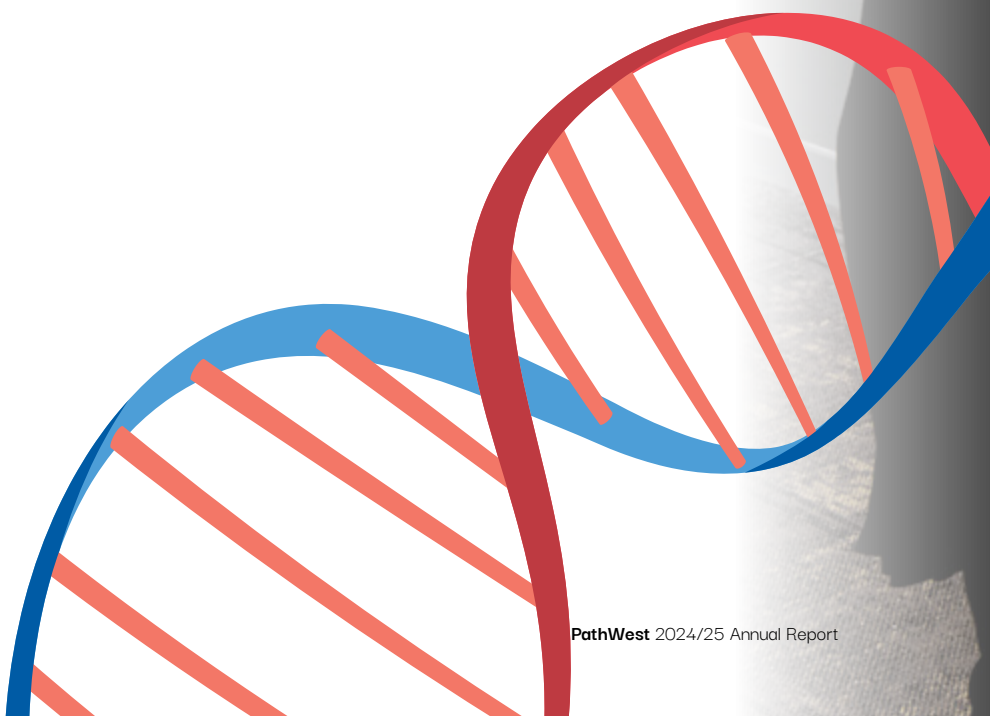
Community-based Referrers expressed a strong preference for electronic results and improved regional access. PathWest:

- Accelerated rollout of the Healthlink Messaging System, providing clinicians with a secure, cloud-based solution to access patient results anywhere at any time
- Commenced negotiations for new collection centres in Esperance, Albany, and Mandurah.

Embedding Feedback into Practice

Insights from both feedback channels and surveys have shaped a targeted improvement plan, endorsed by the PathWest Executive Committee (PEC) and Board. Key initiatives include:

- A centralised feedback system with real-time alerts
- Expanded training for specialised collection services
- Enhanced communication through webinars, newsletters, and provider portals
- Broader engagement with commercial clients and smaller stakeholder groups.




Welcome to
PathWest
7
PathWest

Looking ahead

Survey Reach

(a) 480 surveys submitted

(b) More than 3800 individual survey questions completed

(c) Stakeholders: Patients, HSPs, Community Doctors

(d) Distributed by QR Codes, hardcopies and digital platforms

Key Insights

(a) What we heard: Improve feedback response times, better electronic results delivery, expanded regional access to PathWest services.

(b) What we did: Real-time electronic feedback tools, major electronic results delivery system roll-out across health service providers and community referrers, new community specimen collection centres planned.

(c) What's next: Expand regional services, enhance provider communication, continuous feedback monitoring.

Impact

(a) 89% patient satisfaction

(b) WA map with new proposed collection centre locations highlighted (Rockingham, Armadale, Mirrabooka, Esperance, Albany, and Mandurah)

(c) Electronic results delivery rollout with 70% of referrers already transitioned

(d) Real-time feedback systems

(e) Expanded paediatric services

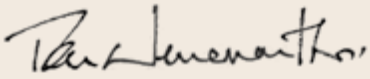
PathWest remains steadfast in its commitment to continuous improvement through meaningful engagement. By translating feedback into action, we are strengthening the connection between science and service, ensuring our diagnostic expertise is not only accurate and timely, but also responsive to the evolving needs of the Western Australian community.

Our performance

Certification of key performance indicators

PathWest Laboratory Medicine WA
Certification of key performance indicators for the year ended 30 June 2025.

We hereby certify that the key performance indicators are based on proper records, are relevant and appropriate for assisting users to assess PathWest's performance, and fairly represent the performance of PathWest for the financial year ended 30 June 2025.



Prof Tarun Weeramanthri
A/ Chair
Finance, Risk and Audit Committee
PathWest Board
12 September 2025

Samantha Elder
Chair, Finance, Risk and Audit Committee
PathWest Board
12 September 2025

Performance management framework

The Outcome Based Management (OBM) framework describes how Outcomes, Services and Key Performance Indicators (KPIs) are used to measure WA Health system performance.

PathWest is responsible for delivering and reporting against:

- **Outcome 2** - Prevention, health promotion and aged and continuing care services that help Western Australians to live healthy and safe lives.

"Pathology Services" was included in WA Health's OBM framework to recognise PathWest's establishment as a Statutory Authority as of 1 July 2018.

The OBM KPIs measure the effectiveness and efficiency of the services delivered against agreed State Government priorities and desired outcomes.

The alignment of 2024/25 PathWest key performance indicators to State Government and WA Health system goals are demonstrated below:

WA Government Goal	Safe, Strong and Fair Communities: Supporting out local and regional communities to thrive.
WA Health System Goal	Delivery of safe, quality, financially sustainable and accountable healthcare for all Western Australians.
WA Health Outcomes	Outcome 2: Prevention, health promotion and aged and continuing care services that help Western Australians to live healthy and safe lives.
Service Delivered	7. Pathology Services - The provision of State-wide and external diagnostic services across the full range of pathology disciplines, inclusive of forensic biology and pathology services to other WA Government agencies and services provided to the public by PathWest. This service also includes the operational costs of PathWest in delivering services to both Health Service Providers and the public.

PathWest's Key Performance Indicators

Key effectiveness indicator	Key effectiveness indicator	Key efficiency Indicator
KPI 1: Percentage of PathWest test results available to Emergency Departments (ED) within the required timeframe (in laboratory to verified time): (a) Haemoglobin (40 minutes) (b) Potassium (40 minutes) (c) Troponin (50 minutes)	**KPI 2:** Percentage of PathWest Quality Assurance Program results within an acceptable range.	**KPI 3:** Average cost of pathology services per test.

Shared responsibility with other agencies

PathWest works closely with a number of government and non-government agencies to deliver pathology and forensic services for the State to achieve the targets set out in the WA Health 2024/25 OBM key performance indicator data definition manual.

Key Effective Indicators

KPI 1: Percentage of PathWest test results available to Emergency Departments (ED) within the required timeframe (in laboratory to validated time):

(a) Haemoglobin (40 minutes)

(b) Potassium (40 minutes)

(c) Troponin (50 minutes)

Rationale

PathWest is the statewide public provider of pathology services, servicing public hospitals and the wider Western Australian community.

Turnaround times (TATs) for pathology tests are used as one indicator of pathology service performance. In an ED, timely availability of pathology test results is crucial for diagnosis and timely commencement of appropriate treatment. Improvements in pathology turnaround times can also impact the overall functioning of EDs by reducing the length of patient stays and improving throughput.

This performance indicator is based on three indicators produced by the Australian Council of Healthcare Standards (ACHS). The selection of these specific tests is due to their crucial role in diagnosing potentially life-threatening conditions in an emergency setting.

Results

671,527 tests from 11 hospital EDs were assessed against the targets during 2024/25. All three KPIs were met, with stable or improved performance noted over the previous year.

Test	2021/22 Revised Actual*	2022/23 Revised Actual*	2023/24 Actual	2024/25 Target	2024/25 Actual
Haemoglobin	97%	97%	96%	88 %	96%
Plasma Potassium	72%	74%	75%	67%	77%
Troponin I	71%	73%	75%	74%	75%

Note: This KPI is based on ACHS indicators which are specific to pathology requests from EDs only. Due to the inconsistent classification of emergency activity in smaller regional hospitals (e.g. Public acute groups C and D21), these sites are excluded from this KPI

*The computation methodology for this KPI was updated in 2023/24 to use "verified time" rather than "resulted time" as this better reflects when the Clinician has access to reviewing the result. This change had a material impact on the KPI therefore comparative periods were revised.

Data Source: SCC Soft Laboratory Information System (Soft SCC).

KPI 2: Percentage of PathWest Quality Assurance Program (QAP) results within an acceptable range

Rationale

PathWest is the statewide public provider of pathology services, servicing public hospitals and the wider Western Australian community.

PathWest performs over 12 million tests per year. A mandatory requirement for continuing laboratory accreditation is satisfactory performance in external quality assurance programmes (QAPs). External QAPs are available for all pathology disciplines and are developed in consultation with professional bodies and with significant input from participating laboratories. The Royal College of Pathologists of Australasia (RCPA) has the most extensive QAP in Australasia with submissions from participating laboratories nationwide.

Pathology testing is used to:

- diagnose 70% of all diseases and 100% of cancers
- predict susceptibility to disease
- prevent disease by identifying risk factors in patients that can be modified
- determine patient prognosis
- identify the presence or absence of infection
- monitor disease, identifying whether treatments are effective, and
- personalise treatment to achieve the best clinical outcomes.

Tests that fail quality assurance may produce erroneous results. Inaccurate results can lead to misdiagnosis and mistreatment of patients and delays in diagnosis or treatment, leading to increased morbidity or mortality.

PathWest participates in a broad range of external QAPs to meet their mandatory accreditation requirements.

Results

140,032 QAP test results submitted to the RCPA for validation were included in the KPI measurement for 2024/25. The reported results are based on submissions due and tendered during 2024/25.

Division	2021/22 Actual	2022/23 Actual	2023/24 Actual	2024/25 Target*	2024/25 Actual
Anatomical Pathology	99%	98%	99%	100%	100%
South-East Division	98%	98%	98%	100%	98%
North-West Division	98%	97%	98%	100%	97%
Regional Services	96%	98%	98%	100%	97%
PathWest Total	**97%**	**98%**	**98%**	**100%**	**97%**

* While there is not an industry defined target, PathWest uses the theoretical target of 100% passed to drive continuous quality improvement across the organisation.

Data Source: RCPA QAP survey result reports.

KPI 3: Average cost of pathology services per test

Rationale

PathWest is the statewide public provider of pathology services, servicing public hospitals and the wider Western Australian community.

The purpose of this indicator is to provide a longitudinal measure of the financial efficiency of PathWest in the delivery of clinical and health pathology services (excluding forensic services) across WA.

Results

Increasing demand for pathology services resulted in an increase in test activity compared with 2023/24. The increase in expenditure and average cost per test was largely due to increases in CPI and wages policy (5% wage increase for most staff), an increase in costs for services provided free of charge by Health Support Services and costs associated with processing increased volume of tests.

Items	2021/22	2022/23	2023/24	2024/25
Expenditure	$361,257,121	$360,826,890	$387,703,464	$422,061,778
Activity: tests	12,829,645	12,686,651	13,658,321	14,360,182
Average cost per test	$28.16	$28.44	$28.39	$29.39
Target	**$25.00**	**$25.00**	**$25.00**	**$23.00**

2021/22, 2022/23, 2023/24 and 2024/25 Data Sources:
SCC Soft Laboratory Information System.
Oracle General Ledger 17.2 OBM Expenditure.

Disclosure and compliance

Independent auditor's report 2025

PathWest Laboratory Medicine WA

To the Parliament of Western Australia

Report on the audit of the financial statements

Opinion

I have audited the financial statements of PathWest Laboratory Medicine WA (PathWest) which comprise:

- the statement of financial position as at 30 June 2025, the statement of comprehensive income, statement of changes in equity and statement of cash flows for the year then ended
- notes comprising a summary of material accounting policies and other explanatory information.

In my opinion, the financial statements are:

- based on proper accounts and present fairly, in all material respects, the operating results and cash flows of PathWest for the year ended 30 June 2025 and the financial position as at the end of that period
- in accordance with Australian Accounting Standards (applicable to Tier 2 Entities), the *Financial Management Act 2006* and the Treasurer's Instructions.

Basis for opinion

I conducted my audit in accordance with the Australian Auditing Standards. My responsibilities under those standards are further described in the Auditor's responsibilities for the audit of the financial statements section of my report.

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

Responsibilities of the Board for the financial statements

The Board is responsible for:

- keeping proper accounts
- preparation and fair presentation of the financial statements in accordance with Australian Accounting Standards (applicable to Tier 2 Entities), the *Financial Management Act 2006* and the Treasurer's Instructions
- such internal control as it determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the Board is responsible for:

- assessing the entity's ability to continue as a going concern
- disclosing, as applicable, matters related to going concern
- using the going concern basis of accounting unless the Western Australian Government has made policy or funding decisions affecting the continued existence of PathWest.

Auditor's responsibilities for the audit of the financial statements

As required by the *Auditor General Act 2006*, my responsibility is to express an opinion on the financial statements. The objectives of my audit are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes my opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with 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 the financial statements. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations or the override of internal control.

A further description of my responsibilities for the audit of the financial statements is located on the Auditing and Assurance Standards Board website. This description forms part of my auditor's report and can be found at *https://www.auasb.gov.au/auditors_responsibilities/ar4.pdf*

Report on the audit of controls

Basis for Qualified Opinion

Network security controls

I identified significant weaknesses in network security controls and controls over unauthorised connection of devices at the PathWest Laboratory Medicine WA. These weaknesses could compromise the confidentiality, integrity and availability of key systems and information. These weaknesses also exposed the WA Health network to increased vulnerabilities which could undermine the integrity of data across all systems, including the financial system.

Qualified Opinion

I have undertaken a reasonable assurance engagement on the design and implementation of controls exercised by PathWest. The controls exercised by PathWest are those policies and procedures established to ensure that the receipt, expenditure and investment of money, the acquisition and disposal of property, and the incurring of liabilities have been in accordance with the State's financial reporting framework (the overall control objectives).

In my opinion, except for the possible effects of the matters described in the Basis for Qualified Opinion paragraph, in all material respects, the controls exercised by PathWest are sufficiently adequate to provide reasonable assurance that the controls within the system were suitably designed to achieve the overall control objectives identified as at 30 June 2025, and the controls were implemented as designed as at 30 June 2025.

Other Matter

PathWest has made payments using the direct payments to third parties pathway throughout the year. The Department of Health has approved this pathway to be used in limited circumstances as expenditure is not subject to levels of approval required under Treasurer's Instruction 5 Expenditure and Payments.

While this is not a primary pathway for expenditure for PathWest, we have identified weaknesses in how this pathway is used and the types of transactions processed using this pathway, which increases the risk of fraud.

To allow for more detailed reporting of these concerns, the Auditor General has decided to report these matters separately as a performance audit tabled in Parliament.

My opinion is not modified in respect of this matter.

The Board's responsibilities

The Board is responsible for designing, implementing and maintaining controls to ensure that the receipt, expenditure and investment of money, the acquisition and disposal of property and the incurring of liabilities are in accordance with the *Financial Management Act 2006*, the Treasurer's Instructions and other relevant written law.

Auditor General's responsibilities

As required by the *Auditor General Act 2006*, my responsibility as an assurance practitioner is to express an opinion on the suitability of the design of the controls to achieve the overall control objectives and the implementation of the controls as designed. I conducted my engagement in accordance with Standard on Assurance Engagements ASAE 3150 *Assurance Engagements on Controls* issued by the Australian Auditing and Assurance Standards Board. That standard requires that I comply with relevant ethical requirements and plan and perform my procedures to obtain reasonable assurance about whether, in all material respects, the controls are suitably designed to achieve the overall control objectives and were implemented as designed.

An assurance engagement involves performing procedures to obtain evidence about the suitability of the controls design to achieve the overall control objectives and the implementation of those controls. The procedures selected depend on my judgement, including an assessment of the risks that controls are not suitably designed or implemented as designed. My procedures included testing the implementation of those controls that I consider necessary to achieve the overall control objectives.

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

Limitations of controls

Because of the inherent limitations of any internal control structure, it is possible that, even if the controls are suitably designed and implemented as designed, once in operation, the overall control objectives may not be achieved so that fraud, error or non-compliance with laws and regulations may occur and not be detected. Any projection of the outcome of the evaluation of the suitability of the design of controls to future periods is subject to the risk that the controls may become unsuitable because of changes in conditions.

Report on the audit of the key performance indicators

Opinion

I have undertaken a reasonable assurance engagement on the key performance indicators of PathWest for the year ended 30 June 2025 reported in accordance with the *Financial Management Act 2006* and the Treasurer's Instructions (legislative requirements). The key performance indicators are the Under Treasurer-approved key effectiveness indicators and key efficiency indicators that provide performance information about achieving outcomes and delivering services.

In my opinion, in all material respects, the key performance indicators report of PathWest for the year ended 30 June 2025 is in accordance with the legislative requirements, and the key performance indicators are relevant and appropriate to assist users to assess PathWest's performance and fairly represent indicated performance for the year ended 30 June 2025.

The Board's responsibilities for the key performance indicators

The Board is responsible for the preparation and fair presentation of the key performance indicators in accordance with the *Financial Management Act 2006* and the Treasurer's Instructions and for such internal controls as the Board determines necessary to enable the preparation of key performance indicators that are free from material misstatement, whether due to fraud or error.

In preparing the key performance indicators, the Board is responsible for identifying key performance indicators that are relevant and appropriate, having regard to their purpose in accordance with Treasurer's Instruction 3 Financial Sustainability – Requirement 5: Key Performance Indicators.

Auditor General's responsibilities

As required by the *Auditor General Act 2006*, my responsibility as an assurance practitioner is to express an opinion on the key performance indicators. The objectives of my engagement are to obtain reasonable assurance about whether the key performance indicators are relevant and appropriate to assist users to assess the entity's performance and whether the key performance indicators are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes my opinion. I conducted my engagement in accordance with Standard on Assurance Engagements ASAE 3000 *Assurance Engagements Other than Audits or Reviews of Historical Financial Information* issued by the Australian Auditing and Assurance Standards Board. That standard requires that I comply with relevant ethical requirements relating to assurance engagements.

An assurance engagement involves performing procedures to obtain evidence about the amounts and disclosures in the key performance indicators. It also involves evaluating the relevance and appropriateness of the key performance indicators against the criteria and guidance in Treasurer's Instruction 3 - Requirement 5 for measuring the extent of outcome achievement and the efficiency of service delivery. The procedures selected depend on my judgement, including the assessment of the risks of material misstatement of the key performance indicators. In making these risk assessments, I obtain an understanding of internal control relevant to the engagement in order to design procedures that are appropriate in the circumstances.

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

My independence and quality management relating to the report on financial statements, controls and key performance indicators

I have complied with the independence requirements of the *Auditor General Act 2006* and the relevant ethical requirements relating to assurance engagements. In accordance with ASQM 1 *Quality Management for Firms that Perform Audits or Reviews of Financial Reports and Other Financial Information, or Other Assurance or Related Services Engagements*, the Office of the Auditor General maintains a comprehensive system of quality management including documented policies and procedures regarding compliance with ethical requirements, professional standards and applicable legal and regulatory requirements.

Other information

The Board is responsible for the other information. The other information is the information in the entity's annual report for the year ended 30 June 2025, but not the financial statements, key performance indicators and my auditor's report.

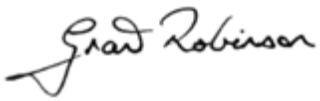
My opinions on the financial statements, controls and key performance indicators do not cover the other information and accordingly I do not express any form of assurance conclusion thereon.

In connection with my audit of the financial statements, controls and key performance indicators my responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements and key performance indicators or my knowledge obtained in the audit or otherwise appears to be materially misstated.

If, based on the work I have performed, I conclude that there is a material misstatement of this other information, I am required to report that fact. I did not receive the other information prior to the date of this auditor's report. When I do receive it, I will read it and if I conclude that there is a material misstatement in this information, I am required to communicate the matter to those charged with governance and request them to correct the misstated information. If the misstated information is not corrected, I may need to retract this auditor's report and re-issue an amended report.

Matters relating to the electronic publication of the audited financial statements and key performance indicators

This auditor's report relates to the financial statements and key performance indicators of PathWest Laboratory Medicine WA for the year ended 30 June 2025 included in the annual report on PathWest's website. PathWest's management is responsible for the integrity of PathWest's website. This audit does not provide assurance on the integrity of PathWest's website. The auditor's report refers only to the financial statements, controls and key performance indicators described above. It does not provide an opinion on any other information which may have been hyperlinked to/from the annual report. If users of the financial statements and key performance indicators are concerned with the inherent risks arising from publication on a website, they are advised to contact the entity to confirm the information contained in the website version.



Grant Robinson
Assistant Auditor General Financial Audit
Delegate of the Auditor General for Western Australia
Perth, Western Australia
17 September 2025

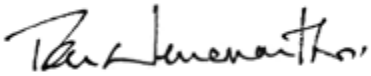
Disclosure and legal compliance financial statements

CERTIFICATION OF FINANCIAL STATEMENTS
For the financial year ended 30 June 2025

The accompanying financial statements of PathWest Laboratory Medicine WA have been prepared in compliance with the provisions of the *Financial Management Act 2006* from proper accounts and records to present fairly the financial transactions for the financial year ended 30 June 2025 and the financial position as at 30 June 2025.

At the date of signing we are not aware of any circumstances which would render the particulars included within the financial statements misleading or inaccurate.

Sandy Kerr
Executive Director Finance, Procurement and Commercial Services
PathWest Laboratory Medicine WA
12 September 2025



Prof Tarun Weeramanthri
Acting Chair
PathWest Board
12 September 2025

Samantha Elder
Chair, Finance Risk and Audit Committee
PathWest Board
12 September 2025

Statement of comprehensive income for the year ended 30 June 2025

	Notes	2025 $'000	2024 $'000
COST OF SERVICES			
Expenses			
Employee benefits expense	2.1.1	314,052	287,582
Domestic contracts	2.2	2,405	2,220
Depreciation and amortisation expenses	4.1, 4.2, 4.3	18,230	16,356
Finance costs	6.2	402	310
Loss on disposal of non-current assets	2.3	-	29
Repairs, maintenance and minor equipment	2.2	14,073	15,860
Supplies and services	2.2	114,341	106,302
Other expenses	2.2	27,068	25,011
Total cost of services		**490,571**	**453,670**
Income			
Patient charges	3.1	43,510	39,950
Other fees for services	3.2	17,461	15,718
Gain on disposal of non-current assets	2.3	73	-
Other income	3.4	1,901	1,455
Total income		**62,945**	**57,123**
NET COST OF SERVICES		**427,626**	**396,547**
Income from State Government			
Service Agreement Grants	3.3	193,558	170,821
Income from other public sector entities	3.3	212,773	202,330
Products and Services received free of charge	3.3	19,476	17,465
Total income from State Government		**425,807**	**390,616**
SURPLUS / (DEFICIT) FOR THE PERIOD		**(1,819)**	**(5,931)**
OTHER COMPREHENSIVE INCOME **Items not reclassified subsequently to profit or loss**			
Changes in asset revaluation reserve		**9,926**	**5,733**
Total other comprehensive income		**9,926**	**5,733**
TOTAL COMPREHENSIVE INCOME FOR THE PERIOD		**8,107**	**(198)**

The Statement of Comprehensive Income should be read in conjunction with the accompanying notes.

Statement of financial position as at 30 June 2025

	Notes	2025 $'000	2024 $'000
ASSETS			
Current Assets			
Cash and cash equivalents	6.3	11,236	15,248
Restricted cash and cash equivalents	6.3	15,641	18,486
Receivables	5.1	32,465	34,296
Inventories	5.4	2,471	2,855
Other current assets	5.3	2,584	1,659
Total Current Assets		**64,397**	**72,544**
Non-Current Assets			
Receivables	5.1	10,848	9,038
Amounts receivable for services	5.2	163,725	147,569
Property, plant and equipment	4.1	124,593	113,528
Intangible assets	4.2	28,070	33,027
Right-of-use assets	4.3	11,658	8,364
Total Non-Current Assets		**338,894**	**311,526**
TOTAL ASSETS		**403,291**	**384,070**
LIABILITIES			
Current Liabilities			
Payables	5.5	25,235	22,810
Lease liabilities	6.1	3,183	2,515
Employee related provisions	2.1.2	62,739	59,860
Other current liabilities	5.6	46	6,631
Total Current Liabilities		**91,203**	**91,816**
Non-Current Liabilities			
Lease liabilities	6.1	8,849	6,158
Employee related provisions	2.1.2	14,602	14,823
Total Non-Current Liabilities		**23,451**	**20,981**
TOTAL LIABILITIES		**114,654**	**112,797**
NET ASSETS		**288,637**	**271,273**
EQUITY			
Contributed equity		236,146	226,889
Reserves		33,713	23,787
Accumulated surplus		18,778	20,597
TOTAL EQUITY		**288,637**	**271,273**

The Statement of Financial Position should be read in conjunction with the accompanying notes.

Statement of changes in equity for the year ended 30 June 2025

	Note	Contributed equity $'000	Reserves $'000	Accumulated surplus $'000	Total equity $'000
Balance at 1 July 2024		**226,889**	**23,787**	**20,597**	**271,273**
Surplus/(deficit)		-	-	(1,819)	**(1,819)**
Other comprehensive income	4.1	-	9,926	-	**9,926**
Total comprehensive income for the period		**-**	**9,926**	**(1,819)**	**8,107**
Transactions with owners in their capacity as owners: Contribution by owners - Capital appropriations administered by Department of Health		**9,257**	**-**	**-**	**9,257**
Total		**9,257**	**-**	**-**	**9,257**
Balance at 30 June 2025		**236,146**	**33,713**	**18,778**	**288,637**

	Note	Contributed equity	Reserves	Accumulated surplus	Total equity
Balance at 1 July 2023		**212,342**	**18,054**	**26,528**	**256,924**
Surplus/(deficit)		-	-	(5,931)	**(5,931)**
Other comprehensive income		-	5,733		**5,733**
Total comprehensive income for the period		**-**	**5,733**	**(5,931)**	**(198)**
Transactions with owners in their capacity as owners: Contribution by owners - Capital appropriations administered by Department of Health		14,547	-	-	**14,547**
Total		**14,547**	**-**	**-**	**14,547**
Balance at 30 June 2024		**226,889**	**23,787**	**20,597**	**271,273**

The Statement of Changes in Equity should be read in conjunction with the accompanying notes.

Statement of cash flows for the year ended 30 June 2025

	Notes	2025 $'000	2024 $'000
CASH FLOWS FROM THE STATE GOVERNMENT			
Department of Health - Service Agreement Grants		177,402	154,870
Contribution by owners - Capital appropriations		9,257	14,547
Funds from other public sector entities		206,284	205,316
Net cash provided by the State Government		**392,943**	**374,733**
Utilised as follows: **CASH FLOWS FROM OPERATING ACTIVITIES**			
Payments			
Employee benefits		(311,527)	(283,268)
Supplies and services		(138,455)	(129,354)
Finance costs		(402)	(310)
Receipts			
Receipts from customers		43,479	37,917
Other receipts		21,379	18,546
Net cash used in operating activities		**(385,526)**	**(356,469)**
CASH FLOWS FROM INVESTING ACTIVITIES			
Payments			
Purchase of non-current assets		(11,013)	(11,696)
Receipts			
Proceeds from sale of non-current assets		139	1
Net cash used in investing activities		**(10,874)**	**(11,695)**
CASH FLOWS FROM FINANCING ACTIVITIES			
Payments			
Principal elements of lease payments		(3,400)	(2,796)
Net cash used in financing activities		**(3,400)**	**(2,796)**
Net increase/(decrease) in cash and cash equivalents		(6,857)	3,773
Cash and cash equivalents at the beginning of the period		33,734	37,278
Adjustment for the reclassification of accrued salaries account		-	(7,317)
CASH AND CASH EQUIVALENTS AT THE END OF THE PERIOD	6.3	**26,877**	**33,734**

The Statement of Cash Flows should be read in conjunction with the accompanying notes.

Notes to the financial statements for the year ended 30 June 2025

NOTE 1. Basis of preparation

PathWest Laboratory Medicine WA (PathWest) is a WA Government Health Service Provider and is controlled by the State of Western Australia, which is the ultimate parent. PathWest is a not-for-profit entity (as profit is not its principal objective).

A description of the nature of its operations and its principal activities have been included in the 'Overview' which does not form part of these financial statements.

These annual financial statements were authorised for issue by the Accountable Authority of PathWest on 12 September 2025.

Statement of compliance

The financial statements are general purpose financial statements which have been prepared in accordance with Australian Accounting Standards – Simplified Disclosures, the Conceptual Framework and other authoritative pronouncements issued by the Australian Accounting Standards Board (AASB) as modified by Treasurer's instructions. Some of these pronouncements are modified to vary their application and disclosure.

The Financial Management Act 2006 and Treasurer's instructions, which are legislative provisions governing the preparation of financial statements for agencies, take precedence over AASB pronouncements. Where an AASB pronouncement is modified and has had a significant financial effect on the reported results, details of the modification and the resulting financial effect are disclosed in the notes to the financial statements.

Basis of preparation

These financial statements are presented in Australian dollars applying the accrual basis of accounting and using the historical cost convention. Certain balances will apply a different measurement basis (such as the fair value basis). Where this is the case the different measurement basis is disclosed in the associated note. All values are rounded to the nearest thousand dollars ($'000).

Accounting for Goods and Services Tax (GST)

Income, expenses and assets are recognised net of the amount of goods and services tax (GST), except that the:

(a) amount of GST incurred by PathWest as a purchaser that is not recoverable from the Australian Taxation Office (ATO) is recognised as part of an asset's cost of acquisition or as part of an item of expense; and

(b) receivables and payables are stated with the amount of GST included.

Cash flows are included in the Statement of Cash Flows on a gross basis. However, the GST components of cash flows arising from investing and financing activities which are recoverable from, or payable to, the ATO are classified as operating cash flows.

Contributed equity

AASB Interpretation 1038 *Contributions by Owners Made to Wholly-Owned Public Sector Entities* requires transfers in the nature of equity contributions, other than as a result of a restructure of administrative arrangements, as designated as contributions by owners (at the time of, or prior to, transfer) be recognised as equity contributions. Capital appropriations have been designated as contributions by owners by TI 8 - Requirement 8.1 (i) and have been credited directly to Contributed Equity.

Comparative information

Except when an Australian Accounting Standard permits or requires otherwise, comparative information is presented in respect of the previous period for all amounts reported in the financial statements. AASB 1060 provides relief from presenting comparatives for:

- Property, Plant and Equipment reconciliations;
- Intangible Asset reconciliations; and
- Right-of-Use Asset reconciliations.

Judgements and estimates

Judgements, estimates and assumptions are required to be made about financial information being presented. The significant judgements and estimates made in the preparation of these financial statements are disclosed in the notes where amounts affected by those judgements and/or estimates are disclosed. Estimates and associated assumptions are based on professional judgements derived from historical experience and various other factors that are believed to be reasonable under the circumstances.

Notes to the financial statements for the year ended 30 June 2025

NOTE 2. Use of our funding

Expenses incurred in the delivery of services

This section provides additional information about how PathWest's funding is applied and the accounting policies that are relevant for an understanding of the items recognised in the financial statements. The primary expenses incurred by PathWest in achieving its objectives and the relevant notes are:

	Notes
Employee benefits expenses	2.1.1
Employee related provisions	2.1.2
Other expenditure	2.2

2.1.1 Employee benefits expense

	2025 $'000	2024 $'000
Employee benefits	282,790	259,746
Superannuation	31,262	27,836
Total employee benefits expenses	**314,052**	**287,582**

Employee benefits

Include wages, salaries and social contributions, accrued and paid leave entitlements and paid sick leave, and non-monetary benefits recognised under accounting standards other than AASB 16 (such as medical care, housing, cars and free or subsidised goods or services) for employees.

Superannuation

Superannuation is the amount recognised in profit or loss of the Statement of comprehensive income comprises employer contributions paid to the GSS (concurrent contributions), the WSS, the GESB schemes or other superannuation funds.

AASB 16 non-monetary benefits

Non-monetary employee benefits, predominantly relating to the provision of vehicle and housing benefits that are recognised under AASB 16 and are excluded from the employee benefits expense.

Employee contributions

Contributions made to PathWest by employees towards employee benefits that have been provided by PathWest. This includes both AASB 16 and non-AASB 16 employee contributions.

Notes to the financial statements for the year ended 30 June 2025

2.1.2 Employee related provisions

	2025 $'000	2024 $'000
Current		
Employee benefits provisions		
Annual leave [a]	35,986	34,271
Time off in lieu leave [a]	1,967	1,976
Long service leave [b]	24,743	23,570
Deferred salary scheme [c]	43	43
Total current employee related provisions	**62,739**	**59,860**
Non-current		
Employee benefits provisions		
Long service leave [b]	14,561	14,805
Deferred salary scheme [c]	41	18
Total non-current employee related provisions	**14,602**	**14,823**
Total employee related provisions	**77,341**	**74,683**

Provision is made for benefits accruing to employees in respect of annual leave and long service leave for services rendered up to the reporting date and recorded as an expense during the period the services are delivered.

(a) Annual leave and time off in lieu leave liabilities

Annual leave and time off in lieu leave liabilities are classified as current as there is no unconditional right to defer settlement for at least 12 months after the end of the reporting period.

The provision for annual leave is calculated at the present value of expected payments to be made in relation to services provided by employees up to the reporting date.

(b) Long service leave liabilities

Unconditional long service leave provisions are classified as current liabilities as PathWest does not have an unconditional right to defer settlement of the liability for at least 12 months after the end of the reporting period.

Pre-conditional and conditional long service leave provisions are classified as non-current liabilities because PathWest has an unconditional right to defer the settlement of the liability until the employee has completed the requisite years of service.

The provision for long service leave is calculated at present value as PathWest does not expect to wholly settle the amounts within 12 months. The present value is measured taking into account the present value of expected future payments to be made in relation to services provided by employees up to the reporting date. These payments are estimated using the remuneration rate expected to apply at the time of settlement and discounted using market yields at the end of the reporting period on national government bonds with terms to maturity that match, as closely as possible, the estimated future cash outflows.

Notes to the financial statements for the year ended 30 June 2025

2.1.2 Employee related provisions (continued)

Key sources of estimation uncertainty - long service leave

Key estimates and assumptions concerning the future are based on historical experience and various other factors that have a significant risk of causing a material adjustment to the carrying amount of assets and liabilities within the next financial year.

Several estimates and assumptions are used in calculating an agency's long service leave provision. These include:

- expected future salary rates;
- discount rates;
- employee retention rates; and
- expected future payments.

Changes in these estimations and assumptions may impact on the carrying amount of the long service leave provision. Any gain or loss following revaluation of the present value of long service leave liabilities is recognised as employee benefits expense.

(c) Deferred salary scheme liabilities

Deferred salary scheme liabilities are classified as current where there is no unconditional right to defer settlement for at least 12 months after the end of the reporting period.

2.2 Other Expenditure

	2025 $'000	2024 $'000
Domestic contracts		
Domestic charges	2,246	2,085
Food supplies	99	81
Patient transport costs	60	54
Total domestic contracts expenses	**2,405**	**2,220**
Repairs, maintenance and minor equipment		
Repairs and maintenance	10,770	10,630
Minor equipment	3,303	5,230
Total repairs, maintenance and minor equipment expenses	**14,073**	**15,860**
Supplies and services		
Supply costs	94,928	88,866
Utilities	38	48
Services provided by Health Support Services (HSS)		
Information, communication and technology (ICT) services	14,442	12,702
Supply chain services	1,762	1,750
Financial services	741	662
Human resource services	2,430	2,274
Total supplies and services expenses	**114,341**	**106,302**

Notes to the financial statements for the year ended 30 June 2025

2.2 Other Expenditure (continued)

	2025 $'000	2024 $'000
Other expenses		
Communications	711	587
Document management	379	294
Information, communication and technology	10,345	8,629
Research, development and other grants	19	63
Workers compensation insurance	2,001	1,252
Training	254	377
Travel and accommodation	3,375	3,551
Rental expenses	1,201	1,882
Other insurances	2,787	1,904
Consultancy fees	555	592
Other employee related expenses	216	978
Printing and stationery	1,163	1,104
Expected credit losses expense	-	14
Motor vehicle expenses	445	403
Bank fees and charges	23	(7)
Subscriptions and periodicals	2,019	2,311
Licences and fees	359	249
Rates and charges	1	3
Legal	93	25
Advertising	3	5
Audit fees	476	319
Other	643	476
Total other expenses	**27,068**	**25,011**
Total other expenditure	**157,887**	**149,393**

Supplies and services

Supplies and services expenses are recognised as an expense in the reporting period in which they are incurred. The carrying amounts of any materials held for distribution are expensed when the materials are distributed.

Rental expenses include:

i) Short-term leases with a lease term of 12 months or less;

ii) Low-value leases with an underlying value of $5,000 or less; and

iii) Variable lease payments, recognised in the period in which the event or condition that triggers those payments occur.

Repairs, maintenance and minor equipment costs are recognised as expenses as incurred.

Information, communication and technology

Information, communication and technology costs are recognised as expenses as incurred.

Expected credit losses

The allowance for expected credit losses of trade receivables is recognised for movement in allowance for impairment of trade receivables.

Notes to the financial statements for the year ended 30 June 2025

2.3 Net gain/(loss) on disposal of non-current assets

	2025 $'000	2024 $'000
Carrying amount of non-current assets disposed:		
Property, plant and equipment	67	29
	67	**29**
Proceeds from disposal of non-current assets:		
Property, plant and equipment	140	
	140	**-**
Net gain/(loss) on disposal of non-current assets	**73**	**(29)**

Gains and losses on the disposal of non-current assets are recognised in profit or loss in the Statement of Comprehensive Income.

Notes to the financial statements for the year ended 30 June 2025

NOTE 3. Our funding sources

How we obtain our funding

This section provides additional information about how PathWest obtains its funding and the relevant accounting policy notes that govern the recognition and measurement of this funding. The primary income received by PathWest and the relevant notes are:

	Notes
Patient charges	3.1
Other fees for services	3.2
Income from State Government	3.3
Other income	3.4

3.1 Patient charges

	2025 $'000	2024 $'000
Inpatient charges	14,634	12,781
Outpatient charges	28,876	27,169
Total patient charges	**43,510**	**39,950**

Revenue is recognised at the transaction price when PathWest transfers control of the services to customers.

Revenue is recognised at a point in time for inpatient and outpatient charges. The performance obligations for these inpatient and outpatient charges are satisfied when services have been provided.

3.2 Other fees for services

	2025 $'000	2024 $'000
Pathology services to other health organisations	17,303	15,707
Clinical services to other health organisations	15	4
Non clinical services to other health organisations	143	7
Total other fees for services	**17,461**	**15,718**

Revenue is recognised at the transaction price when PathWest transfers control of the services to customers.

Revenue is recognised at a point in time for clinical, non-clinical and pathology services to other health organisations. The performance obligations for these services are satisfied when services have been provided.

Notes to the financial statements for the year ended 30 June 2025

3.3 Income from State Government

	2025 $'000	2024 $'000
Service Agreement Grants:		
Department of Health	193,55	170,772
Department of Health (Commonwealth)	-	49
Total Service Agreement Grants	**193,558**	**170,821**
Income received from other public sector entities:		
Health and Non-Health Services agencies grants	15,177	14,497
Pathology services to other Health Services and other government agencies [(a)]	197,596	187,833
Total income received from other public sector entities	**212,773**	**202,330**
Products and Services received free of charge:		
Products received from Health Support Services (HSS)	-	56
Services received from Non-Health Support Services agencies	101	21
Services received from Health Support Services (HSS):		
Information, communication and technology (ICT) services	14,442	12,702
Supply chain services	1,762	1,750
Financial services	741	662
Human resource services	2,430	2,274
Total Products and Services received free of charge	**19,476**	**17,465**
Total income from State Government	**425,807**	**390,616**

(a) Represents pathology services billed to other Health Services (CAHS, SMHS, EMHS, NMHS and WACHS) and other government agencies (Department of Justice, WA Police and Insurance Commission of Western Australia).

Department of Health – Service Agreement Grants are recognised as income at fair value of consideration received in the period in which PathWest gains control of the appropriated funds. PathWest gains control of appropriated funds at the time those funds are deposited to the bank account or credited to the 'Amounts receivable for services' (holding account) held at Treasury.

Products and Services received free of charge or for nominal cost, that PathWest would otherwise purchase if not donated, are recognised as income at the fair value of the assets or services where they can be reliably measured. A corresponding expense is recognised for services received.

Grants from Health Services and Non-Health Services agencies are recognised as income when PathWest has satisfied its performance obligations under the funding agreement. If there is no performance obligation, income will be recognised when PathWest receives the funds.

Pathology services revenue is measured at the transaction price and is recognised at a point in time when PathWest provides pathology services.

Notes to the financial statements for the year ended 30 June 2025

3.4 Other income

	2025 $'000	2024 $'000
Clinical trials	855	857
Commercial pathology	1,032	355
Other	14	243
Total other income	**1,901**	**1,455**

Revenue is recognised at the transaction price when PathWest transfers control of the services to customers.

Revenue is recognised at a point in time for clinical trials, commercial and other pathology services. The performance obligations are satisfied when services have been provided.

Notes to the financial statements for the year ended 30 June 2025

NOTE 4. Key assets

Assets PathWest utilises for economic benefit or service potential

This section includes information regarding the key assets PathWest utilises to gain economic benefits or provide service potential. The section sets out both the key accounting policies and financial information about the performance of these assets:

	Notes
Plant and equipment	4.1
Intangibles	4.2
Right-of-use assets	4.3

Notes to the financial statements for the year ended 30 June 2025

4.1 Property, plant and equipment

Reconciliations of the carrying amounts of property, plant and equipment assets at the beginning and end of the reporting period are set out in the tables below.

	Carrying amount at start of the period $'000	Additions $'000	Transfers $'000	Disposals $'000	Revaluation increments/ (decrements) [a] $'000	Depreciation $'000	Carrying amount at the end of the period $'000
30 June 2025							
Buildings	90,009	-	3,907	-	9,926	(3,926)	99,916
Leasehold improvements	992	-	211	-	-	(219)	984
Computer equipment	447	-	-	-	-	(96)	351
Furniture and fittings	65	5	-	-	-	(10)	60
Medical equipment	19,862	5,410	-	(64)	-	(5,397)	19,811
Other plant and equipment	776	233	-	(2)	-	(160)	847
Works in progress	1,377	5,365	(4,118)	-	-	-	2,624
Total	**113,528**	**11,013**	**-**	**(66)**	**9,926**	**(9,808)**	**124,593**

(a) Of this amount, $6,045 million relates to professional and project management fees, which are now included in the value of current use building assets under the current replacement cost basis as required by the prospective application of AASB 2022-10 Amendments to Australian Accounting Standards – Fair Value Measurement of Non-Financial Assets of Not-For-Profit Public Sector Entities.

Notes to the financial statements for the year ended 30 June 2025

4.1 Property, plant and equipment (continued)

Initial recognition

Items of property, plant and equipment, costing $5,000 or more are measured initially at cost. Where an asset is acquired for no cost or significantly less than fair value, the cost is valued at its fair value at the date of acquisition. Items of property, plant and equipment costing less than $5,000 are immediately expensed direct to the Statement of Comprehensive Income (other than where they form part of a group of similar items which are significant in total). The cost of a leasehold improvement is capitalised and depreciated over the shorter of the remaining term of the lease or the estimated useful life of the leasehold improvement.

Subsequent measurement

Subsequent to initial recognition as an asset, the revaluation model is used for the measurement of buildings and historical cost for all other property, plant and equipment. Buildings are carried at fair value less accumulated depreciation and accumulated impairment loss. All other items of property, plant and equipment are stated at historical cost less accumulated depreciation and accumulated impairment losses.

Buildings are independently valued annually by the Western Australian Land Information Authority (Landgate). The effective date was at 1 July 2024, with valuations performed during the year ended 30 June 2025 and recognised at 30 June 2025.

In addition, for buildings under the current replacement cost basis, estimated professional and project management fees are included in the valuation of current use assets as required by AASB 2022-10 Amendment to Australian Accounting Standards – Fair Value Measurement of Non-Financial Assets of Not-For-Profit Public Sector Entities.

These valuations are undertaken annually to ensure that the carrying amount of the assets does not differ materially from their fair value at the end of the reporting period.

Valuation techniques and inputs

Level 3 assets

Building assets

Fair value for current use buildings is determined by reference to the cost of replacing the remaining future economic benefits embodied in the asset. Current replacement cost is generally determined by reference to the market observable replacement cost of a substitute asset of comparable utility and the gross project size specifications, adjusted for obsolescence. Obsolescence encompasses physical deterioration, functional (technological) obsolescence and economic (external) obsolescence.

Valuation using current replacement cost utilises the significant Level 3 input of obsolescence estimated by Landgate. The fair value measurement is sensitive to the estimate of obsolescence, with higher values of the estimate correlating with lower estimated fair values of buildings.

In addition, professional and project management fees estimated and added to the current replacement costs provided by Landgate for current use buildings represent significant Level 3 inputs used in the valuation process. The fair value of these assets will increase with a higher level of professional and project management fees.

Basis of Valuation

In the absence of market-based evidence, due to the specialised nature of PathWest's building assets, these assets are valued at Level 3 of the fair value hierarchy on a current use basis (presumed to be the highest and best use), which recognises that restrictions or limitations have been placed on their use and disposal when they are not determined to be surplus to requirements.

These restrictions are imposed by virtue of the assets being held to deliver a specific community service.

Notes to the financial statements for the year ended 30 June 2025

4.1 Property, plant and equipment (continued)

Significant assumptions and judgements:

A number of buildings that are located on the land of local government agencies have been recognised in the financial statements. PathWest believes that, based on past experience, its occupancy in these buildings will continue to the end of their useful life.

Depreciation charge for the period	2025 $'000	2024 $'000
Depreciation		
Buildings	3,926	3,347
Leasehold improvements	219	213
Computer equipment	96	95
Furniture and fittings	10	9
Medical equipment	5,397	5,024
Other plant and equipment	160	168
Total depreciation for the period	**9,808**	**8,856**

Useful lives

All property, plant and equipment having a limited useful life are systematically depreciated over their estimated useful lives in a manner that reflects the consumption of their future economic benefits.

Depreciation is generally calculated on a straight line basis, at rates that allocate the asset's value, less any estimated residual value, over its estimated useful life. Estimated useful lives for the different asset classes are included in the table below:

Asset	Useful Life
Buildings	50 years
Leasehold improvements	Term of lease
Computer equipment	4 to 10 years
Furniture and fittings	5 to 20 years
Medical equipment	3 to 25 years
Other plant and equipment	3 to 25 years

The estimated useful lives, residual values and depreciation method are reviewed at the end of each annual reporting period, and adjustments should be made where appropriate.

Impairment

Non-financial assets, including items of plant and equipment, are tested for impairment whenever there is an indication that the asset may be impaired. Where there is an indication of impairment, the recoverable amount is estimated. Where the recoverable amount is less than the carrying amount, the asset is considered impaired and is written down to the recoverable amount and the impairment loss is recognised.

Impairment (continued)

Where an asset measured at cost is written down to its recoverable amount, an impairment loss is recognised through profit or loss. Where a previously revalued asset is written down to recoverable amount, the loss is recognised as a revaluation decrement through other comprehensive income to the extent that the impairment loss does not exceed the amount in the revaluation surplus for the class of asset.

As PathWest is a not-for-profit entity, the recoverable amount of regularly revalued specialised assets is anticipated to be materially the same as fair value.

If there is an indication that there has been a reversal in impairment, the carrying amount shall be increased to its recoverable amount. However, this reversal should not increase the asset's carrying amount above what would have been determined, net of depreciation or amortisation, if no impairment loss had been recognised in prior years.

The risk of impairment is generally limited to circumstances where an asset's depreciation is materially understated, where the replacement cost is falling, or where there is significant change in useful life. Each relevant class of asset is reviewed annually to verify that the accumulated depreciation/amortisation reflects the level of consumption or expiration of the asset's future economic benefits and to evaluate any impairment risk from declining replacement costs.

As at 30 June 2025 there were no indications of impairment to property, plant and equipment.

4.2 Intangible assets

	2025 $'000	2024 $'000
Computer software		
At cost	49,567	49,567
Accumulated amortisation	(21,497)	(16,540)
	28,070	**33,027**
Work in Progress		
Computer software under development (at cost)	-	-
	28,070	**33,027**
Reconciliations:		
Computer software		
Carrying amount at start of period	33,027	30,098
Additions	-	7,570
Amortisation (Note 4.2.1)	(4,957)	(4,641)
Carrying amount at end of period	**28,070**	**33,027**
Work in progress		
Carrying amount at start of period	-	6,569
Additions	-	-
Transfers between asset classes	-	(6,569)
Carrying amount at end of period	**-**	**-**

Initial recognition

Intangible assets are initially recognised at cost. For assets acquired at no significantly less than fair value, the cost is their fair value at the date of acquisition. Acquired and internally generated intangible assets costing $5,000 or more that comply with the recognition criteria of AASB 138 Intangible Assets are capitalised. Costs incurred below these thresholds are immediately expensed directly to the Statement of Comprehensive Income.

4.2 Intangible assets (continued)

An internally generated intangible asset arising from development (or from the development phase of an internal project) is recognised if, and only if, all of the following are demonstrated:

- The technical feasibility of completing the intangible asset so that it will be available for use or sale;
- An intention to complete the intangible asset and use or sell it;
- The ability to use or sell the intangible asset;
- The intangible asset will generate probable future economic benefit;
- The availability of adequate technical, financial and other resources to complete the development and to use or sell the intangible asset; and
- The ability to measure reliably the expenditure attributable to the intangible asset during its development.

Costs incurred in the research phase of a project are immediately expensed.

Software that is an integral part of the related hardware is recognised as property, plant and equipment. Software that is not an integral part of the related hardware is recognised as an intangible asset.

Subsequent measurement

The cost model is applied for subsequent measurement requiring the asset to be carried at cost less any accumulated amortisation and accumulated impairment losses.

4.2.1 Amortisation and impairment

Charge for the period	2025 $'000	2024 $'000
Amortisation		
Computer software	4,957	4,641
Total amortisation for the period	**4,957**	**4,641**

Amortisation of finite life intangible assets is calculated on a straight-line basis at rates that allocate the asset's value over its estimated useful life. All intangible assets controlled by PathWest have a finite useful life and zero residual value. Estimated useful lives are reviewed annually.

The estimated useful lives for each class of intangible asset are:

Software 10 Years

PathWest held no goodwill or intangible assets with an indefinite useful life during the reporting period. At the end of the reporting period there were no intangible assets not yet available for use.

Impairment of intangible assets

The policy in connection with testing for impairment is outlined in note 4.1. As at 30 June 2025 there were no indications of impairment to intangible assets.

Notes to the financial statements for the year ended 30 June 2025

4.3 Right-of-use assets

	Buildings $'000	Vehicles $'000	Medical equipment $'000	Total $'000
Carrying amount at beginning of period	6,764	427	1,173	8,364
Additions	6,028	426	305	6,759
Depreciation	(2,680)	(251)	(534)	(3,465)
Net Carrying amount as at end of period	**10,112**	**602**	**944**	**11,658**

PathWest has leases for buildings, motor vehicles and medical equipment. The lease contracts are typically made for fixed periods of 1-10 years. The corresponding lease liabilities in relation to these right-of-use assets have been disclosed in note 6.1.

Initial recognition

Right-of-use assets are measured at cost including the following:

- the amount of the initial measurement of lease liability;
- any lease payments made at or before the commencement date less any lease incentives received;
- any initial direct costs; and
- restoration costs, including dismantling and removing the underlying asset.

PathWest has elected not to recognise right-of-use assets and lease liabilities for short-term leases (with a lease term of 12 months or less) and low value leases (with an underlying value of $5,000 or less). Lease payments associated with these leases are expensed on a straight-line basis over the lease term.

Subsequent Measurement

The cost model is applied for subsequent measurement of right-of-use assets, requiring the asset to be carried at cost less any accumulated depreciation and accumulated impairment losses and adjusted for any re-measurement of lease liability.

Depreciation and impairment of right-of-use assets

Right-of-use assets are depreciated on a straight-line basis over the shorter of the lease term and the estimated useful lives of the underlying assets.

If ownership of the leased asset transfers to PathWest at the end of the lease term or the cost reflects the exercise of a purchase option, depreciation is calculated using the estimated useful life of the asset.

Right-of-use assets are tested for impairment when an indication of impairment is identified. The policy in connection with testing for impairment is outlined in note 4.1.

Notes to the financial statements for the year ended 30 June 2025

NOTE 5. Other assets and liabilities

This section sets out those assets and liabilities that arose from PathWest's controlled operations and includes other assets utilised for economic benefits and liabilities incurred during normal operations:

	Notes
Receivables	5.1
Amounts receivable for services	5.2
Other assets	5.3
Inventories	5.4
Payables	5.5
Other liabilities	5.6

5.1 Receivables

	2025 $'000	2024 $'000
Current		
Patient fee debtors	15,055	15,116
Other receivables	2,251	4,259
Less: Allowance for impairment of trade receivables	(1,693)	(2,280)
Accrued revenue	16,307	16,802
GST receivables	545	399
Total current receivables	**32,465**	**34,296**
Non-current		
Accrued salaries account [(a)]	10,848	9,038
Total non-current receivables	**10,848**	**9,038**
Total receivables at end of the period	**43,313**	**43,334**

(a) Funds transferred to Treasury for the purpose of meeting the 27th pay in a reporting period that occurs every 11th year. This account is classified as non-current except for the year before the 27th pay year.

Trade receivables are recognised and carried at original invoice amount less any allowance for uncollectible amounts (i.e. impairment). The carrying amount is equivalent to fair value as it is due for settlement within 30 days.

PathWest recognises a loss allowance for expected credit losses (ECLs) on a receivable not held at fair value through profit or loss. The ECLs based on the difference between the contractual cash flows and the cash flows that the entity expects to receive, discounted at the original effective interest rate. Individual receivables are written off when PathWest has no reasonable expectations of recovering the contractual cash flows.

For trade receivables, PathWest recognises an allowance for ECLs measured at the lifetime expected credit losses at each reporting date. PathWest has established a provision matrix that is based on its historical credit loss experience, adjusted for forward-looking factors specific to the debtors and the economic environment.

Notes to the financial statements for the year ended 30 June 2025

5.1 Receivables (continued)

The accrued salaries account consists of amounts paid annually, from PathWest appropriations for salaries expense, into the Treasurer's special purpose account. It is restricted to meet the additional cash outflow for employee salary payments in reporting periods with 27 pay days instead of the normal 26. No interest is received on this account.

5.2 Amounts receivable for services (Holding Account)

	2025 $'000	2024 $'000
Non-current	163,725	147,569
Balance at end of period	**163,725**	**147,569**

Amounts receivable for services represents the non-cash component of service appropriations. It is restricted in that it can only be used for asset replacement or payment of leave liability.

Amounts receivable for services are not considered to be impaired (i.e. there is no expected credit loss of the Holding Account).

Amounts receivable for services are classified as non-current assets as there is no plan to draw down on the funds for at least 12 months after the end of the reporting period.

5.3 Other assets

	2025 $'000	2024 $'000
Current		
Non-current	2,584	1,659
Balance at end of period	**2,584**	**1,659**

Other assets include prepayments which represent payments in advance of receipt of goods or services or that part of expenditure made in one accounting period covering a term extending beyond that period.

5.4 Inventories

	2025 $'000	2024 $'000
Current		
Pharmaceutical stores - at cost	2,139	2,517
Engineering stores - at cost	332	338
Balance at end of period	**2,471**	**2,855**

Inventories are measured at the lower of cost and net realisable value. Costs are assigned by the method most appropriate to each particular class of inventory.

Notes to the financial statements for the year ended 30 June 2025

5.5 Payables

	2025 $'000	2024 $'000
Current		
Trade payables	3,544	3,158
Other payables	24	22
Accrued expenses	9,154	8,794
Accrued salaries	12,513	10,836
Balance at end of period	**25,235**	**22,810**

Payables are recognised at the amounts payable when PathWest becomes obliged to make future payments as a result of a purchase of assets or services. The carrying amount is equivalent to fair value as settlement is generally within 30 days.

Accrued salaries represent the amount due to staff but unpaid at the end of the reporting period. Accrued salaries are settled within a fortnight after the reporting period end. PathWest considers the carrying amount of accrued salaries to be equivalent to its fair value.

5.6 Other liabilities

	2025 $'000	2024 $'000
Current		
Paid parental leave scheme	16	7
Capital grant liabilities*	-	6,590
Other	30	34
Balance at end of period	**46**	**6,631**

* PathWest recognises capital grant liabilities for the excess of the initial carrying amount of financial assets received in a transfer to enable the entity to acquire or construct recognisable non-financial assets that are to be controlled by the entity. When (or as) the obligations of the capital grant liabilities are satisfied under the transfer, PathWest recognises income in profit or loss.

Notes to the financial statements for the year ended 30 June 2025

NOTE 6. Financing

This section sets out the material balances and disclosures associated with the financing and cash flows of PathWest.

	Notes
Lease liabilities	6.1
Finance costs	6.2
Cash and cash equivalents	6.3
Capital commitments	6.4

6.1 Lease liabilities

The Statement of Financial Position shows the following amounts relating to lease liabilities:

	2025 $'000	2024 $'000
Not later than one year	3,183	2,515
Later than one year and not later than five years	6,873	5,884
Later than five years	1,976	274
	12,032	**8,673**
Current	3,183	2,515
Non-current	8,849	6,158
	12,032	**8,673**

	2025 $'000	2024 $'000
Lease expenses recognised in the Statement of Comprehensive Income		
Lease interest expense	402	310
Expenses relating to variable lease payments not included in lease liabilities	492	573
Short-term leases	523	416
Total lease expense	**1,417**	**1,299**

Short-term leases with a lease term of 12 months or less are recognised on a straight-line basis unless the lessor is an agency within the Western Australian public sector.

Low-value leases with an underlying value of $5,000 or less are recognised on a straight-line basis.

Variable lease payments that are not included in the measurement of the lease liability are recognised in the period in which the event or condition that triggers those payments occurs.

6.1 Lease liabilities (continued)

Initial measurement

At the commencement date of the lease, PathWest measures a lease liability at the present value of the lease payments to be made over the lease term. The lease payments are discounted using the interest rate implicit in the lease. If that rate cannot be readily determined, PathWest uses the incremental borrowing rate provided by Western Australia Treasury Corporation.

Lease payments included by PathWest as part of the present value calculation of lease liability include:

- Fixed payments (including in-substance fixed payments), less any lease incentives receivable;
- Variable lease payments that depend on an index or a rate initially measured using the index or rate as at the commencement date;
- Amounts expected to be payable by the lessee under residual value guarantees;
- The exercise price of purchase options (where these are reasonably certain to be exercised);
- Payments for penalties for terminating a lease, where the lease term reflects PathWest exercising an option to terminate the lease; and
- Periods covered by extension or termination options are only included in the lease term by PathWest if the lease is reasonably certain to be extended (or not terminated).

The interest on the lease liability is recognised in profit or loss over the lease term so as to produce a constant periodic rate of interest on the remaining balance of the liability for each period. Lease liabilities do not include any future changes in variable lease payments (that depend on an index or rate) until they take effect, in which case the lease liability is reassessed and adjusted against the right-of-use asset.

Variable lease payments, not included in the measurement of lease liability, that are dependent on sales, an index or a rate are recognised by PathWest in profit or loss in the period in which the condition that triggers those payments occurs.

Subsequent measurement

Lease liabilities are measured by increasing the carrying amount to reflect interest on the lease liabilities; reducing the carrying amount to reflect the lease payments made; and remeasuring the carrying amount at amortised cost, subject to adjustments to reflect any reassessment or lease modifications.

This section should be read in conjunction with Note 4.3 Right-of-use assets.

6.2 Finance costs

	2025 $'000	2024 $'000
Lease interest expense	402	310
Total finance costs expensed	**402**	**310**

Finance costs includes the interest component of lease liability repayments.

Notes to the financial statements for the year ended 30 June 2025

6.3 Cash and cash equivalents

	2025 $'000	2024 $'000
Current		
Cash and cash equivalents	11,236	15,248
Restricted cash and cash equivalents - assets held for other specific purposes [(a)]	15,641	18,486
Balance at end of period	**26,877**	**33,734**

(a) Funds held for specific purposes including capital works.

For the purpose of the Statement of Cash Flows, cash and cash equivalents (and restricted cash and cash equivalents) assets comprise cash on hand and short-term deposits with original maturities of three months or less that are readily convertible to a known amount of cash, and which are subject to insignificant risk of changes in value.

6.4 Capital Commitments

Capital commitments, being contracted capital expenditure additional to the amounts reported in the financial statements, are payable as follows:

	2025 $'000	2024 $'000
Within 1 year	5,779	4,591
Later than 1 year and not later than 5 years	138	511
Total capital expenditure commitments	**5,917**	**5,102**

The total value or quantum presented for capital commitments are GST inclusive.

NOTE 7. Financial instruments and contingencies

This section sets out the key risk management policies and measurements techniques of PathWest.

	Notes
Financial instruments	7.1
Contingent liabilities	7.2.1
Contingent assets	7.2.2

Notes to the financial statements for the year ended 30 June 2025

7.1 Financial instruments

The carrying amounts of each of the following categories of financial assets and financial liabilities at the end of the reporting period are as follows:

	2025 $'000	2024 $'000
Financial Assets		
Cash and cash equivalents	26,877	33,734
Financial assets at amortised cost [(a)]	206,493	190,504
Total financial assets	**233,370**	**224,238**
Financial Liabilities		
Financial liabilities at amortised cost	37,267	31,483
Total financial liabilities	**37,267**	**31,483**

(a) The amount of financial assets at amortised cost excludes GST recoverable from the ATO (statutory receivable).

7.2 Contingent assets and liabilities

Contingent assets and contingent liabilities are not recognised in the Statement of Financial Position but are disclosed and, if quantifiable, are measured at the best estimate.

Contingent assets and liabilities are presented inclusive of GST receivable or payable respectively.

7.2.1 Contingent liabilities

The following contingent liabilities are additional to the liabilities included in the financial statements:

Litigation in progress

No claim has been filed against PathWest.

Contaminated sites

Under the Contaminated Sites Act 2003, PathWest is required to report known and suspected contaminated sites to the Department of Water and Environmental Regulation (DWER). In accordance with the Act, DWER classifies these sites on the basis of the risk to human health, the environment and environmental values. Where sites are classified as contaminated – *remediation required or possibly contaminated* – investigation required, PathWest may have a liability in respect of investigation or remediation expenses.

At the reporting date, PathWest does not have any suspected contaminated sites reported under the Act.

7.2.2 Contingent assets

At the reporting date, PathWest does not have any contingent assets.

Notes to the financial statements for the year ended 30 June 2025

NOTE 8. Other disclosures

This section includes additional material disclosures required by accounting standards or other pronouncements for the understanding of this financial report.

	Notes
Events occurring after the end of the reporting period	8.1
Changes in accounting policy	8.2
Key management personnel	8.3
Related party transactions	8.4
Related bodies	8.5
Affiliated bodies	8.6
Remuneration of auditors	8.7
Supplementary financial information	8.8

8.1 Events occurring after the end of the reporting period

To the best of its knowledge, PathWest is not aware of any material events relating to the reporting period.

8.2 Changes in accounting policy

The following standard is operative for reporting periods ended on or after 30 June 2025 and has a material impact on PathWest:

- AASB 2022-10 - Amendments to Australian Accounting Standards – Fair Value Measurement of Non-Financial Assets of Not-for-Profit Public Sector Entities

  As per AASB 2022-10, all 'once only' costs should be included in the valuation of buildings Consequently, an amount of $6.045 million has been added to the building valuation provided by Landgate. This adjustment is based on a percentage of the total construction cost of a reference asset calculated in accordance with the Treasury Guidance Handbook.

8.3 Key management personnel

PathWest has determined that key management personnel include cabinet ministers, board members and senior officers of PathWest. However, PathWest is not obligated to compensate Ministers and therefore disclosures in relation to Ministers' compensation may be found in the *Annual Report on State Finances*.

Total compensation (total fees, salaries, superannuation, non-monetary and other benefits) for members of the accountable authority of PathWest for the reporting period are presented within the following bands:

Compensation band ($)	2025	2024
$0 - $10,000	-	-
$10,001 - $20,000	-	-
$20,001 - $30,000	-	-
$30,001 - $40,000	1	1
$40,001 - $50,000	8	8
$50,001 - $60,000	-	-
$80,001 - $90,000	1	1
	10	**10**

Notes to the financial statements for the year ended 30 June 2025

8.3 Key management personnel (continued)

Total compensation (total fees, salaries, superannuation, non-monetary and other benefits) for senior officers of PathWest for the reporting period are presented within the following bands:

Compensation band ($)	2025	2024
$1 - $50,000	-	-
$50,001 - $100,000	-	-
$100,001 - $150,000	-	-
$150,001 - $200,000	-	2
$200,001 - $250,000	3	4
$250,001 - $300,000	2	2
$400,001 - $450,000	-	-
$500,001 - $550,000	1	-
$550,001 - $600,000	1	-
	7	8

	$'000	$'000
Total compensation of senior officers and board members	**2,818**	**2,352**

8.4 Related party transactions

PathWest is a wholly owned public sector entity that is controlled by the State of Western Australia. Related parties of PathWest include:

- all cabinet ministers and their close family members, and their controlled or jointly controlled entities;
- senior officers and their close family members, and their controlled or jointly controlled entities;
- other agencies and statutory authorities, including related bodies, that are included in the whole of government consolidated financial statements (i.e. wholly-owned public sector entities);
- associates and joint ventures of a wholly-owned public sector entity; and
- the Government Employees Superannuation Board (GESB).

Material transactions with related parties

Outside of normal citizen type transactions with PathWest, there were no other related party transactions that involved key management personnel and/or their close family members and/or their controlled (or jointly controlled) entities.

Significant transactions with government related entities

Significant transactions include:

- Service Agreement Grants (note 3.3)
- Income received from other public sector entities (note 3.3)
- Products and Services received free of charge (note 3.3)
- Superannuation payments to GESB (note 2.1.1)

Notes to the financial statements for the year ended 30 June 2025

8.5 Related Bodies

PathWest did not have any related bodies during the financial year.

8.6 Affiliated Bodies

PathWest did not have any affiliated bodies during the financial year.

8.7 Remuneration of auditors

Remuneration paid or payable to the Auditor General in respect of the audit for the current financial year is as follows:

	2025 $'000	2024 $'000
Auditing the accounts, financial statements, controls and key performance indicators	264	242

8.8 Supplementary financial information

Write-offs

	2025 $'000	2024 $'000
Revenue and debts written off under the authority of the Accountable Authority	587	345
	587	**345**

Notes to the financial statements for the year ended 30 June 2025

NOTE 9. Explanatory statement

This section explains variations in the financial performance of PathWest.

	Notes
Explanatory statement for controlled operations	9.1

9.1 Explanatory statement for controlled operations

This explanatory section explains variations in the financial performance of PathWest undertaking transactions under its own control, as represented by the primary financial statements.

All variances between annual estimates (original budget) and actual results for 2025, and between the actual results for 2025 and 2024 are shown below. Narratives are provided for key major variances which vary more than 10% from their comparative and that the variation is more than 1% of:

1. Estimate and actual results for the current year:
   - Total Cost of Services of the annual estimates for the Statement of comprehensive income and Statement of cash flows (1% of $4.428 million); and
   - Total Assets of the annual estimates for the Statement of financial position (1% of $3.957 million).
2. Actual results between the current year and the previous year:
   - Total Cost of Services of the previous year for the Statements of comprehensive income and Statement of cash flows (1% of $4.537 million); and
   - Total Assets of the previous year for the Statement of financial position (1% of $3.841 million).

Notes to the financial statements for the year ended 30 June 2025

9.1.1 Statement of Comprehensive Income Variances

	Variance Note	Estimate 2025 $'000	Actual 2025 $'000	Actual 2024 $'000	Variance between actual and estimate $'000	Variance between actual results for 2024 and 2025 $'000
COST OF SERVICES						
Expenses						
Employee benefits expense		297,266	314,052	287,582	16,786	26,470
Contracts for services			-	-	-	-
Domestic contracts		1,985	2,405	2,220	420	185
Depreciation and amortisation expense		16,155	18,230	16,356	2,075	1,874
Finance costs		219	402	310	183	92
Loss on disposal of non-current assets			-	29	-	(29)
Repairs, maintenance and minor equipment		11,740	14,073	15,860	2,333	(1,787)
Supplies and services	1	93,362	114,341	106,302	20,979	8,039
Other expenses	2	22,122	27,068	25,011	4,946	2,057
Total cost of services		**442,849**	**490,571**	**453,670**	**47,722**	**36,901**
Income						
Patient charges	3	35,327	43,510	39,950	8,183	3,560
Other fees for services		19,387	17,461	15,718	(1,926)	1,743
Gain on disposal of non-current assets			73	-	73	73
Other income		3,032	1,901	1,455	(1,131)	446
Total revenue		**57,746**	**62,945**	**57,123**	**5,199**	**5,822**
Total income other than income from State Government		**57,746**	**62,945**	**57,123**	**5,199**	**5,822**
NET COST OF SERVICES		**385,103**	**427,626**	**396,547**	**42,523**	**31,079**
Income from State Government						
Service Agreement Grants	a	182,794	193,558	170,821	10,764	22,737
Income from other public sector entities	4	184,390	212,773	202,330	28,383	10,443
Products and Services received free of charge		17,919	19,476	17,465	1,557	2,011
Royalties for Regions Fund			-	-	-	-
Total income from State Government		**385,103**	**425,807**	**390,616**	**40,704**	**35,191**
SURPLUS / (DEFICIT) FOR THE PERIOD		**0**	**(1,819)**	**(5,931)**	**(1,819)**	**4,112**
OTHER COMPREHENSIVE INCOME						
Items not reclassified subsequently to profit or loss						
Changes in asset revaluation surplus			9,926	5,733	9,926	4,193
Total other comprehensive income		**-**	**9,926**	**5,733**	**9,926**	**4,193**
TOTAL COMPREHENSIVE INCOME / (LOSS) FOR THE PERIOD		**0**	**8,107**	**(198)**	**8,107**	**8,305**

9.1.1 Statement of Comprehensive Income Variances (continued)

Major estimate and actual (2025) variance narratives:

1. Supplies and Services was higher than estimate due to increased use of pathology materials associated with activity driven growth and the impact of indexation increases on contracted prices for materials and freight.
2. Other Expenses was higher than estimate mainly due to increased use of IT services and higher insurance premiums.
3. Patient charges was higher than estimate due to increased private outpatient activity and increased referrals from other laboratories.
4. Income from Other Public Sector Entities was higher than estimate due to public hospital activity driven growth.

Major actual (2025) and comparative (2024) variance narratives:

(a) The increase in Service Agreement Grants is mainly due to funding provided to offset wage increases.

Notes to the financial statements for the year ended 30 June 2025

9.1.2 Statement of Financial Position Variances

	Variance Note	Estimate 2025 $'000	Actual 2025 $'000	Actual 2024 $'000	Variance between actual and estimate $'000	Variance between actual results for 2024 and 2025 $'000
ASSETS						
Current Assets						
Cash and cash equivalents	b	13,648	11,236	15,248	(2,412)	(4,012)
Restricted cash and cash equivalents		18,486	15,641	18,486	(2,845)	(2,845)
Receivables		34,296	32,465	34,296	(1,831)	(1,831)
Inventories		2,855	2,471	2,855	(384)	(384)
Other current assets		1,659	2,584	1,659	925	925
Total Current Assets		**70,944**	**64,397**	**72,544**	**(6,547)**	**(8,147)**
Non-Current Assets						
Restricted cash and cash equivalents		-		-	-	-
Receivables		10,638	10,848	9,038	210	1,810
Amounts receivable for services	c	163,724	163,725	147,569	1	16,156
Property, plant and equipment		116,002	124,593	113,528	8,591	11,065
Intangible assets	d	28,291	28,070	33,027	(221)	(4,957)
Right-of-use assets	5	6,098	11,658	8,364	5,560	3,294
Total Non-Current Assets		**324,753**	**338,894**	**311,526**	**14,141**	**27,368**
TOTAL ASSETS		**395,697**	**403,291**	**384,070**	**7,594**	**19,221**
LIABILITIES						
Current Liabilities						
Payables		22,810	25,235	22,810	2,425	2,425
Lease liabilities		2,515	3,183	2,515	668	668
Employee related provisions		59,860	62,739	59,860	2,879	2,879
Other current liabilities	6, e	6,631	46	6,631	(6,585)	(6,585)
Total Current Liabilities		**91,816**	**91,203**	**91,816**	**(613)**	**(613)**
Non-Current Liabilities						
Lease liabilities		6,158	8,849	6,158	2,691	2,691
Employee related provisions		14,823	14,602	14,823	(221)	(221)
Total Non-Current Liabilities		**20,981**	**23,451**	**20,981**	**2,470**	**2,470**
TOTAL LIABILITIES		**112,797**	**114,654**	**112,797**	**1,857**	**1,857**
NET ASSETS		**282,900**	**288,637**	**271,273**	**5,737**	**17,364**
EQUITY						
Contributed equity		238,516	236,146	226,889	(2,370)	9,257
Reserves	7, f	23,787	33,713	23,787	9,926	9,926
Accumulated surplus		20,597	18,778	20,597	(1,819)	(1,819)
TOTAL EQUITY		**282,900**	**288,637**	**271,273**	**5,737**	**17,364**

9.1.2 Statement of Financial Position Variances (continued)

Major estimate and actual (2025) variance narratives:

5. The Right-of-Use Assets balance is higher than estimated due to a significant number of lease extensions and new lease agreements entered into during 2025.
6. Other Current Liabilities is lower than estimate due to Commonwealth funds previously recognised as Income in Advance in 2024 now recognised as revenue in 2025 because of performance obligations being met.
7. Reserves are higher than estimate due to an increment relating to the annual revaluation of buildings.

Major actual (2025) and comparative (2024) variance narratives:

(b) The decrease is primarily driven by the payment of large payables accrued in FY 2024, which were not repeated in FY 2025. No similar accruals were recorded at the end of FY 2025, contributing to the year-on-year difference.

(c) The increase in Amounts Receivable for Services is due to the increase in Non-Cash Accrual Appropriation in relation to fixed assets depreciation.

(d) The decrease in Intangible Assets reflects the amortisation of the Laboratory Information System.

(e) The decrease in Other Current Liabilities is due to Commonwealth funds previously recognised as Income in Advance in 2024 now recognised as revenue in 2025 because of performance obligations being met.

(f) The increase in Reserves is due to an increment relating to the annual revaluation of buildings.

Notes to the financial statements for the year ended 30 June 2025

9.1.3 Statement of Cash Flow Variances

	Variance Note	Estimate 2025 $'000	Actual 2025 $'000	Actual 2024 $'000	Variance between actual and estimate $'000	Variance between actual results for 2024 and 2025 $'000
CASH FLOWS FROM STATE GOVERNMENT						
Department of Health - Service Agreement Grants	g	166,639	177,402	154,870	10,763	22,532
Capital appropriations	h	11,627	9,257	14,547	(2,370)	(5,290)
Commonwealth grants and contributions		-	-	-	-	-
Funds from other public sector entities	8	184,390	206,284	205,316	21,894	968
Royalties for Regions Fund		-	-	-	-	-
Net cash provided by State Government		**362,656**	**392,943**	**374,733**	**30,287**	**18,210**
CASH FLOWS FROM OPERATING ACTIVITIES						
Payments						
Employees benefits		(298,866)	(311,527)	(283,268)	(12,661)	(28,259)
Supplies and services	9	(112,312)	(138,455)	(129,354)	(26,143)	(9,101)
Finance costs		(219)	(402)	(310)	(183)	(92)
Receipts			-	-		
Receipts from customers	10, i	38,827	43,479	37,917	4,652	5,562
Donations received		-	-	-	-	-
Interest received		-	-	-	-	-
Other receipts		22,418	21,379	18,546	(1,039)	2,833
Net cash used in operating activities		**(350,152)**	**(385,526)**	**(356,469)**	**(35,374)**	**(29,057)**
CASH FLOWS FROM INVESTING ACTIVITIES						
Payments						
Purchase of non-current assets		(11,627)	(11,013)	(11,696)	614	683
Receipts						
Proceeds from sale of non-current assets		-	139	1	139	138
Net cash used in investing activities		**(11,627)**	**(10,874)**	**(11,695)**	**753**	**821**
CASH FLOWS FROM FINANCING ACTIVITIES						
Payments						
Principal elements of lease payments		(2,477)	(3,400)	(2,796)	(923)	(604)
Net cash used in financing activities		**(2,477)**	**(3,400)**	**(2,796)**	**(923)**	**(604)**
Net increase/(decrease) in cash and cash equivalents		(1,600)	(6,857)	3,773	(5,257)	(10,630)
Cash and cash equivalents at the beginning of the period		33,734	33,734	37,278	-	(3,544)
Adjustment for the reclassification of accrued salaries account		-	-	(7,317)	-	7,317
CASH AND CASH EQUIVALENTS AT THE END OF THE PERIOD		**32,134**	**26,877**	**33,734**	**(5,257)**	**(6,857)**

Notes to the financial statements for the year ended 30 June 2025

9.1.3 Statement of Cash Flows Variances (continued)

Major estimate and actual (2025) variance narratives:

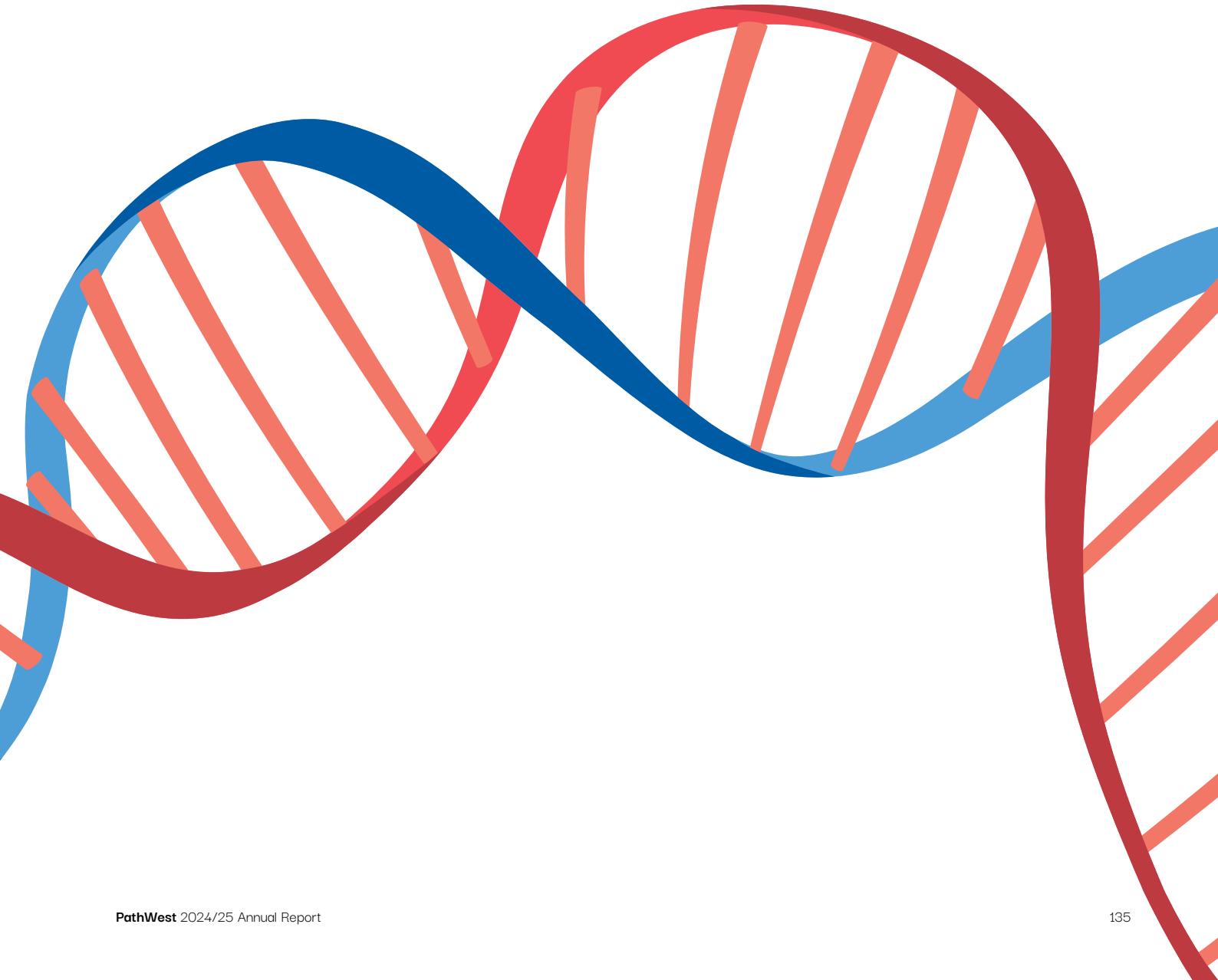
8. Funds from Other Public Sector Entities was higher than estimate due to public hospital activity driven growth.
9. Supplies and Services was higher than estimate due to increased use of pathology materials associated with activity driven growth and the impact of indexation increases on contracted prices for materials and freight.
10. Receipts from Customers was higher than estimate due to increased private outpatient activity and increased referrals from other laboratories.

Major actual (2025) and comparative (2024) variance narratives:

(g) The increase in Department of Health - Service Agreement Grants is mainly due to funding provided to offset wage increases.

(h) The decrease in Capital Appropriations reflects the final receipt of funds in 2024 for the State Mortuary Expansion project.

(i) The increase in Receipts from Customers is mainly due to increased private outpatient activity and increased referrals from other laboratories.



Ministerial directives

Treasurer's Instruction 8(3) *Financial Accounting and Reporting* requires Health Service Providers to disclose 'any written ministerial directions relevant to the setting of desired outcomes or operational objectives, the achievement of desired outcomes or operational objectives, investment activities, and financing activities.'

PathWest did not receive any Ministerial Directives in 2024/25.

Employment profile

See page 55.

Recruitment and selection breach

During the period 2024/25 there were three breaches of employment standard claims lodged regarding PathWest recruitment, selection, and appointment processes. All claims were resolved successfully internally and did not result in a breach of standard.

Substantive equality

PathWest's Multicultural Plan 2021 - 2025 outlines the strategies and actions undertaken by PathWest to enhance workforce diversity and cultural competence, eliminate systemic discrimination, and ensure that its health services are welcoming, inclusive, and equitable for all. PathWest is currently developing the PathWest Multicultural Plan 2025 – 2029.

The Public Sector Commission (PSC) identifies diversity groups as Aboriginal People, Culturally and Linguistically Diverse (CaLD) people, people of diverse sexualities and genders, people with disabilities and women in management and youth.

Key PathWest achievements in 2024/25 included:

- Appointment of an Aboriginal Family Liaison Officer to work within the State Mortuary to support Aboriginal families, friends and the community at the earliest opportunity and throughout their journey, providing culturally sensitive bereavement support and focused advice.
- Equity, Diversity, and Inclusion (EDI) eLearning.
- WA Health Aboriginal Cultural eLearning (ACeL).
- Aboriginal Cadetship Program with placements in various PathWest departments.
- Aboriginal Graduate Program to support recent graduates to gain experience in different PathWest departments with a view to permanent employment.
- All PathWest job advertisements being listed pursuant to Section 51 *Equal Opportunity Act 1984.*
- Celebrations of significant events in the Aboriginal calendar, including National Sorry Day, Reconciliation Week, and NAIDOC Week.
- Participation in review of WA Health Equal Opportunity Discrimination and Harassment Policy.
- PathWest Business Development and Marketing Services developing patient handouts for PathWest collection centres in Arabic, Chinese simplified, Italian, Punjabi and Vietnamese.
- PathWest Employee participation in annual Pride Parade with other WA Health Service Provider floats.

Industrial relations

The core responsibility of the Industrial Relations team's role continues to be promoting and fostering productive relationships with employees, unions and key stakeholders.

Major industrial relations activities undertaken in the 2024/2025 period include:

- Representation and advocacy in matters before the WA Industrial Relations Commission (WAIRC), Public Sector Arbitrator (PSA) and Public Sector Appeal Board (PSAB).
- Advice and interpretation of industrial agreements and their application.
- Advice and case management of claims and disputes related to investigations, disciplinary matters and contractual claims such as conditions and entitlements.
- Ongoing advice and support for the implementation of workforce changes, including implementation of new shifts and increased hours/days of operation.
- Development, review and implementation of workforce policies, systems and processes relating to industrial relations.
- Participation in forums and working groups where required. This included monthly WA Health Industrial Relations forums to receive updates and discuss long service leave for casuals, transition to permanency of senior practitioners and negotiations for replacement Industrial Agreements.
- Advice and management of industrial elements of fitness for work matters.
- Advice on matters relating to strategic planning, where required.
- Lead role in the conversion of Senior Practitioners to permanency. This includes assessment review to determine eligibility, analysis of existing and previous contracts, engagement with department leads, Finance, Health Service Provider Industrial Relations teams, System-wide industrial relations, Health Support Services, the Australian Medical Association and individual consultants.
- Lead role in the implementation of changes related to relevant industrial agreements registered in 2024/25, which included education sessions, development of processes to ensure compliance and supporting managers with advice related to the changes.
- Union liaison and contact to ensure amicable and timely resolution of matters raised.

Workers' compensation

In 2024/25, PathWest recorded 44 workers' compensation claims.

The 2024/25 financial year focused on strengthening and embedding injury management processes and expectations across the organisation. This included promoting early reporting, early intervention and active engagement of workers and managers throughout the injury management process.

Nature of Injury	2021 - 22	2022 - 23	2023 - 24	2024 - 25
Burns	0	1	2	1
Heat, radiation and electricity	0	1	0	0
Foreign body, ear, eye, nose, respiratory	1	0	0	0
Fractures	3	1	1	0
Mental disorders	2	1	3	9
Musculoskeletal system - disorders muscles/ other soft tissue	5	6	6	0
Open wound	2	2	3	6
Sprains, strains and dislocations	8	9	14	21
Superficial injury	1	1	1	2
Exposure to chemicals	0	1	3	3
Disorders of the eyes	0	1	0	0
Disorders of nerve roots, plexuses	1	0	0	0
All other disease	1	0	1	0
Needlestick injury				1
Contusion and Crushing	0	0	2	1
Total Claims	**24**	**24**	**36**	**44**

Pricing policy

Pathology fees and charges are set under Division 4 of the *Health Services (Fees and Charges) Order 2016* and are reviewed annually.

PathWest charges patients for pathology services in accordance with Section 7.5 of the *WA Health - Patient Fees and Charges Manual 2024/25* issued by the Department of Health, dated May 2025.

Capital works

Capital project incomplete

PathWest commenced a project to remove and replace aluminium composite panel (ACP) cladding on the PathWest PP Block Laboratory building at QEII to enhance safety for staff and patients. The project is currently in the design phase, with $4.5 million in funding approved in the 2024/25 State Budget.

Capital projects completed

No capital projects were completed during the 2024/25 financial year.

Unauthorised use of credit cards

PathWest uses purchase cards for purchasing goods and services to achieve savings through improved administrative efficiency and more effective cash management. A purchasing card is a credit card that provides a clear audit trail for management.

PathWest credit cards are only provided to employees who are required to make purchases on behalf of PathWest. Credit cards are strictly not for personal use. Should a card holder use a credit card for personal use, they are required to submit a Notice of Non-compliance and refund the total amount spent within five working days.

In 2024/25, there was no purchase made for personal use.

Indemnity insurance

In 2024/25, the insurance premium paid to indemnify any 'director' (defined in Part 3 of the *Statutory Corporations (Liability of Directors) Act 1996)* against liability incurred under sections 13 or 14 of that Act was $26,599.10 (including GST).

Annual estimates

PathWest's annual operational budget estimates are reported to the Minister for Health under Section 40 of the *Financial Management Act 2006* and Treasurer's Instruction 953. The Annual Estimates 2025/26 will be published on the PathWest website.

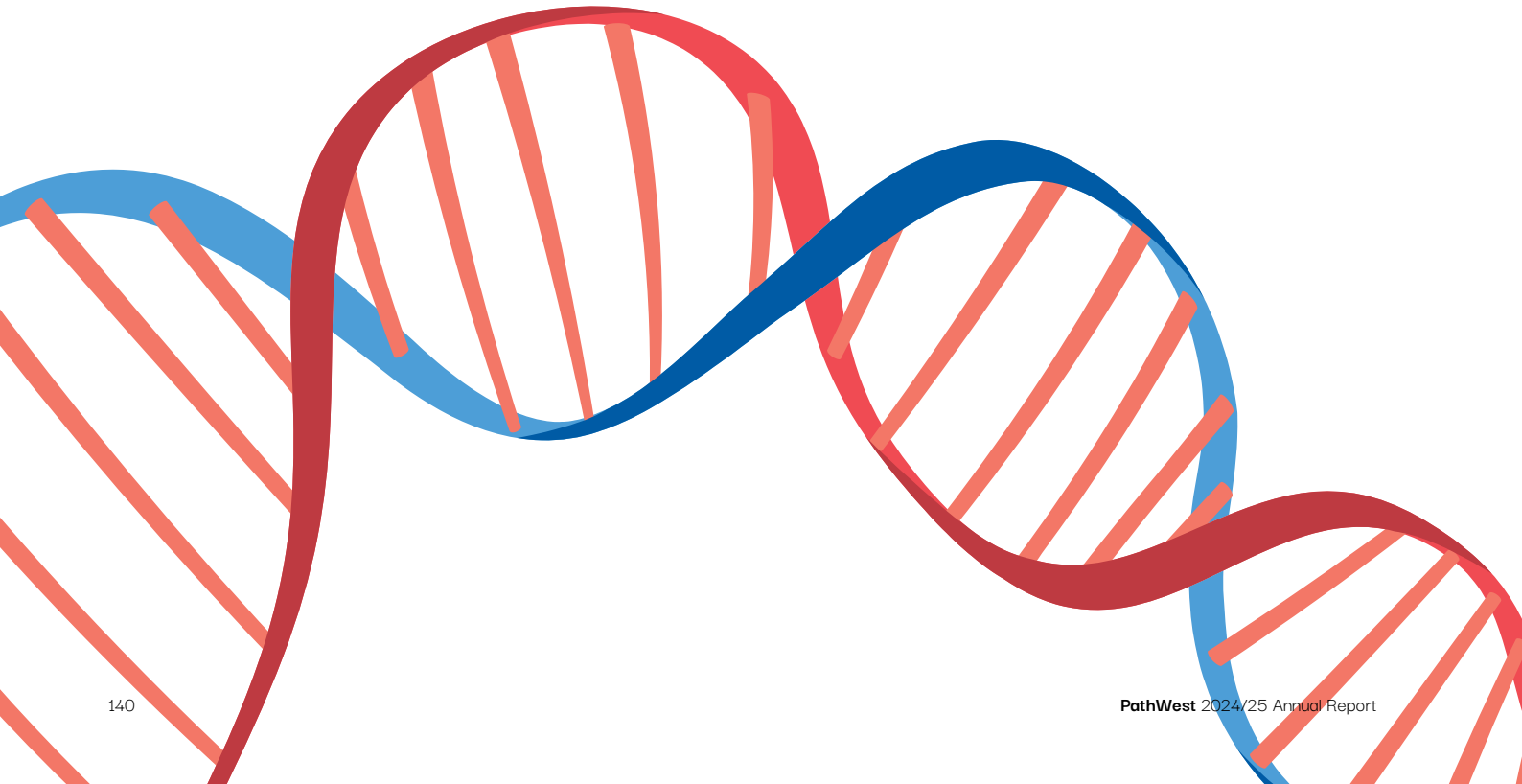
Expenditure on advertising

In accordance with Section 175ZE of the *Electoral Act 1907* PathWest is required to report its total advertising expenditure. In 2024/25 the total expenditure incurred was $3,011.46. The types of advertisements that were used and the amount paid against each type of advertisement is detailed in the table below.

Category	Advertisement	Amount ($)
Type of Advert	Advertising – Newspapers	$0.00
	Advertising – Radio	$0.00
	Advertising – Television	$0.00
	Advertising – Other Media	$3,011.46
	Total	**$3,011.46**

Board remuneration

Member position	Member name	Period of membership for 2024/25	Term of appointment and tenure	Type of remuneration	Base salary / sitting fees ($)	Gross/actual remuneration ($)
Chair	Angie Paskevicius	12 Months	1 July 2020 to 30 June 2027	Annual	$76,094	$84,832.67
Deputy Chair	Tarun Weeramanthri	12 Months	16 August 2020 to 30 June 2026	Annual	$41,926	$46,598.24
Member	Gelareh Farshid	12 Months	1 July 2020 to 30 June 2026	Annual	$41,926	$46,733.83
Member	Samantha Elder	12 months	1 July 2020 to 30 June 2026	Annual	$41,926	$46,618.21
Member	Kevin Taylor	12 Months	1 July 2020 to 30 June 2025	Annual	$41,926	$46,790.64
Member	Christobel Saunders	12 Months	1 July 2020 to 30 June 2026	Annual	$41,926	$46,688.54
Member	Tony Vis	12 Months	1 July 2022 to 30 June 2025	Annual	$41,926	$46,730.83
Member	Susan Rooney	12 Months	1 July 2022 to 30 June 2025	Annual	$41,926	$48,357.94
Member	Paul O'Farrell	12 months	17 April 2023 to 16 April 2026	Annual	$41,926	$46,598.24
Member	Tracey Brand	9 months	18 September 2023 to 17 September 2025	Annual	$41,926	$30,288.85
			Total			**$490,237.99**



WA multicultural policy framework

The PathWest Multicultural Plan 2021-25 was developed to address the three policy priorities of the WA Multicultural Policy Framework: 1. Harmonious and inclusive communities 2. Culturally responsive policies, programs, and services 3. Economic, social, cultural, civic, and political participation. The vision of the PathWest Multicultural Plan 2021-25 is to foster an inclusive and harmonious workplace where every individual feels a strong sense of belonging and can fully contribute to all aspects of the organisation. This plan outlines the strategies and actions PathWest will implement to enhance workforce diversity and cultural competence, eliminate systemic discrimination, and deliver health services that are welcoming, inclusive, and equitable for everyone.

Work health and safety incident management

Work health and safety incident management

Workers' Health and Safety continues to be a key focus for PathWest. In 2024/25, PathWest consolidated and further developed the Safety Management System through reviewing and enhancing policies, procedures and supporting documentation. A Chemical Safety Specialist and Infection Prevention and Management Consultant were appointed as subject matter experts to provide advice to managers and staff on these matters.

Project work completed throughout the year included enhancing Chemical Safety through auditing, training and supporting staff in the correct handling and storage of chemicals, assisting Pre-analytical Services in a safety-needle trial, and an annual vaccination campaign.

Work Health and Safety (WHS) provided support in all areas of operations including:

- Performing incident investigations, risk assessments and advising on best practice control strategies to manage risk to health and safety.
- Analysis of injury and incident data in various areas of operation with the aim of improving work processes and applying the best risk controls.
- Analysis of injury and incident data in various operational areas with the aim of improving work processes and applying sound risk controls.
- Ergonomic assessments of work activities, workstations and equipment including chairs, with the aim of improving comfort levels and reducing the cumulative risk of musculoskeletal strain while at work.

WHS also contributed to the future of safety within the broader industry, with learning and teaching opportunities with the University of Western Australia as well as participating in the College Lecturer Industry Placement program in association with North Metropolitan TAFE.

Hazard and injury reporting

PathWest reports on hazard and incident report submissions via Safety Risk Reports quarterly, with data presented to Executive, Board and Operations-focused Committees.

A key focus of the WHS team has been continuing to build and promote a positive reporting culture, evidenced by a steady growth in reporting, compared to recent financial years.

Reporting trends have levelled during 2024/25, with the five main mechanisms of incident/injury relating to body stressing/manual tasks, needlestick/exposure to blood/body fluids, exposure to workplace violence and aggression, psychosocial incidents and cuts/sharps' injuries.

A key priority for 2025/26 will be to strengthen hazard and incident reporting through the roll-out of an electronic safety reporting system. This will facilitate real-time reporting, follow-up and implementation of appropriate risk controls, while setting clear accountability and providing oversight of outstanding actions and unresolved reports.

- Q1 2024/25 Report: Hazards = 36; Incidents = 81
- Q2 2024/25 Report: Hazards = 37; Incidents = 73
- Q3 2024/25 Report: Hazards = 33; Incidents = 74
- Q4 2024/25 Report: Hazards = 37; Incidents = 78
- 2024/25 TOTAL: Hazards = 143; Incidents = 306

Record keeping plans

Building on the work initiated in 2024, PathWest has continued to strengthen its recordkeeping framework. Content Manager is being trialled in the Office of the Chief Executive and our legal services.

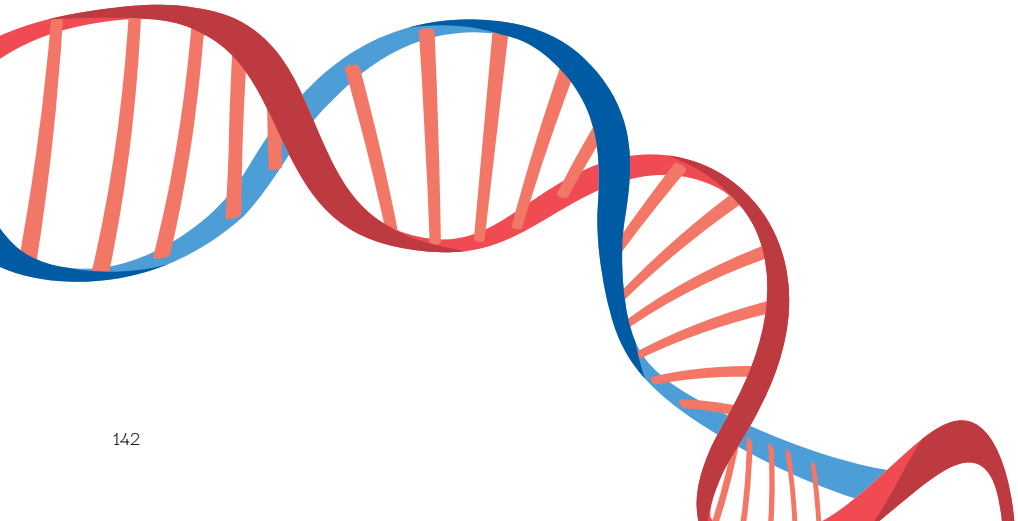
The focus of 2025/26 will be enhancing standardised practices for the creation, management, security and disposal of PathWest records.

Job security review

PathWest remains dedicated to providing job security for our staff whenever possible. Permanent employment is preferred in line with the WA Health System – HSUWA – PACTS Industrial Agreement 2024 and the WA Health System – United Workers Union (WA) – Hospital Support Workers Industrial Agreement 2024 (The Agreements). In the new Agreements, the requirement to perform Job Security Reviews on staff employed on a fixed term basis was reduced from two years to 12 months of service in the same or similar role.

During the 2024/25 financial year, PathWest reviewed the employment arrangements of 291 fixed-term contract and casual employees. Of these, 119 were transitioned to permanent positions, resulting in a conversion rate of 41%.

PathWest will continue to collaborate with various departments to support and promote opportunities for increasing job security. Employee arrangements will be reviewed as they become eligible, ensuring ongoing efforts to enhance job stability.



Compliance with public sector standards and ethical codes

Code of Conduct

The intent of the WA Health Code of Conduct is to promote a positive workplace culture by providing a framework to support ethical day-to-day conduct and decision making. It defines the standards of ethical and professional conduct and outlines the behaviours expected of all PathWest employees.

It has been developed to comply with the principles of appropriate behaviour outlined in the Western Australian Public Sector Code of Ethics.

PathWest has systems and processes in place to ensure all employees comply with policies and standards of behaviour. All policies are available for staff access on the PathWest intranet or via the Human Resources team. To ensure all staff are aware and educated about the relevant policies, training packages include: Accountable and Ethical Decision Making, Aboriginal Cultural learning, Confidentiality, Recordkeeping Awareness and Workplace Bullying and Harassment: Prevention and Management.

Human Resources and Integrity and Ethics also provide ongoing advice, education and support to employees.

Under the WA Health Discipline Policy, PathWest is required to assess all complaints alleging a breach of discipline. All breaches of the Code of Conduct are considered breaches of discipline under the *Health Services Act 2016*.

In 2024/25, PathWest received 128 complaints of a potential breach of discipline and finalised 17 disciplinary matters. At 30 June 2025 PathWest was managing 15 active disciplinary matters.

Disability access and inclusion plan

PathWest remains committed to fostering an inclusive and accessible environment for all Western Australians. In alignment with this commitment, and informed by multiple internal audits, PathWest has initiated a series of targeted improvement initiatives to address accessibility challenges across its services.

Significant progress has also been made in enhancing the accessibility of PathWest's digital platforms. These enhancements focus on improving user navigation and ensuring seamless access to critical patient information.

Building on previous efforts to translate patient materials, additional resources for patients, parents, and carers have now been translated. These materials incorporate clear visual aids and are designed to reduce communication barriers for individuals with language or literacy challenges. Key documents have been made available in the five most commonly spoken languages in Western Australia.

Enhancing physical accessibility remains a strategic priority for PathWest. Site audits have identified several historical access challenges, which are being systematically addressed through targeted infrastructure upgrades. Where facilities are shared or community-based, PathWest is actively collaborating with landlords to implement necessary modifications and ensure compliance with accessibility standards.

Looking forward, PathWest is committed to embedding continuous improvement into its operations. Insights drawn from our expertise in quality, risk, and work health and safety audits will continue to inform the development of a comprehensive Disability Access and Inclusion Plan (DAIP) Action Plan. This plan will serve as a strategic framework to guide ongoing enhancements in accessibility and inclusion across all areas of the organisation.

Asbestos management plan

Compliance with the Asbestos National Strategic Plan

PathWest continues to meet its obligations under Phase Three of the Asbestos National Strategic Plan (ANSP) 2024–2030, with a strong focus on safety, compliance, and continuous improvement.

Our asbestos management program includes a comprehensive Asbestos Management Plan (AMP), regular risk assessments, and the safe removal and disposal of asbestos-containing materials (ACM) in accordance with relevant legislation and codes of practice.

Key achievements and initiatives include:

- Completion and distribution of site-specific ACM Registers
- All inspections performed by licensed asbestos surveyors
- Engagement of licensed asbestos removal contractors and independent assessors for all remediation works
- Submission of required documentation to WorkSafe WA
- Ongoing staff training, with a 90% completion rate of the mandatory asbestos e-learning module.

2024/25 highlights in alignment with ANSP Aim 1: Identification, Risk Control, and Removal:

- Identification and Assessment
- Organisation-wide AMP completed and distributed
- ACM Registers developed for all PathWest-controlled facilities
- Coordination with hospital facility managers for shared buildings.

Risk control and removal

Inspections

- Inspections performed by licensed asbestos surveyors as per regulations.
- ACM removed from multiple sites, including PathWest QEII J Block, JKLM Link, and M Block.
- Roofing and eaves remediation at PathWest QEII, J-K Link, and J Block.

Transport and Disposal

- All asbestos removal conducted by licensed contractors
- Air monitoring and clearance certified by independent assessors
- Full compliance with WA WHS regulations and reporting to WorkSafe WA.

Staff Training

- Mandatory e-learning module launched in 2023
- 90% staff completion rate as of June 2025
- Ongoing awareness supported via Chief Executive communications and engagement by PathWest Operations - Asset Facilities, and Infrastructure team
- PathWest remains committed to protecting staff, visitors, and contractors from asbestos-related risks and continues to align its practices with government policy and legislation.

Risk and audit management

PathWest's Audit and Risk Management function operates in accordance with the Institute of Internal Auditors three lines of defence model and provides oversight of key areas of organisational risk. PathWest's internal audit and risk management activities assess the adequacy and effectiveness of internal controls to support management in improving systems and processes across critical areas and providing assurance to the PathWest Board, to enable improved oversight and informed decision making.

Internal Audit

PathWest continues to operate a co-sourced internal audit model. A portion of its Strategic Internal Audit Plan is delivered by a contracted service provider while the balance is delivered by PathWest's in-house Audit and Assurance Analyst. Delivery of the internal audit service is overseen by PathWest's Manager Audit and Risk Management.

Throughout 2024/25 PathWest audits in areas with financial, IT and cyber, operational and clinical risk, included:

- Revenue
- Procurement and Contract Management
- Staff Travel
- Forensic Biology Sample Tracking and Reporting
- Forensic Pathology Authorisations and Case Tracking
- Anatomical Pathology - Perinatal Loss Service
- "Essential 8" Cyber Security Health-check
- Emergency Management and Business Continuity Planning
- Amnio-Genetics Case Tracking

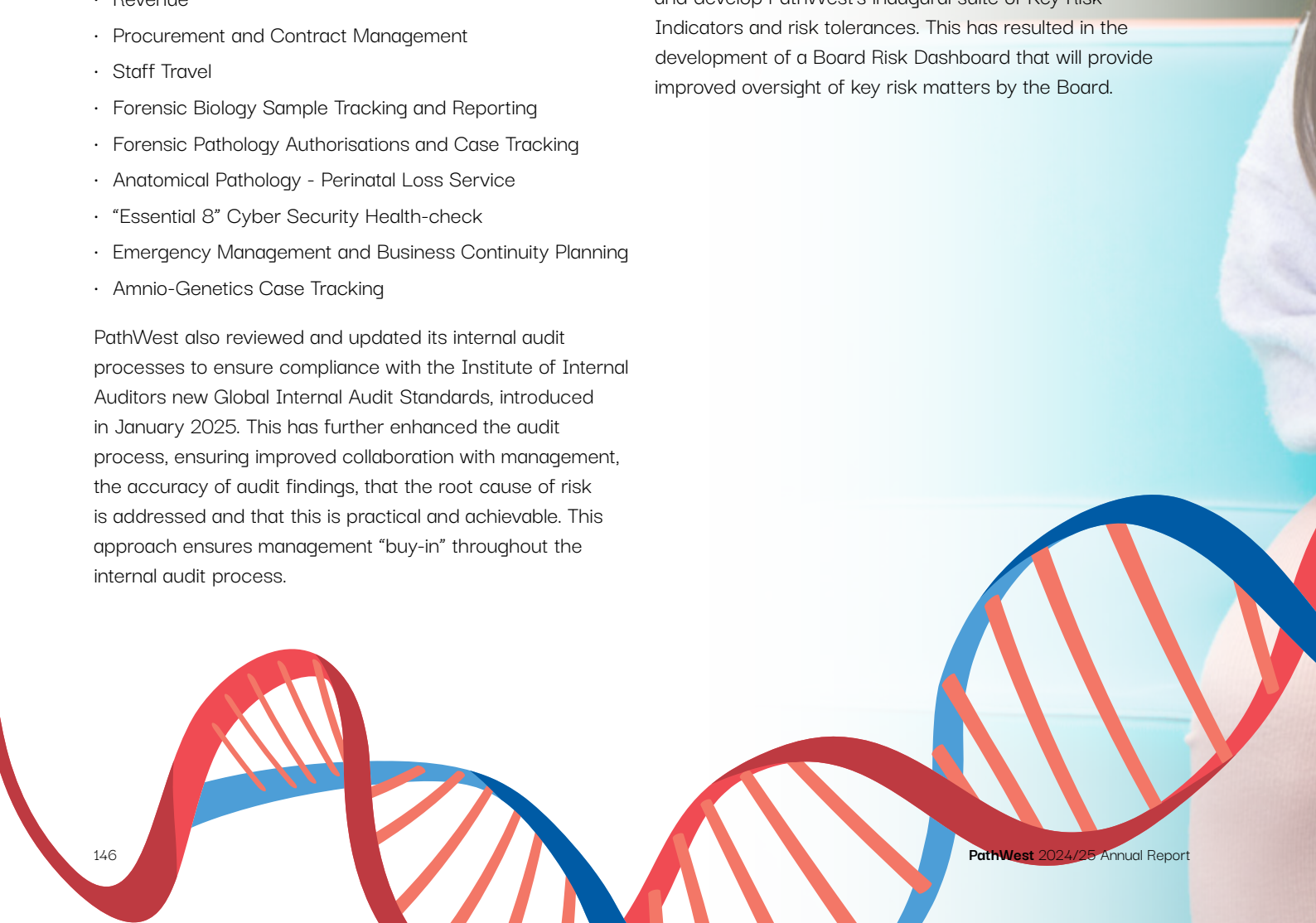
PathWest also reviewed and updated its internal audit processes to ensure compliance with the Institute of Internal Auditors new Global Internal Audit Standards, introduced in January 2025. This has further enhanced the audit process, ensuring improved collaboration with management, the accuracy of audit findings, that the root cause of risk is addressed and that this is practical and achievable. This approach ensures management "buy-in" throughout the internal audit process.

Audit recommendations are discussed at the Finance, Risk and Audit Committee and the Internal Audit team works closely with management to monitor progress of recommendations through PathWest's Enterprise Risk Management System.

Risk Management

PathWest's risk management team continues to work closely with Executive, Managers, Heads of Department and Principal Scientists, to identify and assess risks and controls across all areas of risk. The team also works with management to develop and monitor treatment action plans in response to those risks, with activities captured, monitored and reported via the Enterprise Risk Management System. Key risks are periodically reported to management committees across PathWest, ensuring critical decisions around resource-allocation are risk-based.

During 2024/25, PathWest's Manager Audit and Risk Management worked closely with the PathWest Board to review strategic risks, refresh the Risk Appetite Statement, and develop PathWest's inaugural suite of Key Risk Indicators and risk tolerances. This has resulted in the development of a Board Risk Dashboard that will provide improved oversight of key risk matters by the Board.



Freedom of information

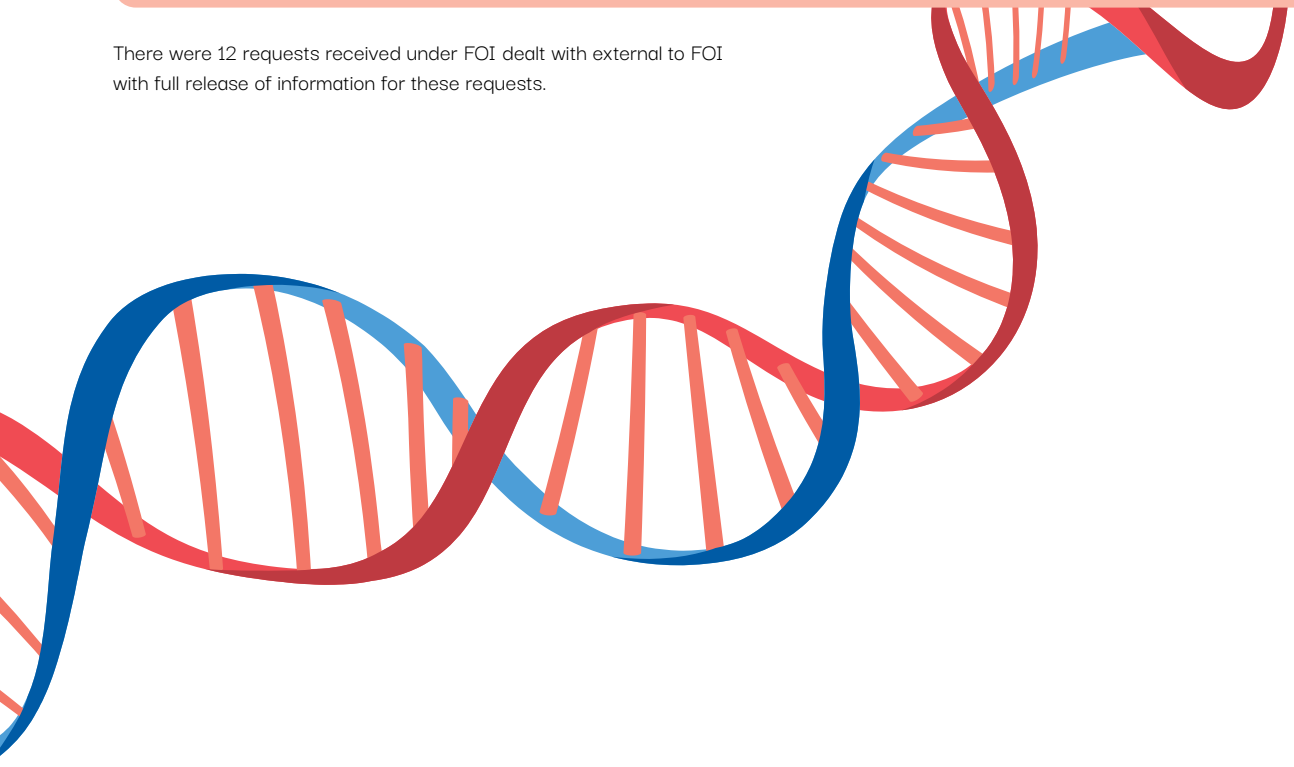
The *Freedom of Information Act 1992 (WA)* gives Western Australians a right to access information held by PathWest, subject to some limitations, including your PathWest medical records. The types of information held by PathWest include:

- pathology results
- patient information, bulletins and pamphlets
- publications relating to health planning and management
- contract and tender records
- minutes and agendas
- general administrative records
- financial and budget records
- human resource records.

Access to information can be made through a Freedom of Information (FOI) application involving the lodgement of a written request, providing sufficient information to enable the application to be processed, including contact details, identification and an Australian address for correspondence.

Table 1. 2024/25 Summary of FOI Requests	
Access in full to all requested documents	33
Edited access	7
Request had no records discovered	1
Request withdrawn by the applicant	1
Request transferred to another agency	3
Total	**45**

There were 12 requests received under FOI dealt with external to FOI with full release of information for these requests.



Learning from clinical incidents

A clinical incident is an event resulting from the provision of health care that could have, or did, lead to the unintended harm of a patient.

PathWest actively encourages all staff to report clinical incidents. The process of investigating incidents is undertaken in accordance with the Clinical Incident Management Policy (Clinical Governance, Safety and Quality Policy Framework) and is fundamental in the prevention of future harm to patients.

During the year, all reported clinical incidents were investigated and where appropriate, recommendations implemented to improve patient safety. The timely communication with patients around adverse outcomes through the open disclosure process provides transparency, and assurance to those who may have suffered harm, that PathWest takes seriously our commitment to mitigate the risk of reoccurrence.

Clinical incidents resulting in serious harm to a patient are assigned a Severity Assessment Code (SAC) rating of SAC 1. There were no SAC 1 clinical incidents reported by PathWest in 2024/25.

PathWest undertakes a cause analysis for all serious incidents to ensure improvement opportunities can be identified and implemented. Investigations of incidents include all aspects of the patient's health care journey. PathWest contributes to and benefits from the shared learnings from investigations across the spectrum of health services involved.

Accreditation

PathWest services in medical, forensic, biological, and environmental testing continue to hold accreditation based on international and national standards for testing laboratories.

All PathWest human pathology testing laboratories, and the State Mortuary services are accredited by the National Association of Testing Authorities (NATA) to the International Standard ISO 15189:2022, Medical laboratories – Requirements for quality and competence and requirements prescribed by the National Pathology Accreditation Advisory Council (NPAAC). NATA also assesses some specialist services against standards prescribed by the Therapeutic Goods Administration (TGA). PathWest are accredited by NATA to ISO 8655:2022 Piston-operated volumetric apparatus (POVA) to perform in-house calibrations.

As well as human pathology testing laboratories, PathWest operates a forensic testing laboratory and two biological testing laboratories, in the specialties of environmental testing and media production. These three facilities have continued their accreditation by NATA to ISO/IEC 17025:2017, General requirements for the competence of testing and calibration laboratories.

NATA also assess the toxicology laboratory and supporting collection services to Australian Standard AS/NZS 4308:2023, Procedures for Specimen Collection and the Detection and Quantitation of Drugs of Abuse in Urine.

All laboratories have maintained their continuing accreditation status in all fields of testing including Forensic, Medical, Biological and Environmental, and for performing in-house Calibration of POVA.

Appendix

Board highlights in 2024/25

Regional Board Travel

The Board undertakes travel to regional PathWest facilities in line with its strong commitment to greater engagement with staff across PathWest. This travel helps the Board to better understand the unique challenges our staff in the regions face.

In March 2025, the Board visited PathWest facilities at Kalgoorlie Regional Hospital and its community collection centre on Hannan Street. The Board had fortunately managed to align its travel arrangements with the WA Country Health Service Board, enabling positive engagement with the WACHS Board members and executive team and an exchange of ideas and experiences.

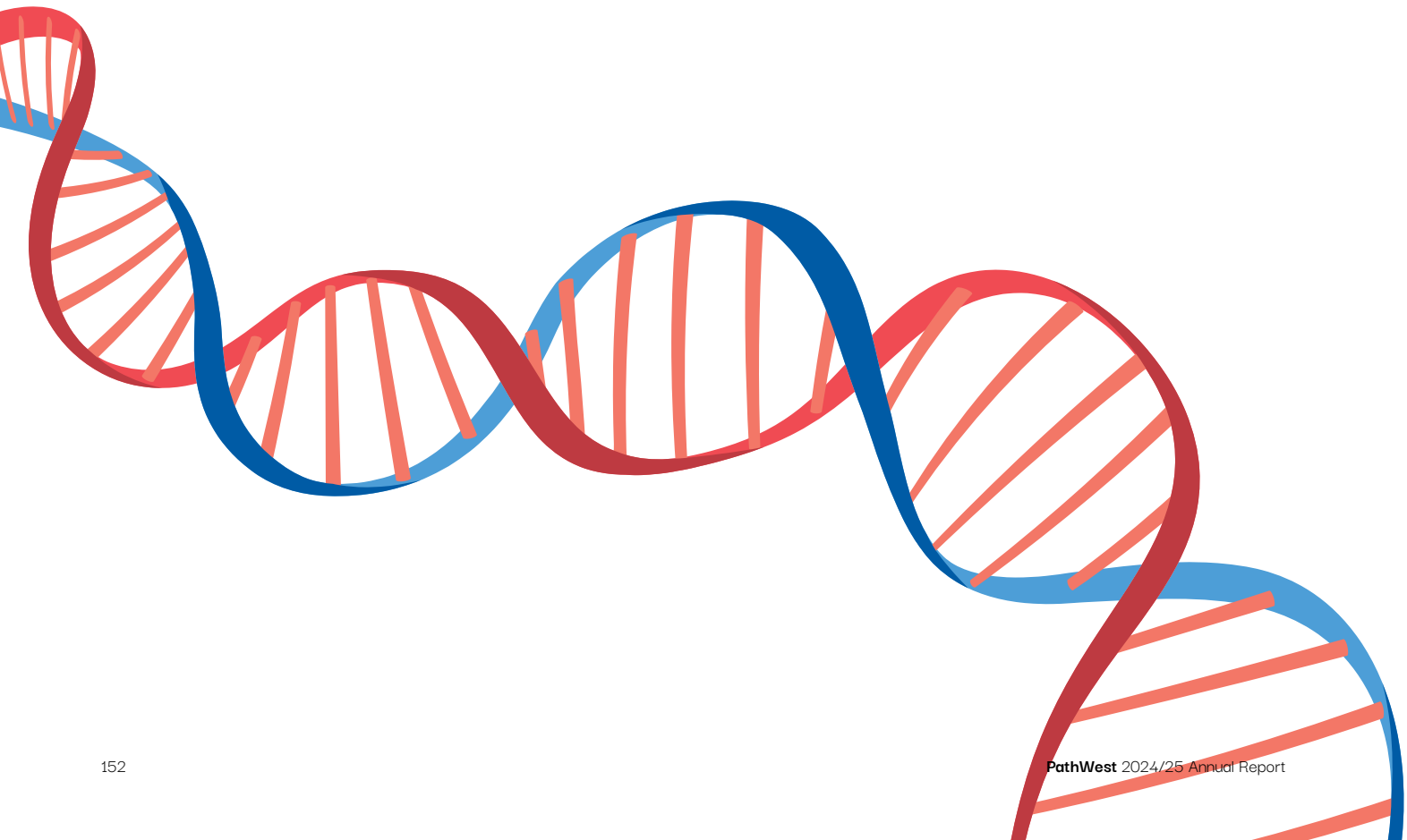
The Board was fortunate to receive a presentation from Kalgoorlie's Medical Scientist-in-Charge which highlighted the effectiveness of clinical interoperability at Kalgoorlie Regional Hospital. A recent critical incident placed pressure on blood supplies with PathWest and WACHS working effectively together to save the life of a man with severe limb trauma.

During a tour of the laboratory the Board heard positive experiences from staff who had begun their careers with a practical work placement in Kalgoorlie and then made PathWest their workplace and Kalgoorlie home. The ability to gain multidisciplinary experience and the lifestyle in and around the region were cited as the main factors which attracted medical science graduates to the site.

Board and CE Morning Teas

The 2023 Your Voice In Health Survey identified that PathWest staff wanted greater engagement with the PathWest leadership team and Board. In June 2024, a program of PathWest Chief Executive and Board morning teas commenced at QEII with 13 held since at the following sites: FSH, Rockingham General Hospital, Kalgoorlie Regional Hospital, Bentley Health Service, RPH, King Edward Memorial Hospital, Armadale Hospital and Osborne Park Hospital.

Feedback from staff evidences that that they welcomed the opportunity to discuss their work with the Chief Executive and Board, and hear about positive achievements across the organisation.



Board committees in focus

People and Culture - Chair: Mr Tony Vis

Assists the PathWest Board in fostering a shared vision and positive, open culture with an emphasis on our most important asset – our staff; and cultivates appropriate and effective engagement between staff, clinicians, patients, customers and the wider communities on matters related to people and culture.

2024/25 Focus

- Continuing to monitor asbestos removal through six monthly updates on the rollout of the Asbestos Plan.
- Monitoring PathWest's development and implementation of strategies to safeguard against Child Sexual Abuse, in line with the recommendations of the Royal Commission into Institutional Responses to Child Sexual Abuse.
- Improving mandatory training compliance across PathWest.
- Overseeing trends in WHS reporting to reduce Lost Time Injury incidents.
- Monitoring PathWest's profile in the media, including highlights and issues raised, and the effectiveness of media strategies in promoting the invaluable work undertaken by PathWest clinical and support services.
- Workforce dashboard trend reporting, giving the Committee oversight of FTE allocation and key challenges.

Safety and Quality – Chair: Mr. Kevin Taylor

Assist the Board in fostering safe and high quality PathWest services for patients and customers by monitoring and advising on matters relating to safety and quality and through the implementation of, and adherence to, the Clinical Governance framework.

2024/25 Focus

- Ongoing monitoring of PathWest's compliance with accreditation requirements detailed by the National Association of Testing Authorities (NATA) and other regulatory bodies for PathWest laboratories.
- Monitoring Key Assurance Indicators used to measure the delivery of high-quality pathology services.
- Understanding and implementing regular reporting relating to clinical incidents and ensuring appropriate corrective actions are developed and implemented.
- Maintaining oversight on research governance and performance.
- Overseeing lost specimen data reporting and prevention strategies.

Finance, Risk and Audit – Chair: Ms. Samantha Elder

Provides support, assistance and advice, and make recommendations to the PathWest Board regarding adherence to the WA Department of Health Risk, Compliance and Audit Policy Framework, and all aspects of financial management including policy, performance, governance and contract management. The Committee also monitors the adequacy, effectiveness and efficiency of internal audit and risk management processes.

2024/25 Focus

- Overseeing PathWest's Strategic Internal Audit Plan incorporating its Annual Internal Audit Plan for 2024/25.
- Continuing to monitor key projects and risks such as IT controls, cybersecurity risk and strategic procurement matters.
- Working in collaboration with the People and Culture Committee to address excess leave.
- Overseeing procurement activity.
- Overseeing the implementation and operation of Business Continuity and Emergency Management Plans.

Board and committee meeting attendance

Board Meeting

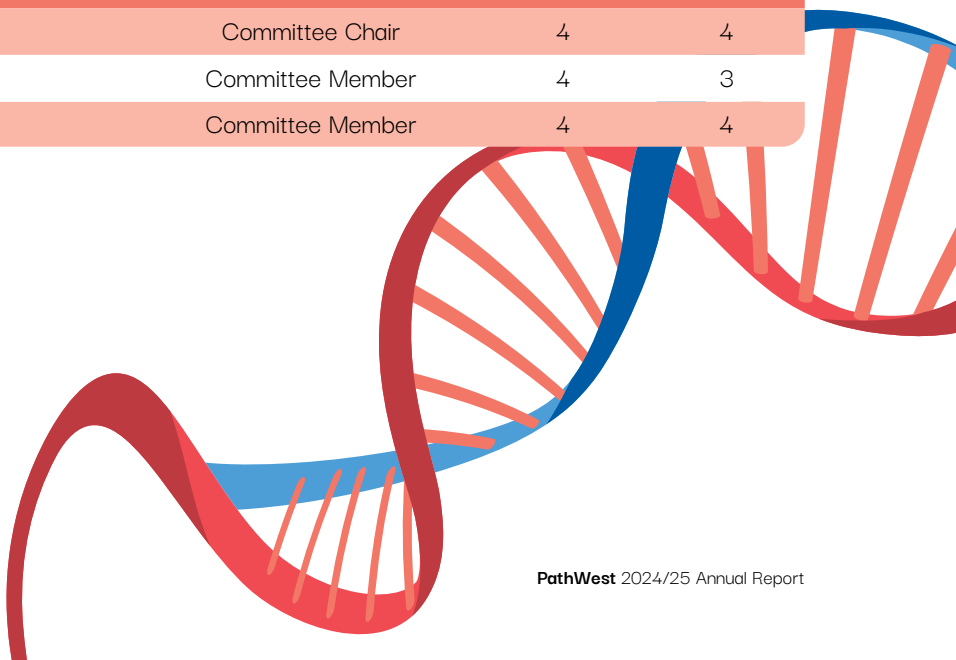
Name	Position	Number of Meetings	Meetings attended
Ms. Angie Paskevicius	Board Chair	10	10
Prof. Tarun Weeramanthri	Deputy Board Chair	10	10
Prof. Christobel Saunders	Member	10	9
Prof. Gelareh Farshid	Member	10	8
Mr. Kevin Taylor	Member	10	10
Mr. Paul O'Farrell	Member	10	10
Ms. Samantha Elder	Member	10	8
Ms. Susan Rooney	Member	10	9
Mr. Tony Vis	Member	10	10
Ms. Tracey Brand – Member*	Member*	5	4

Finance Risk and Audit Committee

Name	Position	Number of Meetings	Meetings attended
Ms. Samantha Elder	Committee Chair	7	7
Mr. Paul O'Farrell	Committee Member	7	6
Mr. Tony Vis	Committee Member	7	6
Mr. Jeff Docking	Committee Member**	6	5

Safety and Quality Committee

Name	Position	Number of Meetings	Meetings attended
Mr. Kevin Taylor	Committee Chair	4	4
Prof. Gelareh Farshid	Committee Member	4	3
Prof. Tarun Weeramanthri	Committee Member	4	4



People and Culture Committee

Name	Position	Number of Meetings	Meetings attended
Mr. Tony Vis	Committee Chair	5	5
Ms. Susan Rooney	Committee Member	5	4
Ms. Tracey Brand	Committee Member*	3	1

Forensic Biology Advisory Council

Name	Position	Number of Meetings	Meetings attended
Hon. John Chaney SC	Committee Chair	2	2
AC. Arlene Mavratsou	Committee Member	2	2
Prof. Christobel Saunders	Committee Member	2	1
Dr. Gavin Turbett	Committee Member	2	2
A/Prof. James Speers	Committee Member	2	2
Dr. Narelle Hadlow	Committee Member	2	2
Mr. Nicholas van Hattem	Committee Member***	2	0
Mr. Robert Owen	Committee Member	2	1

* Tracey Brand resigned Thursday 6 February 2025
** Jeff Docking joined Finance Risk and Audit Committee (FRAC) 26 August 2024
*** Nicholas van Hattem resigned Wednesday 1 January 2025

Abbreviations and acronyms

ALL	Acute Lymphoblastic Leukaemia
ACHS	Australian Council on Healthcare Standards
ACHS	Australian Council of Healthcare Standards
ACM	Asbestos-containing Materials
ACP	Aluminium Composite Panel
ADH	Antidiuretic hormone
AMP	Asbestos Management Plan
ANA	Antinuclear Antibodies
ANCA	Anti-neutrophil Cytoplasmic Antibodies
ANSP	Asbestos National Strategic Plan
Anti-D	anti-Dimmunoprophylaxis
CALD	Culturally and Linguistically Diverse
CAR-T	Chimeric Antigen Receptor-T
CPOE	Computerized Provider Order Entry
CSRA	Central Specimen Reception Area
DI	Diabetes Insipidus
DMPU	Day Medical Procedures Unit
DNA	Deoxyribonucleic acid
ED	Emergency Department
EDI	Equity, Diversity, and Inclusion
EMU	Environmental Microbiology Unit
EV	Electric Vehicle
FACT	Foundation for the Accreditation of Cellular Therapy
FBD	Forensic Biology Department
FIGG	Forensic Investigative Genetic Genealogy
FOGO	Food Organics and Garden Organics
FSH	Fiona Stanley Hospital
FTE	Full Time Equivalent
HLA	Human Leukocyte Antigen
HPV	human papillomavirus
HSP	Health Service Providers
IHL	Institute for Health Leadership
KPI	Key Performance Indicator
LIS	Laboratory Information System
MTP	Massive Transfusion Protocol
NAIDOC	National Aboriginal and Islanders Day Observance Committee
NATA	National Association of Testing Authorities
NMHS	North Metropolitan Health Service
NMP	normothermic machine perfusion
NPAAC	National Pathology Accreditation Advisory Council
OBM	Outcome Based Management
OMRI	Office of Medical Research and Innovation
PAS	Pre-Analytical Services
PCH	Perth Children's Hospital
PCR	Polymerase Chain Reaction
PEC	PathWest Executive Committee
POC	Point of Care
POVA	Piston-operated Volumetric Apparatus
PSA	Public Sector Arbitrator
PSAB	Public Sector Appeal Board
QAP	Quality Assurance Program
RCPA	Royal College of Pathologists Australasia
RCPA	Royal College of Pathologists of Australasia
RHD NIPT	Rhesus D Non-invasive prenatal testing
ROSE	Rapid On-Site Evaluation
RPH	Royal Perth Hospita
RSS	Regional Support Services

RSV	Respiratory syncytial virus
RTO	Registered Training Organisation
SAC	Severity Assessment Code
SCID	Severe Combined Immunodeficiency
SIADH	Syndrome of Inappropriate Antidiuretic Hormone Secretion
SMHS	South Metropolitan Health Service
SOP	Standard Operating Procedures
TAT	Turnaround Times
TGA	Therapeutic Goods Administration
TST	Tuberculin Skin Test
WACHS	WA Country Health Service
WAIRC	WA Industrial Relations Commission
WAPF	Western Australian Police Force
WGS	Whole Genome Sequencing
WHS	Work Health and Safety

GOVERNMENT OF WESTERN AUSTRALIA

PathWest LABORATORY MEDICINE WA

PathWest Laboratory Medicine WA

Street address:

Building A, Level 2, Pathology Building,
Fiona Stanley Hospital
11 Robin Warren Drive
Murdoch WA 6150

Postal address:

Locked Bag 100,
Palmyra DC WA 6961

Phone: 13 PATH (7284)
Email: PathWest.OfficeofCE@health.wa.gov.au
Website: pathwest.health.wa.gov.au