CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Chairperson</td>
<td>2</td>
</tr>
<tr>
<td>Audit</td>
<td>4</td>
</tr>
<tr>
<td>Finance</td>
<td>34</td>
</tr>
<tr>
<td>Chief Executive Officer</td>
<td>36</td>
</tr>
<tr>
<td>Brewarrina Aboriginal Health Service Limited</td>
<td>43</td>
</tr>
<tr>
<td>Children's Services Team</td>
<td>47</td>
</tr>
<tr>
<td>Chronic Diseases</td>
<td>51</td>
</tr>
<tr>
<td>Clinic</td>
<td>57</td>
</tr>
<tr>
<td>Dental</td>
<td>61</td>
</tr>
</tbody>
</table>
Introduction

The WAMS Directors continue to focus on their strategic directions in the areas of governance and also the expansion of WAMS facilities. This involved a completion of the compliance and financial review of all operations. Such revision has occurred for the overarching Policies and Procedures, as well as ensuring the Board and staff are meeting their regulatory obligations.

Quality

The WAMS Directors announce that WAMS have achieved Accrediation with White Ribbon Australia (WRA). WAMS is the second ACCHO in NSW to achieve this recognition along with our colleagues at Broken Hill.

Such distinction reinforces to our community that WAMS strongly believes in the Safety of women according to the principles of WRA;

White Ribbon originated in 1991, when a group of three men from Toronto, began a campaign to stop violence against women, after a massacre of 14 women by a lone gunman at a university in Montreal.

Today, it is an international effort in over 57 countries, of men and boys working to end violence against women.

Directors and staff now share the responsibilities on ensuring the organisation is free of inappropriate communications and disrespectful behaviours. We also encourage our clients to behave in a manner that is safe and courteous at all times.

Every three years WAMS reports on their activities according to both clinic and organisational accreditation. For the Brewarrina operations, an assessment was conducted in late February, with accreditation formally awarded in April. On behalf of the WAMS Directors, congratulations are extended to the staff who have reinforced the optimum level of care extended to clients and professional engagement with partner agencies.

Quality in Governance

Several meetings have occurred with members at the beginning of 2018 to discuss the content of the three-year Strategic Plan. The Plan is a document which encompasses the community’s social changes along with the external partners who contribute to our developing businesses.

In February and May 2018, extra ordinary meetings of members were held to change the Constitution via special resolutions. The purpose of the Resolution was to modernize the Constitution, and to supply to Australia Securities Investment Commission (ASIC) a proposal of remuneration for the WAMS Directors.
Building Expansions, Maintenance and Renovations

Several concept plans have been presented to the WAMS Directors in regards to a new facility. The design of the property will include existing staff establishing their services, a Board room, meeting area and potential expansion of a health and fitness area.

It is anticipated that the facility will connect to the Pitt Street site and branch out to the neighbouring buildings across WAMS. Demolition will commence in the next financial year once approval is given by local Council to do so.

Visitors

WAMS is very generous in offering their time to host visitors to our town. Whether it be official dignitaries, workers who are operating their business in Walgett, or curious (and welcomed) onlookers. It is such visitors that offer WAMS an opportunity to ‘show and tell’ what we contribute to the social fabric of Walgett and dispel the negative myths that is so often displayed in the media.

Brewarrina Aboriginal Health Service (BAHSL)

The Board of Directors give thanks to Mrs Hellen Mannix who has managed BAHSL for over ten years. Her family obligations require her to move to a larger town, and we wish her family all the best for the future.

Ms Katrina Ward has accepted the challenge to take on the Manager’s role. Her past knowledge of the region as well her qualifications in mental health will stand her in good stead to lead the business into the future.

Conclusion

I commend the Directors have supported me along with this journey. I acknowledge the staff who have worked diligently to meet the changes within our legal environment and ensuring WAMS is operating at ‘best practice’ level in relation to all areas of compliance.

WAMS is an evolving entity, growing from the grassroots each and every day; as we acknowledge the economic and social changes around us.

WILLIAM KENNEDY, CHAIRPERSON
BOARD OF DIRECTORS
WALGETT ABORIGINAL MEDICAL SERVICE LIMITED
78 014 990 451

FINANCIAL REPORT
FOR THE YEAR ENDED
30 JUNE 2018

Liability limited by a scheme approved under
Professional Standards Legislation
## CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Directors' Report</td>
<td>6</td>
</tr>
<tr>
<td>Auditors' Independence Declaration</td>
<td>8</td>
</tr>
<tr>
<td>Statement of Profit or Loss And Other Comprehensive Income</td>
<td>9</td>
</tr>
<tr>
<td>Profit and Loss Statement</td>
<td>30</td>
</tr>
<tr>
<td>Statement of Financial Position</td>
<td>10</td>
</tr>
<tr>
<td>Statement of Changes in Equity</td>
<td>11</td>
</tr>
<tr>
<td>Statement of Cash Flows</td>
<td>12</td>
</tr>
<tr>
<td>Notes to the Financial Statements</td>
<td>13</td>
</tr>
<tr>
<td>Directors' Declaration</td>
<td>26</td>
</tr>
<tr>
<td>Auditors' Report</td>
<td>27</td>
</tr>
<tr>
<td>Detailed Profit and Loss Statement</td>
<td>31</td>
</tr>
</tbody>
</table>
Your directors present their report on the company for the financial year ended 30 June 2018.

The names of the directors in office at any time during or since the end of the year are:

William Kennedy
Bert Gordon
Mary Purse
Donald Cran
George Fernando
Iris Hall

The directors have been in office since the start of the financial year to the date of this report unless otherwise stated.

The surplus of the company for the financial year amounted to $493,490 after allowing for depreciation of $601,473. Although Walgett Aboriginal Medical Service Limited has accumulated cash reserves much of this will be spent on maintaining and replacing existing buildings, improvements, plant and equipment, for erection of new facilities, as well as ensuring all employee entitlements can be paid in full when and if required.

No significant changes in the company's state of affairs occurred during the financial year.

The principal activities of the company during the financial year were:
- foster and strengthen the development of Aboriginal culture and identity
- provide an accessible medical service to Aboriginal people
- provide health promotion programs that meet the needs of Aboriginal people
- assist Aboriginal people to use existing health services effectively
- promote understanding among the members of the health system (at all levels), the general community and politicians so that adequate provision is made for the needs of Aboriginal people

No significant change in the nature of these activities occurred during the year.

No matters or circumstances have arisen since the end of the financial year which significantly affected or may significantly affect the operations of the entity, the result of those operations, or the state of affairs of the entity in future financial years.

Information on Directors

<table>
<thead>
<tr>
<th>Director</th>
<th>Meetings Held</th>
<th>Meetings Attended</th>
</tr>
</thead>
<tbody>
<tr>
<td>William Kennedy</td>
<td>11</td>
<td>11</td>
</tr>
<tr>
<td>Bert Gordon</td>
<td>11</td>
<td>11</td>
</tr>
<tr>
<td>Mary Purse</td>
<td>11</td>
<td>11</td>
</tr>
<tr>
<td>Donald Cran</td>
<td>11</td>
<td>10</td>
</tr>
<tr>
<td>George Fernando</td>
<td>11</td>
<td>9</td>
</tr>
<tr>
<td>Iris Hall</td>
<td>11</td>
<td>5</td>
</tr>
</tbody>
</table>

Likely developments in the operations of the entity and the expected results of those operations in future financial years have not been included in this report as the inclusion of such information is likely to result in unreasonable prejudice to the entity.

The company's operations are not regulated by any significant environmental regulation under a law of the Commonwealth or of a State or Territory.
WALGETT ABORIGINAL MEDICAL SERVICE LIMITED
78 014 890 451

DIRECTORS' REPORT

The company's operations are not regulated by any significant environmental regulation under a law of the Commonwealth or of a State or Territory.

Under the rules of the company the payment of dividends, rebates or bonuses are not permitted.

No options over issued shares or interests in the company were granted during or since the end of the financial year and there were no options outstanding at the date of this report.

No indemnities have been given or insurance premiums paid, during or since the end of the financial year, for any person who is or has been an officer or auditor of the company.

Auditors' Independence Declaration

A copy of the auditors' independence declaration as required under section 307C of the Corporations Act 2001 is set out on page 3.

Signed in accordance with a resolution of the Board of Directors:

Director: [Signature]

William Kennedy

Dated this 15th day of November 2018
AUDITORS' INDEPENDENCE DECLARATION
UNDER SECTION 307C OF THE CORPORATIONS ACT 2001
TO THE DIRECTORS OF
WALGETT ABORIGINAL MEDICAL SERVICE LIMITED

We declare that, to the best of our knowledge and belief, during the year ended 30 June 2018 there have been:

(i) no contraventions of the auditor independence requirements as set out in the Corporations Act 2001 in relation to the audit, and

(ii) no contraventions of any applicable code of professional conduct in relation to the audit.

Name of Firm: Ryan and Rankmore Chartered Accountants

Name of Partner: Kevin L Rankmore

Address: 1 Swift Street, Wellington NSW 2820

Dated this 15th day of November, 2018
WALGETT ABORIGINAL MEDICAL SERVICE LIMITED
78 014 990 451

STATEMENT OF PROFIT OR LOSS AND OTHER COMPREHENSIVE INCOME
FOR THE YEAR ENDED 30 JUNE 2018

<table>
<thead>
<tr>
<th>Note</th>
<th>Description</th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Revenue</td>
<td>9,876,198</td>
<td>9,068,365</td>
</tr>
<tr>
<td>2</td>
<td>Other income</td>
<td>49,152</td>
<td>70,886</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>9,925,350</td>
<td>9,139,251</td>
</tr>
<tr>
<td></td>
<td>Accommodation, meals &amp; travel</td>
<td>(218,097)</td>
<td>(212,477)</td>
</tr>
<tr>
<td></td>
<td>Auditors' remuneration</td>
<td>(35,000)</td>
<td>(35,000)</td>
</tr>
<tr>
<td>3</td>
<td>Consulting fees</td>
<td>(480,704)</td>
<td>(296,711)</td>
</tr>
<tr>
<td></td>
<td>Depreciation and amortisation expenses</td>
<td>(601,473)</td>
<td>(446,162)</td>
</tr>
<tr>
<td></td>
<td>Employee benefits expenses</td>
<td>(3,818,791)</td>
<td>(3,471,789)</td>
</tr>
<tr>
<td></td>
<td>Lease expenses</td>
<td>(174,221)</td>
<td>(222,490)</td>
</tr>
<tr>
<td></td>
<td>Other expenses</td>
<td>(4,362,228)</td>
<td>(3,962,229)</td>
</tr>
<tr>
<td>4</td>
<td>Profit before income tax</td>
<td>234,836</td>
<td>492,393</td>
</tr>
<tr>
<td></td>
<td>Depreciable Items</td>
<td>308,513</td>
<td>332,681</td>
</tr>
<tr>
<td></td>
<td>Profit for the year</td>
<td>543,349</td>
<td>825,074</td>
</tr>
<tr>
<td></td>
<td>Total comprehensive income for the year</td>
<td>543,349</td>
<td>825,074</td>
</tr>
<tr>
<td></td>
<td>Total comprehensive income attributable to members of the entity</td>
<td>543,349</td>
<td>825,074</td>
</tr>
</tbody>
</table>

The accompanying notes form part of these financial statements.
WALGETT ABORIGINAL MEDICAL SERVICE LIMITED
78 014 990 451

STATEMENT OF FINANCIAL POSITION
AS AT 30 JUNE 2018

<table>
<thead>
<tr>
<th>Note</th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>ASSETS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>CURRENT ASSETS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash and cash equivalents</td>
<td>5</td>
<td>9,979,153</td>
</tr>
<tr>
<td>Trade and other receivables</td>
<td>6</td>
<td>313,690</td>
</tr>
<tr>
<td>Other current assets</td>
<td>7</td>
<td>-</td>
</tr>
<tr>
<td><strong>TOTAL CURRENT ASSETS</strong></td>
<td></td>
<td>10,292,843</td>
</tr>
<tr>
<td><strong>NON-CURRENT ASSETS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Property, plant and equipment</td>
<td>8</td>
<td>7,907,480</td>
</tr>
<tr>
<td><strong>TOTAL NON-CURRENT ASSETS</strong></td>
<td></td>
<td>7,907,480</td>
</tr>
<tr>
<td><strong>TOTAL ASSETS</strong></td>
<td></td>
<td>18,200,323</td>
</tr>
<tr>
<td><strong>LIABILITIES</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>CURRENT LIABILITIES</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trade and Other Payables</td>
<td>9</td>
<td>1,525,851</td>
</tr>
<tr>
<td>Borrowings</td>
<td>10</td>
<td>111,177</td>
</tr>
<tr>
<td><strong>TOTAL CURRENT LIABILITIES</strong></td>
<td></td>
<td>1,637,028</td>
</tr>
<tr>
<td><strong>NON-CURRENT LIABILITIES</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Members Shares</td>
<td>10</td>
<td>340</td>
</tr>
<tr>
<td>Provisions</td>
<td>11</td>
<td>242,470</td>
</tr>
<tr>
<td><strong>TOTAL NON-CURRENT LIABILITIES</strong></td>
<td></td>
<td>242,810</td>
</tr>
<tr>
<td><strong>TOTAL LIABILITIES</strong></td>
<td></td>
<td>1,879,838</td>
</tr>
<tr>
<td><strong>NET ASSETS</strong></td>
<td></td>
<td>16,320,485</td>
</tr>
<tr>
<td><strong>EQUITY</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Retained earnings</td>
<td>12</td>
<td>16,320,485</td>
</tr>
<tr>
<td><strong>TOTAL EQUITY</strong></td>
<td></td>
<td>16,320,485</td>
</tr>
</tbody>
</table>

The accompanying notes form part of these financial statements.
WALGETT ABORIGINAL MEDICAL SERVICE LIMITED
78 014 990 451

STATEMENT OF CHANGES IN EQUITY
FOR THE YEAR ENDED 30 JUNE 2018

<table>
<thead>
<tr>
<th>Note</th>
<th>Retained earnings $</th>
<th>Total $</th>
</tr>
</thead>
<tbody>
<tr>
<td>Balance at 1 July 2016</td>
<td>14,952,062</td>
<td>14,952,062</td>
</tr>
<tr>
<td>Profit attributable to equity shareholders</td>
<td>825,074</td>
<td>825,074</td>
</tr>
<tr>
<td>Balance at 30 June 2017</td>
<td>15,777,136</td>
<td>15,777,136</td>
</tr>
<tr>
<td>Profit attributable to equity shareholders</td>
<td>543,349</td>
<td>543,349</td>
</tr>
<tr>
<td>Balance at 30 June 2018</td>
<td>16,320,485</td>
<td>16,320,485</td>
</tr>
</tbody>
</table>

The accompanying notes form part of these financial statements.
WALGETT ABORIGINAL MEDICAL SERVICE LIMITED
78 014 990 451

STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED 30 JUNE 2018

<table>
<thead>
<tr>
<th></th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>CASH FLOWS FROM OPERATING ACTIVITIES</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Receipts from customers</td>
<td>9,635,385</td>
<td>9,316,953</td>
</tr>
<tr>
<td>Payments to suppliers and employees</td>
<td>(8,777,263)</td>
<td>(7,726,879)</td>
</tr>
<tr>
<td>Interest received</td>
<td>137,008</td>
<td>103,099</td>
</tr>
<tr>
<td>Net cash provided by operating activities</td>
<td>995,130</td>
<td>1,693,173</td>
</tr>
<tr>
<td>CASH FLOWS FROM INVESTING ACTIVITIES</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Payments for property, plant and equipment</td>
<td>(663,901)</td>
<td>(332,681)</td>
</tr>
<tr>
<td>Net cash used in investing activities</td>
<td>(663,901)</td>
<td>(332,681)</td>
</tr>
<tr>
<td>CASH FLOWS FROM FINANCING ACTIVITIES</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Proceeds from borrowings</td>
<td>353,647</td>
<td>-</td>
</tr>
<tr>
<td>Net cash provided by financing activities</td>
<td>353,647</td>
<td>-</td>
</tr>
<tr>
<td>Net increase in cash held</td>
<td>684,876</td>
<td>1,360,492</td>
</tr>
<tr>
<td>Cash at beginning of financial year</td>
<td>9,294,277</td>
<td>7,933,785</td>
</tr>
<tr>
<td>Cash at end of financial year</td>
<td>9,979,153</td>
<td>9,294,277</td>
</tr>
</tbody>
</table>

The accompanying notes form part of these financial statements.
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2018

1 Statement of Significant Accounting Policies

The financial statements cover Walgett Aboriginal Medical Service Limited as an individual entity. Walgett Aboriginal Medical Service Limited is a company limited by guarantee, incorporated and domiciled in Australia.

Basis of Preparation

The financial statements are general purpose financial statements that have been prepared in accordance with Australian Accounting Standards, Australian Accounting Interpretations, other authoritative pronouncements of the Australian Accounting Standards Board (AASB) and the Corporations Act 2001.

These financial statements and notes comply with International Financial Reporting Standards as issued by the International Accounting Standards Board.

The significant accounting policies used in the preparation and presentation of these financial statements are provided below and are consistent with prior reporting periods unless stated otherwise.

The financial statements are based on historical costs, except for the measurement at fair value of selected non-current assets, financial assets and financial liabilities.

Property, Plant and Equipment

Each class of property, plant and equipment is carried at cost less, where applicable, any accumulated depreciation and impairment.

Land and buildings

Land and buildings are measured using the cost model.

Plant and equipment

Plant and equipment are measured using the cost model.

Depreciation

Property, plant and equipment, is depreciated on a straight line basis over the assets useful life to the Company, commencing when the asset is ready for use.

Leased assets and leasehold improvements are amortised over the shorter of either the unexpired period of the lease or their estimated useful life.
WALGETT ABORIGINAL MEDICAL SERVICE LIMITED
78 014 990 451

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2018

Leases

 Lease payments for operating leases, where substantially all of the risks and benefits remain with the lessor, are charged as expenses on a straight line basis over the life of the lease term.

 Lease incentives under operating leases are recognised as a liability and amortised over the life of the lease term.

Financial Instruments

 Financial instruments are recognised initially using trade date accounting, i.e. on the date that company becomes party to the contractual provisions of the instrument.

 On initial recognition, all financial instruments are measured at fair value plus transaction costs (except for instruments measured at fair value through profit or loss where transaction costs are expensed as incurred).

Loans and receivables

 Loans and receivables are non-derivative financial assets with fixed or determinable payments that are not quoted in an active market. They arise principally through the provision of goods and services to customers but also incorporate other types of contractual monetary assets.

 After initial recognition these are measured at amortised cost using the effective interest method, less provision for impairment. Any change in their value is recognised in profit or loss.

 The company's trade and most other receivables fall into this category of financial instruments.

 Significant receivables are considered for impairment on an individual asset basis when they are past due at the reporting date or when objective evidence is received that a specific counterparty will default.

 The amount of the impairment is the difference between the net carrying amount and the present value of the future expected cash flows associated with the impaired receivable.

 In some circumstances, the company renegotiates repayment terms with customers which may lead to changes in the timing of the payments, the company does not necessarily consider the balance to be impaired, however assessment is made on a case-by-case basis.
Available-for-sale financial assets

Available-for-sale financial assets are non-derivative financial assets that do not qualify for inclusion in any of the other categories of financial assets or which have been designated in this category. The company's available-for-sale financial assets comprise listed securities.

Available-for-sale financial assets are measured at fair value, with subsequent changes in value recognised in other comprehensive income.

Gains and losses arising from financial instruments classified as available-for-sale are only recognised in profit or loss when they are sold or when the investment is impaired.

In the case of impairment or sale, any gain or loss previously recognised in equity is transferred to the profit or loss.

Subsequent recoveries of amounts previously written off are credited against other expenses in profit or loss.

Available-for-sale financial assets

A significant or prolonged decline in value of an available-for-sale asset below its cost is objective evidence of impairment. In this case, the cumulative loss that has been recognised in other comprehensive income is reclassified from equity to profit or loss as a reclassification adjustment. Any subsequent increase in the value of the asset is taken directly to other comprehensive income.

Impairment of Non-Financial Assets

At the end of each reporting period the company determines whether there is an evidence of an impairment indicator for non-financial assets.

Where this indicator exists the recoverable amount of the asset is estimated.

Where assets do not operate independently of other assets, the recoverable amount of the relevant cash-generating unit (CGU) is estimated.

The recoverable amount of an asset or CGU is the higher of the fair value less costs of disposal and the value in use. Value in use is the present value of the future cash flows expected to be derived from an asset or cash-generating unit.

Where the recoverable amount is less than the carrying amount, an impairment loss is recognised in profit or loss.

Reversal indicators are considered in subsequent periods for all assets which have suffered an impairment loss, except for goodwill.
Employee Benefits

Provision is made for the company's liability for employee benefits arising from services rendered by employees to the end of the reporting period. Employee benefits that are expected to be wholly settled within one year have been measured at the amounts expected to be paid when the liability is settled.

Employee benefits expected to be settled more than one year after the end of the reporting period have been measured at the present value of the estimated future cash outflows to be made for those benefits. In determining the liability, consideration is given to employee wage increases and the probability that the employee may satisfy vesting requirements. Cashflows are discounted using market yields on high quality corporate bond rates incorporating bonds rated AAA or AA by credit agencies, with terms to maturity that match the expected timing of cash flows. Changes in the measurement of the liability are recognised in profit or loss.

Provisions

Provisions are recognised when the company has a legal or constructive obligation, as a result of past events, for which it is probable that an outflow of economic benefits will result and that outflow can be reliably measured.

Provisions are measured at the present value of management's best estimate of the outflow required to settle the obligation at the end of the reporting year. The discount rate used is a pre-tax rate that reflects current market assessments of the time value of money and the risks specific to the liability. The increase in the provision due to the unwinding of the discount is taken to finance costs in the statement of other comprehensive income.

Cash and Cash Equivalents

Cash and cash equivalents comprises cash on hand, demand deposits and short-term investments which are readily convertible to known amounts of cash and which are subject to an insignificant risk of change in value.
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2018

Revenue and Other Income

Revenue is recognised when the amount of the revenue can be measured reliably, it is probable that economic benefits associated with the transaction will flow to the company and specific criteria relating to the type of revenue as noted below, has been satisfied.

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

Revenue is measured at the fair value of the consideration received or receivable and is presented net of returns, discounts and rebates.

Interest revenue

Interest revenue is recognised using the effective interest rate method.

Rendering of services

Revenue in relation to rendering of services is recognised depends on whether the outcome of the services can be measured reliably. If this is the case then the stage of completion of the services is used to determine the appropriate level of revenue to be recognised in the period. If the outcome cannot be reliably measured then revenue is recognised to the extent of expenses recognised that are recoverable.

Other income

Other income is recognised on an accruals basis when the company is entitled to it.

Trade and Other Payables

Trade and other payables represent the liabilities at the end of the reporting period for goods and services received by the company that remain unpaid.

Trade payables are recognised at their transaction price. Trade payables are obligations on the basis of normal credit terms.
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2018

Goods and Services Tax (GST)

Revenue, expenses and assets are recognised net of the amount of goods and services tax (GST), except where the amount of GST incurred is not recoverable from the Australian Taxation Office (ATO).

Receivables and payables are stated inclusive of GST.

The net amount of GST recoverable from, or payable to, the ATO is included as part of receivables or payables in the balance sheet.

Cash flows in the statement of cash flows are included on a gross basis and the GST component of cash flows arising from investing or financing activities which is recoverable from, or payable to, the taxation authority is classified as operating cash flows.

Comparative Amounts

Comparatives are consistent with prior years, unless otherwise stated.

Where a change in comparatives has also affected the opening retained earnings previously presented in a comparative period, an opening statement of financial position at the earliest date of the comparative period has been presented.
## 2 Revenue and Other Income

### Revenue

<table>
<thead>
<tr>
<th>Description</th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rendering of services</td>
<td>26,467</td>
<td>38,153</td>
</tr>
<tr>
<td>Carried Forward Funding</td>
<td>373,437</td>
<td>76,371</td>
</tr>
<tr>
<td>Interest received</td>
<td>137,008</td>
<td>103,099</td>
</tr>
<tr>
<td>Other revenue</td>
<td>9,388,438</td>
<td>8,921,628</td>
</tr>
<tr>
<td><strong>Total revenue</strong></td>
<td>9,925,350</td>
<td>9,139,251</td>
</tr>
</tbody>
</table>

### Other revenue from:

<table>
<thead>
<tr>
<th>Description</th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unexpended Grants - Brought Forward</td>
<td>373,437</td>
<td>76,371</td>
</tr>
<tr>
<td><strong>Total other revenue</strong></td>
<td>373,437</td>
<td>76,371</td>
</tr>
</tbody>
</table>

### Interest revenue from:

<table>
<thead>
<tr>
<th>Description</th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Interest Received</td>
<td>137,008</td>
<td>103,099</td>
</tr>
<tr>
<td><strong>Total interest revenue on financial assets not at fair value through profit or loss</strong></td>
<td>137,008</td>
<td>103,099</td>
</tr>
</tbody>
</table>

### Other revenue from:

<table>
<thead>
<tr>
<th>Description</th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Department of Health</td>
<td>6,066,119</td>
<td>5,471,219</td>
</tr>
<tr>
<td>NSW Health Department</td>
<td>991,601</td>
<td>940,600</td>
</tr>
<tr>
<td>Dept of DPM &amp; C, D &amp; A &amp; SEWB</td>
<td>696,781</td>
<td>586,930</td>
</tr>
<tr>
<td>Rural Doctors Network</td>
<td>105,261</td>
<td>205,913</td>
</tr>
<tr>
<td>Rent Received</td>
<td>47,655</td>
<td>51,036</td>
</tr>
<tr>
<td>Dividends</td>
<td>863</td>
<td>660</td>
</tr>
<tr>
<td>DSS</td>
<td>114,851</td>
<td>90,701</td>
</tr>
<tr>
<td>Doctors Fees</td>
<td>1,230,539</td>
<td>1,368,527</td>
</tr>
<tr>
<td>Western NSW LHD</td>
<td>-</td>
<td>27,800</td>
</tr>
<tr>
<td>Recovered Expenses</td>
<td>49,152</td>
<td>70,886</td>
</tr>
<tr>
<td>Donations</td>
<td>5,900</td>
<td>-</td>
</tr>
<tr>
<td>Fundraising Income</td>
<td>-</td>
<td>1,277</td>
</tr>
<tr>
<td>Sale of Motor Vehicles</td>
<td>66,040</td>
<td>30,909</td>
</tr>
<tr>
<td>Sundry Grants</td>
<td>7,000</td>
<td>20,909</td>
</tr>
<tr>
<td>Sundry Income</td>
<td>-</td>
<td>31,393</td>
</tr>
<tr>
<td>Insurance Recovery</td>
<td>6,676</td>
<td>-</td>
</tr>
<tr>
<td>Wage Subsidy</td>
<td>-</td>
<td>22,868</td>
</tr>
<tr>
<td><strong>Total other revenue</strong></td>
<td>9,388,438</td>
<td>8,921,628</td>
</tr>
</tbody>
</table>
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2018

3 Auditors' Remuneration

<table>
<thead>
<tr>
<th></th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Audit Fees</td>
<td>35,000</td>
<td>35,000</td>
</tr>
</tbody>
</table>

4 Profit for the year

Profit before income tax from continuing operations includes the following specific expenses:

**Expenses**

- Depreciation of property, plant and equipment: 601,473
- Leasing Charges: 174,221

5 Cash and Cash Equivalents

<table>
<thead>
<tr>
<th>Account Description</th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash on Hand</td>
<td>-</td>
<td>795</td>
</tr>
<tr>
<td>11-3563 Westpac Term Deposit (Employee Entitlements)</td>
<td>588,599</td>
<td>575,422</td>
</tr>
<tr>
<td>Cash at Bank - Westpac Bank Walgett Accounts</td>
<td></td>
<td></td>
</tr>
<tr>
<td>932366 Doctors Fees Account</td>
<td>89,092</td>
<td>632,054</td>
</tr>
<tr>
<td>NAB Account</td>
<td>146,330</td>
<td>102,131</td>
</tr>
<tr>
<td>950417 Mobile Childrens Prog Account</td>
<td>807,336</td>
<td>500,474</td>
</tr>
<tr>
<td>940403 M/V Lease Account</td>
<td>44,188</td>
<td>99,273</td>
</tr>
<tr>
<td>11-3934 Wages Account</td>
<td>156,541</td>
<td>96,141</td>
</tr>
<tr>
<td>Cash Reserve Account</td>
<td>9,636</td>
<td>9,636</td>
</tr>
<tr>
<td>Cash Reserve Bonus Account</td>
<td>1,969,327</td>
<td>6,915,614</td>
</tr>
<tr>
<td>WBC Notice Saver Account</td>
<td>5,000,000</td>
<td>-</td>
</tr>
<tr>
<td>187288 Dept of Health Account</td>
<td>58,223</td>
<td>65,615</td>
</tr>
<tr>
<td>187296 NSW Dept of Health Account</td>
<td>942,518</td>
<td>163,184</td>
</tr>
<tr>
<td>205191 OATSIH Capital Works</td>
<td>254</td>
<td>251</td>
</tr>
<tr>
<td>23-0047 NSW Expansion</td>
<td>64</td>
<td>64</td>
</tr>
<tr>
<td>260457 Brewarrina Aboriginal Health Service</td>
<td>36,060</td>
<td>51,770</td>
</tr>
<tr>
<td>93-0539 House Account</td>
<td>133,910</td>
<td>87,392</td>
</tr>
<tr>
<td>Westpac Visa</td>
<td>(2,160)</td>
<td></td>
</tr>
<tr>
<td>Visa Card</td>
<td>(436)</td>
<td>(4,606)</td>
</tr>
<tr>
<td>Visa Card - CEO</td>
<td>(329)</td>
<td>(806)</td>
</tr>
<tr>
<td>Visa Card - Chairperson</td>
<td></td>
<td>(127)</td>
</tr>
<tr>
<td>Total</td>
<td>9,390,554</td>
<td>8,718,060</td>
</tr>
<tr>
<td>Cash Reserves Bonus</td>
<td>9,979,153</td>
<td>9,294,277</td>
</tr>
</tbody>
</table>
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2018

<table>
<thead>
<tr>
<th>Reconciliation of cash</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash and Cash equivalents reported in the statement of cash flows are reconciled to the equivalent items in the statement of financial position as follows:</td>
</tr>
<tr>
<td>2018 $</td>
</tr>
<tr>
<td>---</td>
</tr>
<tr>
<td>Cash and cash equivalents</td>
</tr>
<tr>
<td>9,979,153</td>
</tr>
</tbody>
</table>

6 Trade and Other Receivables

Current

<table>
<thead>
<tr>
<th>Description</th>
<th>2018 $</th>
<th>2017 $</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sundry Debtors - ATO</td>
<td>14,381</td>
<td>-</td>
</tr>
<tr>
<td>Trade Debtors</td>
<td>37,980</td>
<td>130,977</td>
</tr>
<tr>
<td>Less: Provision for Doubtful Debts</td>
<td>(3,743)</td>
<td>(10,000)</td>
</tr>
<tr>
<td>34,237</td>
<td>120,977</td>
<td></td>
</tr>
<tr>
<td>GST Control Account</td>
<td>262,762</td>
<td>123,660</td>
</tr>
<tr>
<td>Rental Bond</td>
<td>2,310</td>
<td>2,310</td>
</tr>
<tr>
<td>313,690</td>
<td>246,947</td>
<td></td>
</tr>
</tbody>
</table>

The carrying value of trade receivables is considered a reasonable approximation of fair value due to the short term nature of the balances.

7 Other Assets

Current

<table>
<thead>
<tr>
<th>Description</th>
<th>2018 $</th>
<th>2017 $</th>
</tr>
</thead>
<tbody>
<tr>
<td>Subscriptions in Advance</td>
<td>-</td>
<td>25,000</td>
</tr>
</tbody>
</table>

8 Property, Plant and Equipment

BUILDINGS

<table>
<thead>
<tr>
<th>Description</th>
<th>2018 $</th>
<th>2017 $</th>
</tr>
</thead>
<tbody>
<tr>
<td>Land &amp; Buildings At Cost</td>
<td>9,418,911</td>
<td>9,970,823</td>
</tr>
<tr>
<td>Less accumulated depreciation</td>
<td>(2,732,824)</td>
<td>(2,885,589)</td>
</tr>
<tr>
<td>Total Buildings</td>
<td>6,686,087</td>
<td>7,085,234</td>
</tr>
</tbody>
</table>
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2018

PLANT AND EQUIPMENT

Plant and Equipment:
At cost 4,025,516 3,361,615
Accumulated depreciation (2,804,123) (2,601,797)
Total Plant and Equipment 1,221,393 759,818
Total Property, Plant and Equipment 7,907,480 7,845,052

Movements in Carrying Amounts of Property, Plant and Equipment

Movement in the carrying amounts for each class of property, plant and equipment between the beginning and the end of the current financial year.

<table>
<thead>
<tr>
<th></th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Land &amp; Buildings</td>
<td>$6,686,087</td>
<td>$675,960</td>
</tr>
<tr>
<td>Motor Vehicles</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Plant and Equipment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Balance at 1 July 2016</td>
<td>7,085,234</td>
<td>707,281</td>
</tr>
<tr>
<td>Additions</td>
<td>-</td>
<td>38,402</td>
</tr>
<tr>
<td>Disposals/Demolition</td>
<td>(551,912)</td>
<td></td>
</tr>
<tr>
<td>Depreciation expense</td>
<td>(152,765)</td>
<td></td>
</tr>
<tr>
<td>Carrying amount at 30 June 2018</td>
<td>6,686,087</td>
<td>545,433</td>
</tr>
</tbody>
</table>

9 Trade and Other Payables

Current
Trade Creditors & Accruals 655,410 564,986
Super Accruals Payable 81,309 -
PAYGW Payable 113,266 -
Unexpended Project Grants 209,354 367,029
Lease Liability - Payable Within 12 Months 127,825 -
Less Unexpired Charges (16,648) -
Employee Entitlements 466,512 701,785

1,637,028 1,633,800

The carrying amounts are considered to be a reasonable approximation of fair value.
WALGETT ABORIGINAL MEDICAL SERVICE LIMITED
78 014 990 451

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2018

10 Borrowings

<table>
<thead>
<tr>
<th>Current</th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash at Bank - Westpac Bank Walgett Accounts</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Westpac Visa</td>
<td>2,160</td>
<td>-</td>
</tr>
<tr>
<td>Visa Card</td>
<td>436</td>
<td>4,606</td>
</tr>
<tr>
<td>Visa Card - CEO</td>
<td>329</td>
<td>806</td>
</tr>
<tr>
<td>Visa Card - Chairperson</td>
<td>-</td>
<td>127</td>
</tr>
<tr>
<td>Total current borrowings</td>
<td>2,925</td>
<td>5,539</td>
</tr>
</tbody>
</table>

| Lease Liability - Payable Within 12 Months | 127,825 | - |
| Less Unexpired Charges | (16,648) | - |
| Total current borrowings | 114,102 | 5,539 |

| Non-Current | 2018 | 2017 |
| Members Shares | 340 | 340 |

Total borrowings

<table>
<thead>
<tr>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>6</td>
<td>114,442</td>
</tr>
</tbody>
</table>

11 Provisions

| Lease Liability - Payable Later Than 12 Months | 258,012 | - |
| Less Unexpired Charges | (15,542) | - |
| Total provisions | 242,470 | - |

Analysis of Total Provisions

| Non-current | 242,470 | - |

12 Retained Earnings

| Retained earnings at the beginning of the financial year | 15,777,136 | 14,952,062 |
| Net profit attributable to members of the company | 543,349 | 825,074 |
| Retained earnings at the end of the financial year | 16,320,485 | 15,777,136 |
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2018

13 Cash Flow Information

Reconciliation of result for the year to cashflows from operating activities.

Reconciliation of net income to net cash provided by operating activities:

<table>
<thead>
<tr>
<th></th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Profit after income tax</td>
<td>543,349</td>
<td>825,074</td>
</tr>
<tr>
<td>Cash flows excluded from profit attributable to operating activities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-cash flows in profit</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Depreciation</td>
<td>601,473</td>
<td>446,162</td>
</tr>
<tr>
<td>Changes in assets and liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Increase) Decrease in receivables</td>
<td>72,359</td>
<td>42,073</td>
</tr>
<tr>
<td>Increase (Decrease) in trade creditors</td>
<td>284,999</td>
<td>215,195</td>
</tr>
<tr>
<td>Increase (Decrease) in GST payable</td>
<td>(76,366)</td>
<td>(24,021)</td>
</tr>
<tr>
<td>Increase (Decrease) in unexpended project grants</td>
<td>(170,552)</td>
<td>290,658</td>
</tr>
<tr>
<td>Increase (Decrease) in rental bonds</td>
<td>-</td>
<td>1,000</td>
</tr>
<tr>
<td>Increase (Decrease) in accrued leave provision</td>
<td>(235,273)</td>
<td>(49,059)</td>
</tr>
<tr>
<td>Increase/(Decrease) in subscriptions in advance</td>
<td>25,000</td>
<td>(25,000)</td>
</tr>
<tr>
<td>Increase/(Decrease) in provision for residual value - lease vehicles</td>
<td>-</td>
<td>(28,909)</td>
</tr>
<tr>
<td></td>
<td>1,044,989</td>
<td>1,693,173</td>
</tr>
</tbody>
</table>

14 Statutory Information

Walgett Aboriginal Medical Service Limited

The principal place of business is:

37 Pitt Street, Walgett NSW 2832
15 Capital Commitments

Walgett Aboriginal Medical Service Limited has committed a total $5,000,000 to the construction of facilities on the old shopfront site at 37 Wee Waa Street Walgett. This project is expected to be completed by October 2019. The project is designed to house 1) exercise therapy, 2) programs for young children and early childhood, 3) additional consulting rooms and 4) conference, training and community programs.
WALGETT ABORIGINAL MEDICAL SERVICE LIMITED
78 014 990 451

DIRECTORS' DECLARATION

The directors of the company declare that:

1. The financial statements and notes, as set out on pages 1 to 21, for the year ended 30 June 2018 are in accordance with the Corporations Act 2001 and:

   (a) comply with Accounting Standards, which, as stated in basis of preparation Note 1 to the financial statements, constitutes explicit and unreserved compliance with International Financial Reporting Standards (IFRS); and

   (b) give a true and fair view of the financial position and performance of the company.

2. In the directors' opinion, there are reasonable grounds to believe that the company will be able to pay its debts as and when they become due and payable.

This declaration is made in accordance with a resolution of the Board of Directors.

Director: __________________________

Willem Kennedy

Dated this 15th day of November, 2018
INDEPENDENT AUDITOR’S REPORT
TO THE MEMBERS OF WALGETT ABORIGINAL MEDICAL SERVICE LIMITED
78 014 990 451


Opinion

We have audited the financial report of Walgett Aboriginal Medical Service Limited, (the company) which comprises the statement of financial position as at 30 June 2018 and the statement of profit or loss and other comprehensive income, statement of changes in equity and statement of cash flows and cash flow statement for the year then ended, and notes to the financial statements, including a summary of significant accounting policies and the directors' declaration.

In our opinion, the accompanying financial report of the company is in accordance with the Corporations Act 2001, including:

(i) giving a true and fair view of the company's financial position as at 30 June 2018 and of its financial performance for the year ended; and

(ii) complying with Australian Accounting Standards and the Corporations Regulations 2001.

Basis for Opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Report section of our report. We are independent of the company in accordance with the auditor independence requirements of the Corporations Act 2001 and the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 Code of Ethics for Professional Accountants (the code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the code.

We confirm that the independence declaration required by the Corporations Act 2001, which has been given to the directors of the company, would be in the same terms if given to the directors as at the time of this auditors' report.

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

Responsibilities of Directors' for the Financial Report

The directors of the company are responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards and the Corporations Act 2001 and for such internal control as the directors determine is necessary to enable the preparation of the financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error.

In preparing the financial report, the directors are responsible for assessing the company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the directors either intend to liquidate the company or to cease operations, or have no realistic alternative but to do so.
INDEPENDENT AUDITOR’S REPORT
TO THE MEMBERS OF WALGETT ABORIGINAL MEDICAL SERVICE LIMITED
78 014 990 451

Auditors’ Responsibility for the Audit of the Financial Report

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

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

- identify and assess the risks of material misstatement of the financial report, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the company's internal control.

- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the directors.

- Conclude on the appropriateness of the directors' use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the company's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditors' report to the related disclosures in the financial report or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditors' report. However, future events or conditions may cause the company to cease to continue as a going concern.

- Evaluate the overall presentation, structure and content of the financial report, including the disclosures, and whether the financial report represents the underlying transactions and events in a manner that achieves fair presentation.

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

We also provide the directors with a statement that we have complied with relevant ethical requirements regarding independence, and to communicate with them all relationships and other matters that may reasonably be thought to bear on our independence, and where applicable, related safeguards.

From the matters communicated with the directors, we determine those matters that were of most significance in the audit of the financial report of the current period and are therefore the key audit matters. We describe these matters in our auditors’ report unless law or regulation preclude public disclosure about the matter or when, in extremely rare circumstances, we determine that a matter should not be communicated in our report because the adverse consequences of doing so would reasonably be expected to outweigh the public interest benefits of such communication.
INDEPENDENT AUDITOR’S REPORT
TO THE MEMBERS OF WALGETT ABORIGINAL MEDICAL SERVICE LIMITED
78 014 890 481

Name of Firm: Ryan and Rankmore
Chartered Accountants

Name of Partner: Kevin L Rankmore

Address: 1 Swift Street, Wellington NSW 2820

Dated this 15th day of November, 2018
### PROFIT AND LOSS STATEMENT
FOR THE YEAR ENDED 30 JUNE 2018

<table>
<thead>
<tr>
<th>INCOME</th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unexpended Grants - Brought Forward</td>
<td>373,437</td>
<td>76,371</td>
</tr>
<tr>
<td>Interest Received</td>
<td>137,008</td>
<td>103,099</td>
</tr>
<tr>
<td>Department of Health</td>
<td>6,066,119</td>
<td>5,471,219</td>
</tr>
<tr>
<td>NSW Health Department</td>
<td>991,601</td>
<td>940,600</td>
</tr>
<tr>
<td>Dept of DPM &amp; C, D &amp; A &amp; SEWB</td>
<td>696,781</td>
<td>586,930</td>
</tr>
<tr>
<td>Rural Doctors Network</td>
<td>105,261</td>
<td>205,913</td>
</tr>
<tr>
<td>Rent Received</td>
<td>47,655</td>
<td>51,036</td>
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<tr>
<td>Dividends</td>
<td>863</td>
<td>660</td>
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<tr>
<td>DSS</td>
<td>114,851</td>
<td>90,701</td>
</tr>
<tr>
<td>Doctors Fees</td>
<td>1,230,539</td>
<td>1,368,527</td>
</tr>
<tr>
<td>Western NSW LHD</td>
<td>-</td>
<td>27,800</td>
</tr>
<tr>
<td>Recovered Expenses</td>
<td>49,152</td>
<td>70,886</td>
</tr>
<tr>
<td>Dental Fees Received</td>
<td>26,467</td>
<td>17,732</td>
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<tr>
<td>NSW RDN Admin</td>
<td>-</td>
<td>20,421</td>
</tr>
<tr>
<td>Donations</td>
<td>5,900</td>
<td>-</td>
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<tr>
<td>Fundraising Income</td>
<td>-</td>
<td>1,277</td>
</tr>
<tr>
<td>Sale of Motor Vehicles</td>
<td>66,040</td>
<td>30,909</td>
</tr>
<tr>
<td>Sundry Grants</td>
<td>7,000</td>
<td>20,909</td>
</tr>
<tr>
<td>Sundry Income</td>
<td>-</td>
<td>31,393</td>
</tr>
<tr>
<td>Insurance Recovery</td>
<td>6,676</td>
<td>-</td>
</tr>
<tr>
<td>Wage Subsidy</td>
<td>-</td>
<td>22,868</td>
</tr>
<tr>
<td><strong>Total Income</strong></td>
<td>9,925,350</td>
<td>9,139,251</td>
</tr>
</tbody>
</table>

The accompanying notes form part of these financial statements.
### PROFIT AND LOSS STATEMENT

**FOR THE YEAR ENDED 30 JUNE 2018**

<table>
<thead>
<tr>
<th></th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>EXPENSES</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accommodation/Meals and Travel</td>
<td>218,097</td>
<td>212,477</td>
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<tr>
<td>30 Year Promotions</td>
<td>9,729</td>
<td>-</td>
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<tr>
<td>Audit Fees</td>
<td>35,000</td>
<td>35,000</td>
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<td>Bank Charges</td>
<td>1,052</td>
<td>1,291</td>
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<tr>
<td>Administration &amp; Accounting</td>
<td>325,537</td>
<td>331,942</td>
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<tr>
<td>Catering/In House Events</td>
<td>2,215</td>
<td>-</td>
</tr>
<tr>
<td>Dental Supplies &amp; Equipment</td>
<td>15,853</td>
<td>-</td>
</tr>
<tr>
<td>Cleaning and Refuse Removal</td>
<td>27,996</td>
<td>25,332</td>
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<tr>
<td>Computer Costs</td>
<td>167,604</td>
<td>90,462</td>
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<tr>
<td>Consulting Fees</td>
<td>480,704</td>
<td>296,711</td>
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<tr>
<td>Consumables &amp; Sundries</td>
<td>29,369</td>
<td>3,914</td>
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<tr>
<td>Commission Paid</td>
<td>1,980</td>
<td>-</td>
</tr>
<tr>
<td>Communicare Annual Fees</td>
<td>37,147</td>
<td>48,674</td>
</tr>
<tr>
<td>Dental Supplies and Equipment</td>
<td>51,440</td>
<td>26,492</td>
</tr>
<tr>
<td>Depreciation</td>
<td>601,473</td>
<td>446,162</td>
</tr>
<tr>
<td>Directors Meeting Expenses</td>
<td>5,384</td>
<td>-</td>
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<tr>
<td>Donations</td>
<td>1,009</td>
<td>1,200</td>
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<tr>
<td>Equipment - Small</td>
<td>40,513</td>
<td>13,375</td>
</tr>
<tr>
<td>Education Materials</td>
<td>-</td>
<td>544</td>
</tr>
<tr>
<td>Electricity</td>
<td>138,248</td>
<td>104,034</td>
</tr>
<tr>
<td>Funeral Donations and Wreaths</td>
<td>4,485</td>
<td>7,122</td>
</tr>
<tr>
<td>Fuel &amp; Lubricants</td>
<td>82,141</td>
<td>66,866</td>
</tr>
<tr>
<td>Capital Purchases - Buildings, Office Furniture &amp; Equipment</td>
<td>325,767</td>
<td>332,681</td>
</tr>
<tr>
<td>Funding Amounts Recalled</td>
<td>12,598</td>
<td>14,146</td>
</tr>
<tr>
<td>Building Demolition &amp; Improvements</td>
<td>78,000</td>
<td>-</td>
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<tr>
<td>Hire of Venue and Equipment</td>
<td>5,548</td>
<td>297</td>
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<tr>
<td>GST Adjustment</td>
<td>114,928</td>
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<td>Insurance</td>
<td>172,612</td>
<td>61,741</td>
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<tr>
<td>Insurance/Workers Comp</td>
<td>-</td>
<td>40,325</td>
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<tr>
<td>Interest</td>
<td>54</td>
<td>-</td>
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<tr>
<td>Internet Costs</td>
<td>2,793</td>
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<tr>
<td>Leasing Charges</td>
<td>174,221</td>
<td>222,490</td>
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<tr>
<td>Legal Costs</td>
<td>108,450</td>
<td>182,666</td>
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<tr>
<td>Licences &amp; Permits</td>
<td>20,515</td>
<td>24,111</td>
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<tr>
<td>Locum Services</td>
<td>940,514</td>
<td>946,165</td>
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<tr>
<td>Medical Equipment and Supplies</td>
<td>72,939</td>
<td>42,409</td>
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<td>Motor Vehicle Expenses</td>
<td>62,282</td>
<td>80,004</td>
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<td>Office Supplies</td>
<td>25,790</td>
<td>10,332</td>
</tr>
<tr>
<td>Promotions and Advertising</td>
<td>29,237</td>
<td>37,866</td>
</tr>
</tbody>
</table>

The accompanying notes form part of these financial statements.
PROFIT AND LOSS STATEMENT
FOR THE YEAR ENDED 30 JUNE 2018

<table>
<thead>
<tr>
<th></th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Pest Control</td>
<td>7,776</td>
<td>7,773</td>
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<tr>
<td>Postage</td>
<td>4,139</td>
<td>3,443</td>
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<tr>
<td>Program Costs</td>
<td>21,700</td>
<td>72,659</td>
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<tr>
<td>Project Related Costs</td>
<td>1,876</td>
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<tr>
<td>Printing &amp; Stationery</td>
<td>15,930</td>
<td>28,233</td>
</tr>
<tr>
<td>Provision for Employee Entitlements</td>
<td>(179,303)</td>
<td>(49,059)</td>
</tr>
<tr>
<td>Rates</td>
<td>90,581</td>
<td>71,126</td>
</tr>
<tr>
<td>Rent</td>
<td>39,747</td>
<td>38,499</td>
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<tr>
<td>Retention Expenses</td>
<td>-</td>
<td>18,185</td>
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<tr>
<td>Repairs &amp; Maintenance - Buildings</td>
<td>194,517</td>
<td>52,805</td>
</tr>
<tr>
<td>Repairs &amp; Maintenance - Equipment</td>
<td>49,328</td>
<td>23,798</td>
</tr>
<tr>
<td>Landscaping &amp; Fencing</td>
<td>16,899</td>
<td>-</td>
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<tr>
<td>Security</td>
<td>24,387</td>
<td>24,638</td>
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<tr>
<td>Specialists</td>
<td>458,793</td>
<td>451,473</td>
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<tr>
<td>Staff Amenities</td>
<td>10,913</td>
<td>6,050</td>
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<tr>
<td>Staff Recruitment</td>
<td>152,985</td>
<td>67,592</td>
</tr>
<tr>
<td>Staff Training and Registration Costs</td>
<td>65,037</td>
<td>133,694</td>
</tr>
<tr>
<td>Staff Gifts &amp; Appreciation</td>
<td>1,954</td>
<td>-</td>
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<tr>
<td>Subscriptions</td>
<td>38,630</td>
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<tr>
<td>Sundry Expenses</td>
<td>2,104</td>
<td>-</td>
</tr>
<tr>
<td>Superannuation</td>
<td>339,251</td>
<td>270,350</td>
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<tr>
<td>Telephone &amp; ISDN</td>
<td>108,122</td>
<td>104,344</td>
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<tr>
<td>Uniforms</td>
<td>5,510</td>
<td>7,738</td>
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<tr>
<td>Salaries and Wages Reimbursed</td>
<td>183,471</td>
<td>137,750</td>
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<tr>
<td>Salaries and Wages</td>
<td>3,403,590</td>
<td>3,061,695</td>
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<tr>
<td>Unexpended Grants - Carried Forward</td>
<td>209,353</td>
<td>367,028</td>
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<tr>
<td></td>
<td>9,690,514</td>
<td>8,646,858</td>
</tr>
<tr>
<td>Profit before income tax</td>
<td>234,836</td>
<td>492,393</td>
</tr>
</tbody>
</table>

The accompanying notes form part of these financial statements.
### PROFIT AND LOSS STATEMENT
FOR THE YEAR ENDED 30 JUNE 2018

<table>
<thead>
<tr>
<th></th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Profit after capital items</td>
<td>234,836</td>
<td>492,393</td>
</tr>
<tr>
<td>Capital items purchased</td>
<td>(308,513)</td>
<td>(332,681)</td>
</tr>
<tr>
<td><strong>Profit before capital items</strong></td>
<td>543,349</td>
<td>825,074</td>
</tr>
<tr>
<td>Retained earnings at the beginning of the financial year</td>
<td>15,777,136</td>
<td>14,952,062</td>
</tr>
<tr>
<td><strong>Total available for appropriation</strong></td>
<td>16,320,485</td>
<td>15,777,136</td>
</tr>
<tr>
<td>Retained earnings at the end of the financial year</td>
<td>16,320,485</td>
<td>15,777,136</td>
</tr>
</tbody>
</table>

The accompanying notes form part of these financial statements.
FINANCE REPORT
JULY 2017 TO JUNE 2018

Introduction

The Finance Department’s main duty is to maintain the financial records of the organisation, prepare the accounts for audit and provide financial reporting to the funding bodies.

I would like to acknowledge the following organisations for their ongoing funding:

- The Australian Government Department of Health
- The Australian Government Department of the Prime Minister and Cabinet
- The Australian Government Department of Social Services
- The NSW Ministry of Health
- The Western Local Health District
- NSW Rural Doctors Network

Staffing

Current Personnel:

- Mathew Baker   Manager Finance
- Naomi Barrett   Team Leader Finance and Administration
- Mellissa Timmins  Administration Assistant

Past Personnel:

- Bernie Buncle   Interim Finance Manager
- Meagan Dennis  Administration Assistant
- Kristy Fernando  Administration Assistant

Summary

WAMS finished the year with a total funding and other revenues of $9.8 million including $1.2 million in Medicare. WAMS has spent over $600,000 on new capital equipment, dental equipment, renovations of WAMS facilities and accommodations and updating service vehicles.

During the year WAMS undertook an extensive and comprehensive review of operations and accounting carried out by the firm Korda Mentha. The final report from this review comprised a wide ranging series of recommendations for improving our policies and procedures which have either been implemented or are in the process of being implemented. We have committed to this process as our commitment to improving the Finance Departments quality of service.

It has been a challenging year for the Finance Department with the departure of Mr Andrew Denison at the end of the previous year, it was almost 3 months before Mr Bernie Buncle stepped in as an interim manager. There have been several changes in the requirements of
financial reporting with the above mentioned Government Departments and the Australian Taxation Office.

Conclusion

I began at WAMS in the last week of June 2018 and it has been a fairly steep learning curve. I come from an accounting background with over 15 years of audit experience.

I would like to thank the CEO and the Directors for this opportunity and look forward to many years with WAMS and utilising my knowledge and experience for the benefit WAMS and the Walgett community.

It would be remiss of me to not acknowledge the support and advice of the CEO and Naomi Barrett in my settling in and that of Mrs. Mellisa Timmins in our administration office. Thank you.

Regards,

MATHEW BAKER
FINANCE MANAGER
Introduction

This year has seen a re-design of the operations of the organisation based on internal and external elements that are mandatory for WAMS to sustain the high level of quality care and best practice for our clients, staff, and the community. To review and update compliance registers, financial management, policies and procedures, employee contracts and entitlements has been a massive undertaking and will continue into the next reporting period.

As a matter of routine for every three years, WAMS review their Strategic Plan. A Facilitator has been engaged to commence consultation with the WAMS Directors and senior personnel to reflect on the past three years of operation, identify achievements, recognise where improvements are required, and forecast the overall operations for the next three years.

Winds of Change (once more)

Commonwealth Health continue to alter both the funding requirements and also the direction in which ACCHO’s are to formally report. For the NSW membership, the (NSW) Aboriginal Health and Medical Research Council have advocated for a variation into such arrangements.

Aerial services were an important topic once more, due to the notice that the chartered aerial services from Dubbo to Walgett and return was ceasing at the end of January 2018 (notice was given approximately fourteen days before this occurred). WAMS has engaged the STRATOS Group to August 2017. Further discussion is occurring at the end of this reporting period to determine the continuing engagement of a charter service from Dubbo.

I reluctantly resigned as Chairperson of the Walgett Gamilaraay Aboriginal Community Working Party (WGACWP). This decision was not taken lightly; and was more of a public statement to voice both my (and our member services) concerns regarding the lack of support given to our Aboriginal organisations, both administratively and constructively, within the Murdi Paaki region.

Quality

Continuing Quality Improvement is integral to the operations of WAMS. Every three years the review on quality also known as best practice, offers an opportunity for the governance and operational arms to demonstrate they are adhering to the legislations, work, health and safety regulations and managing compliance and risk. I wish to formally commend Jacqui Lee for taking the role of Quality and Compliance Officer which also includes Communicare reporting and Medicare retention.
Quality in Operation

**White Ribbon Australia**

WAMS has continued to undertake the steps towards applying for accreditation. It was with extreme pleasure that in the first quarter of this reporting period, we were formally advised that this process was achieved. WAMS is now the second ACCHO in NSW to be accredited under WRA. To maintain this cycle it is integral to compile a written running report on all matters of business that are focussed on the identification, prevention and promotion of the definition of WRA activities.

I sincerely thank Penny Maggan-Jones and members of Thiyama-li who worked with WAMS to participate in the local White Ribbon event held in November 2017. At this local event, we welcomed WRA Ambassador, Mr Kevin Saul to Walgett. Mr Saul gave a personal oration on the impact of violence towards a female, whether it be physical, social or emotional. The closing pledge made by the men present was moving, with some members of the crowd displaying strong emotions during the affirmation.

**Representing WAMS**

I believe positive advocacy contributes to spirited debates with (hopefully) a fruitful outcome for the business. To understand the deficiencies that our community experiences due to is geographical location in comparison to the ‘city cousins’, one can only appreciate real-life situations that we cite.

For that reason, my continuing representation and advocating for WAMS, profiling the good work achieved, the difficulties encountered, as well as portraying the wonderful social character of Walgett, our business has reaped the rewards of being a reputable and sustainable enterprise. I am privileged to be a member of the following Boards and Committees;

<table>
<thead>
<tr>
<th>National Aboriginal Community Controlled Health Organisation</th>
<th>Aboriginal Health and Medical Research Council of NSW</th>
<th>NSW Rural Doctors Network</th>
<th>NSW Child and Family Health Advisory Council</th>
</tr>
</thead>
<tbody>
<tr>
<td>Western Primary Health Network - member of Aboriginal Advisory Committee</td>
<td>Bila Muui Aboriginal Health Service Incorporated</td>
<td>Murdi Paaki Regional Assembly</td>
<td>Walgett Gamilaraay Aboriginal Community Working Party</td>
</tr>
</tbody>
</table>

Quality in Culture

WAMS recognise their identity by conducting their practice as an Aboriginal business each and every day. Staff are invited by government and non-government agencies to present WAMS Aboriginal floor (snake) puzzle depicting both the corporate and cultural history of WAMS and of Walgett. Visitors also receive such information and are shown the cultural wall display depicting the similar timelines but with local flavour.

The annual event that we know as NAIDOC had the theme of - “Because Of Her We Can” at two separate events. A community event was held jointly with Thiyama-li Family Violence Prevention Service. Local students from St Joseph’s Dancers performed. Three women spoke about female inspirations and family influences and two students from St Joseph’s School spoke. Recognition was afforded to the WAMS Community Gardener for her role as a grand-parent and her personal development by her granddaughter.

For a WAMS event, staff first met at the ‘Tracker Walford Walkway’ at which time the WAMS Chairperson gave a cultural and historical overview of the significance of the area. After this presentation, staff then met on the riverbank where they had the...
opportunities for personal interactions, impart local knowledge, reflect on their own culture, fish, play board games, or enjoy the wildlife.

**Collegiate Working Arrangements**

Working relationships whether they be formal or informal, from the public or private sectors, are an integral element of WAMS role in ensuring our clients receive comprehensive health care. Such arrangements are held in esteem and highly valued.

Although I resigned from the local Community Working Party, the local collegiate relationships our Aboriginal businesses have formed during the Working Party days have continued to prosper and thrive. As a collective we have identified the social issues of our community, designed solutions and lobbied persons both inside and outside the Government to address them.

The Dharriwaa Elders Group (DEG) has led the way on our behalf to partner with the University of NSW - Yuwaya Ngarra-li (“vision”). WAMS was actively involved in designing the “Action Plan for Children and Young People” which came from extensive local consultations and the Walgett Youth Justice Forum in March 2018. This Forum identified the issues, provided independent evidence to validate our local concerns, and initiated consultation with the stakeholders who have an integral part to play in the economic and social development of Walgett.

I was privileged to have been invited as the former WGACWP Chairperson to address the Forum and contribute to the follow-up meetings. The resulting Action Plan was officially launched in June. The significance of this locally-designed Action Plan with its community-led solutions cannot be underestimated and I look forward to continuing WAMS’ commitment to implement the Action Plan alongside other Walgett services.

WAMS and Family Planning of New South Wales (FPNSW) have progressed their MoU with the commencement of their strategies to commence a women’s screening program and also offering professional development for all clinical personnel. Whilst initial discussions occurred last financial year, staff professional development was held in April along with community consultation to garner views on consultation processes to conduct screenings.

The renowned Royal Far West service based at Manly, conducted a country charity Bike Ride in late April. The towns of Brewarrina, Bourke and Walgett were visited as part of their outback trek. Staff from BAHSL and WAMS attended the evening functions and networked with the many cyclists who participated.

**Children in Out of Home Care**

Personnel from WAMS, FACS and Western Local Health District continue to work together on the care and treatment of children who are at risk along with their families. Additional support is offered to the cohort whom are likely to become at risk in the future, thereby providing preventative measures to reduce the likelihood of this to occur.

**Integrated Care Strategy program**

The partnership with personnel from WAMS and the Western Local Health District to provide strategies with specific outcomes for a child’s first 2000 days of life as well as network with the Out of Home Care program where relevant.
Healthy for Life
With the departure of the previous regional Co-ordinator, a warm welcome was extended to Mr Wayne Beddall in the second half of this reporting period. Wayne’s previous experience working in an ACCHO, located on the western side of the nation, has created a unique experience for the regional programs across the three ACCHO’s of Brewarrina, Bourke and Walgett and also the rehabilitation facility at Orana Haven. The added expansion of two health and fitness programs, the NSW Health Challenge and ‘Too Deadly for Diabetes’ has shown a marked increase in client’s awareness of their daily food intake and its impact on either stored fat or fuel for energy.

The first regional staff meeting was hosted by Brewarrina. Such regional meetings provide an opportunity for staff to network, share local experiences, learn from each other and develop a structured plan of activity for individual services as well as a regional collective. There was time on our meeting schedule for a cultural tour of the historic fisheries and weir, a structure that is known to be dated over 60,000 years and a testimony to ingenuity, science and construction before man-made machines.

Health Checks – referral pathways
Annual Health Checks are a scheduled program from infants to the elders. The Checks are also seen as a social gathering, non-threatening environment and confidential location.

WAMS are very grateful to the visiting allied and specialist personnel for their medical ethos and social beliefs to endure the long distances travelled to our town. They offer local referral pathways for our chronic disease clients.

When such pathways cannot be provided locally, transport is offered for patients to attend appointments at larger regional centres a minimum return journey of some six hours in total. Despite the visiting services, WAMS continue to lobby for personnel to reside locally and work five days per week in the fields of Occupational Therapy and Speech Therapy.

(NSW) Aboriginal Health and Medical Research Council (AHMRC)

For our state affiliate, there have been challenging and productive times occurring. Debate and negotiations continues for the role of the AHMRC within their national ACCHO Secretariat, National Aboriginal Community Controlled Health Organisation (NACCHO). I commend the AHMRC on their view to remain independent while at the same time network with other state and Territory affiliates and our national voice. However, I do believe the decisions are being made for us, not by us. The sector will be compelled to adapt if they wish to remain operational.

The Aboriginal Health College continued the review into the courses they offer to both member services and agencies who have requested staff enrolment as well. It is envisaged that the outcome of the review will have a positive result for our member’s personnel to maintain, increase, and revise the individual professional development for staff of all disciplines.

Since the resignation of the former CEO, the AHMRC have engaged senior personnel from member services to lead the operations of the business until such time a permanent incumbent is announced. Ms Kris Garrett (Coffs Harbour) and Mr Stephen Blunden (Casino) have held the ‘Acting’ roles during this reporting period. At the members meeting of October 2017, I ceased my time as AHMRC Chairperson. I congratulate Mr Scott Monaghan, CEO of Bulgarr Ngaru ACCHO at Grafton, who has taken the reins in this role.
Bila Muuji Aboriginal Health Service Incorporate (Bila Muuji)

Attached is a twelve month summary of Bila Muuji’s work for the members. Members span from ACCHO’s based at Bourke, Brewarrina, Coonamble, Dareton, Dubbo, Forbes, Maari Ma, Orange, Walgett, Wellington as well as Orana Haven Rehabilitation Centre located outside of Brewarrina.

While two of the membership have sought to become independent of the consortia (Maari Ma and Wellington), the regional consortia has developed a range of networks. They have partnered with agencies and facilitated workshops that are relevant to the benefits of the members.

Community Events/Health Promotion Programs

Staff advocacy, involvement and participation in community events or meetings, provide a focus for them to be aware of social issues and contribute to discussions that affect our town and our residents. Listed below are the local meetings held each year which staff attempt to attend when they have the time to do so.

<table>
<thead>
<tr>
<th>AECG and SRG</th>
<th>Community Drug and Alcohol Action Team</th>
<th>School Awards</th>
<th>Walgett Show</th>
</tr>
</thead>
<tbody>
<tr>
<td>St Joseph’s Primary School</td>
<td>Local High and Primary Schools</td>
<td>Community Drug and Alcohol Team</td>
<td>AHMRC College training</td>
</tr>
<tr>
<td>Walgett Shire Council NAIDOC</td>
<td>Walgett Shire Council Reconciliation</td>
<td>White Ribbon Australia</td>
<td>Walgett Shire Council Sorry Day</td>
</tr>
<tr>
<td>Bila Muuji members</td>
<td>ANZAC Day</td>
<td>Domestic Violence</td>
<td>Local Interagency</td>
</tr>
</tbody>
</table>

Mrs Lyn Rummery continues to take the WAMS lead as the contact for all local schools who require our staff to participate in events or respond to sponsorship requests.

A Walgett local, Dale Wright, led an entourage of cyclists from the costal township of Wollongong to Walgett and beyond. WAMS hosted a breakfast event at which Dale and other spoke on the importance of healthy eating and physical fitness. The WAMS Dentist, a fellow cyclists, accompanied them out of Walgett’s town limits to share the experience.

WAMS have a Facebook account which is being designed to capture the daily updates of the organisation as well as providing information for the month ahead. Such social media shall expedite the activity and whereabouts of staff out and about in the community. This promotion of businesses along with their Profile of Services, Newsletter, WAMS Packages (designed for visitors), Pictorials, Messages on Hold, contribution to the local newspaper and the local Council weekly community email is one of many ways that WAMS engage with the community each and every day.

<table>
<thead>
<tr>
<th>Children’s Day</th>
<th>Youth Week</th>
<th>Meals on Wheels</th>
<th>Walgett Show</th>
<th>ANZAC Day</th>
<th>Breakfast Club</th>
</tr>
</thead>
<tbody>
<tr>
<td>Seniors Week</td>
<td>Dharriwaa Elders Group</td>
<td>Biggest Morning Tea</td>
<td>Harmony Day</td>
<td>NAIDOC celebrations</td>
<td>Xmas Raffle</td>
</tr>
<tr>
<td>Bitumen to Bulldust Festival</td>
<td>Health Checks (High School)</td>
<td>Women’s Health Checks</td>
<td>Children’s Health Checks</td>
<td>Men’s Health Checks</td>
<td>International Women’s Day</td>
</tr>
</tbody>
</table>
Walgett Aboriginal Medical Service Limited

ANNUAL REPORT 2017/2018

Staff – Recruitment

Whilst new staff are always welcome and familiar faces are fondly farewelled, this period of time was very extraordinary with the departure of senior personnel.

Goodbye and best wishes to;

<table>
<thead>
<tr>
<th>Clinic Manager, Ms Jessie Richardson</th>
<th>GP Registrars, Manori and Thaya</th>
<th>Manager, Brewarrina Aboriginal Health Service, Mrs Hellen Mannix</th>
<th>Continuing Quality Improvement, Coordinating Regional Healthy for Life program, Ms Diana Dalley</th>
</tr>
</thead>
</table>

The welcome mat was extended to;

<table>
<thead>
<tr>
<th>Clinic Manager, Ms Louise Jefferies</th>
<th>Manager, Brewarrina Aboriginal Health Service, Ms Katrina Ward</th>
<th>Doctor, Paige Darlington</th>
</tr>
</thead>
<tbody>
<tr>
<td>Human Resources Manager, Ms Karen Mullally</td>
<td>Financial operations, Mr Bernie Buncle</td>
<td>Bila Muuji Upper Sector Consortium Healthy for Life Coordinator, Wayne Beddall</td>
</tr>
</tbody>
</table>

Additionally, I extend my sincere appreciation to senior personnel who have stepped in when positions were vacant. They undertook additional tasks as well as their own roles to ensure WAMS continued to operate each day both within the business and also providing services to the clients and the community.

Staff – Recognition

It is awe-inspiring to affirm staff whom have reached a significant period of time working at our organisation. Their commitment and dedication should be formally recognised for the care and consideration they not only apply within their own work practices, their duty of care to client and community members but also their respectful behaviours towards their colleagues. WAMS celebrate the longevity of the following people employed in our business.

Five years;

| Lyn Rummery | Jacqui Burke | Sarah Dowse | Whitney Skuthorpe | Bernadette Hertslet | Kerry Kennedy |

Ten years;

| Naomi Barrett | Kayla Thurston |

Staff – students

Locally

WAMS work with the (Secondary) Walgett Community College. Negotiations occurred for a student to participate in a work experience program commencing one day per week in March, based at the Dental Clinic.

The recently established ‘Literacy for Life ‘student program’ has resulted in WAMS hosting teacher and student visits to specific aspects of our business. Mrs Lyn Rummery
provided the social support to WAMS personnel in order for them to be prepared to ‘face the camera’ and speak about their personal lives and the reason for their choice of work at WAMS. This program will be nationally promoted

*Western Sydney University (WSU)*

WAMS are very grateful to the universities who nominate our rural communities for students to experience rural life, work in a health setting and be afforded country hospitality. They work across all aspects of the organisations (dental, medical, community garden, breakfast program, elder’s visits, Meals on Wheels, etc) as well as travelling to outlying communities and delivering outreach health programs. Before the end of their tenure, the students present an in-service to staff, as well as leaving behind a presentation of their findings of their work conducted as part of their assignment

*University of the Department of Rural Health*

Arrangements are being made for Allied health students to conduct placements with our business. WAMS are very grateful for the University to schedule Allied health students at the same time as the Health Checks are conducted.

**Training (and Fun)**

WAMS source professional development as a matter of course for staff so they may enhance and improve their work performance and sustain their skills and qualifications.

Locally, WAMS are looking forward to working with TAFE to customise professional development for their respective staff. Thank you to Walgett local, Ms Gail Simpson from TAFE for personalising the accredited training courses as identified by staff for enhancing and improving their capacity to be proficient in their work roles.

Across the state, WAMS personnel are enrolled in various levels of accredited training. For Aboriginal Heath Workers, they must become accredited as an Aboriginal Health Practitioner according to the funding requirements and also legislation.

**Closing Comments**

Several of the social determinants of health that we know it to be are employment, environment and suitable housing. WAMS work collegiately with related agencies to advocate for local-based employment, appropriate housing according to climatic and environmental factors. Such a mixture cannot be isolated when addressing the social and mental well-being of an individual, a family and the entire community.

Our focus for the forthcoming period is finalising the design of the corner property to incorporate many staff whom conduct chronic diseases and children’s services programs along with areas for a Board meeting room, staff meeting area as well as an expansion of the health and fitness room.

The growth of WAMS is exciting, every year we have expanded. This is a testament to the vision of the Directors and the commitment of the staff. I am privileged to work with a collegiate group of people who have the united focus of delivering primary health care services with heart, health, commitment and dedication. I thank each and every one of you.

**CHRISTINE CORBY, OAM**

**CHIEF EXECUTIVE OFFICER**
**BREWARRINA REPORT**  
**JULY 2017 TO JUNE 2018**

**Introduction**

WAMS continues to maintain the arrangement with DoH to enable the community of Brewarrina to access to health care by continuing to manage the operations of the Brewarrina Aboriginal Health Service Limited (BAHSL). In February the excellence in quality of service provided by the BAHSL team was recognised through the AGPAL Quality in Practice awarding Accreditation to the practice clinic for a further three years until the next review in 2021. The team strive toward improving their skills and qualifications to provide professional health care services that are welcoming and culturally appropriate for our clientele.

**Visiting services**

- Rotating General Practitioner clinic from WAMS Twice weekly
- Dr Karin Jodlowski-Tan fortnightly 2 days a week. (Ceased June 2018)
- Drug and Alcohol fortnightly
- Sexual Health Tuesday morning – from LHD
- SEWB Weekly - from Upper Sector Bila Muuji
- Podiatry Fortnightly
- Ultra Sound Clinic Monthly
- ENT Specialist Every 3 - 4 Months
- Brien Holden Vision and Outback Eye Team

**Services Offered:**

<table>
<thead>
<tr>
<th>Wound care</th>
<th>Clinical services as they present</th>
<th>Chronic Disease Management</th>
</tr>
</thead>
<tbody>
<tr>
<td>Follow up referred clients</td>
<td>Medications review &amp; monitoring</td>
<td>Local Medical Transport</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Advocate and coordinate health care &amp; referrals</th>
<th>General medical duties</th>
<th>Outreach clinic Orana Haven</th>
</tr>
</thead>
<tbody>
<tr>
<td>Visiting Health Clinics</td>
<td>Health Assessments</td>
<td>Home visits</td>
</tr>
<tr>
<td>Case management and review with service providers</td>
<td>Immunisation clinics</td>
<td>GP Consultations</td>
</tr>
</tbody>
</table>

**Healthy for Life Program**

- Health Check Clinics
  - Weilmoringle
  - Orana Haven Clients
  - Community members
  - St Patrick’s School Gainmarra-Birralee Pre School
  - Clontarf
  - Currawah Education Centre

- Dietician and Physio/exercise program - Monday and Tuesday
- Too Deadly for Diabetes Program
- Influenza vaccination Clinics
  - BAMS Staff
  - Brewarrina Central School
  - Community members

**Regional Meetings:**

<table>
<thead>
<tr>
<th>Regional Eye Health Partnership</th>
<th>RDN Stakeholder Outreach</th>
<th>SEWB Advisory Committee</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bila Muuji Aboriginal Health Service Incorporated</td>
<td>Suicide Prevention Advisory Group “Wallan Bulla”</td>
<td></td>
</tr>
</tbody>
</table>
Local Representation:

<table>
<thead>
<tr>
<th>Interagency Health Meetings</th>
<th>Ngemba Community Working Party</th>
<th>Suicide Prevention Network Initiative</th>
</tr>
</thead>
<tbody>
<tr>
<td>Integrated Care Program</td>
<td>Literacy for Life Graduation</td>
<td>Naidoc Week Celebrations</td>
</tr>
<tr>
<td>Indigenous Games - NAIDOC</td>
<td>ANZAC March</td>
<td>Remembrance Day</td>
</tr>
</tbody>
</table>

Royal Far West – Ride for Country Kids

WAMS

Senior Management Meetings | CQI Meetings | Healthy 4 Life Regional Meetings

Conferences / Forums Attended

AHMRC Cancer Forum | Immunisation Forum | Rural Doctors. Network Forum

Health Promotion

<table>
<thead>
<tr>
<th>Health Checks</th>
<th>White Ribbon Day</th>
<th>Jeans for Genes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pink Ribbon</td>
<td>Child Protection and Awareness</td>
<td>Footy Colours Day</td>
</tr>
<tr>
<td>Breast Screen</td>
<td>Smoking awareness</td>
<td>School Community Garden</td>
</tr>
<tr>
<td>Youth week Pamper day</td>
<td>Breast Screen</td>
<td>Nicotine Dependence</td>
</tr>
<tr>
<td>His Art workshop</td>
<td>Hepatitis Awareness day</td>
<td>Red Dust Healing – Somebody’s Someone</td>
</tr>
</tbody>
</table>

Staff In-services

<table>
<thead>
<tr>
<th>NDIS Information</th>
<th>Managing Unsatisfactory Behaviour</th>
<th>PENCAT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marrabinya Program</td>
<td>Primary Health Eye Care</td>
<td>My Health Record</td>
</tr>
<tr>
<td>Fire Drill</td>
<td>Medicare Claiming</td>
<td></td>
</tr>
</tbody>
</table>

Training

<table>
<thead>
<tr>
<th>Snr First Aid / CPR</th>
<th>AMHFA</th>
<th>Deadly Thinking</th>
</tr>
</thead>
<tbody>
<tr>
<td>WHS</td>
<td>Diabetes and the Eye</td>
<td>Hepatitis B &amp; C</td>
</tr>
<tr>
<td>Cultural Awareness</td>
<td>Communicare – Super User</td>
<td>PENCAT</td>
</tr>
<tr>
<td>Managing Stress in the Workplace</td>
<td>Nicotine dependence &amp; Smoking Cessation</td>
<td>“Doing it Right” Sexual Health</td>
</tr>
</tbody>
</table>

Staff

- Katrina Ward: Manager – Commenced December 2017
- Bernadette Hertslet: Senior Clinic Nurse
- Michaela Skuthorpe: AHP – Healthy for Life
- Dee-Anna Nixon: Endorsed Enrolled Nurse Healthy for Life
- Bianca Cochrane-Owers: Trainee Aboriginal Health Practitioner
- Nicole Bennett: Senior Receptionist
- Betty Nicholls: Outreach worker / Administration support
- Chris Boney: Gardener / Maintenance
- Mercedes Kennedy: RN Healthy f4 Life (commenced January 2018)
- Kathy Fisher: Cleaner (commenced June 2018)
- Hellen Mannix: Manager – (Resigned September 2017)
- Julie Gordon: AHP Clinic and Eye Team (left August 2017)
- Christopher McHughes: Trainee SEWB Worker (left June 2018)
- Michelle Tattersall: Cleaner (left May 2018)
Staff Profiles
Katrina Ward: Manager / RN
Katrina is responsible for the daily management of BAHSL and providing clinical support for staff and visiting service providers. Katrina reports directly to the WAMS CEO.

Bernadette Hertslet: Endorsed Enrolled Nurse Clinic & Infection Control Officer
Bernie is the senior clinic nurse who coordinates GP clinics, daily clinics, school clinics and home visits. She is responsible for ordering medical supplies and relevant resources for clinic.

Dee-Anna Nixon: EEN H4L & First Aide Officer
Dee works in collaboration with the H4L R/N for the community assisting with Health Checks, Chronic Disease, Home visits and required KPI targets.

Michaela Skuthorpe: AHP H4L & Smoking Cessation Consultant
Michaela’s role is to assist the H4L EEN in linking community members with the services offered from BAHSL. She also plays a vital role in providing health promotion activities for BAHSL.

Mercedes Kennedy: RN Healthy for 4 Life & Immunisation Officer
Mercedes works in collaboration with the H4L EEN for the community in providing health checks, chronic disease management to community members.

Bianca Cochrane-Owers: Trainee AHP & WHS Officer
Bianca provides assistance to the clinic team with GP clinics, daily clinics, school clinics and home visits. She is studying her Certificate 4 in Aboriginal Health Practitioner.

Christopher “Burra” McHughes: Trainee SEWB Worker
“Burra” provides support to the visiting SEWB team which consist of psychologists and drug and Alcohol workers. He provides advocacy for community members.

Nicole Bennett: Administration/receptionist. & Medicare Officer
Nicky is the senior receptionist and support Administration for management. Nicole plays and integral role in managing Medicare claims and scheduling client appointments.

Betty Nicholls: Outreach Worker / Administration support & Stationary Officer
Betty’s role is to attend interagency meetings and advocate on the clients behalf. She also assists with the administration tasks as required and with additional duties as required.

Chris Boney: Gardener/small maintenance & Fire Warden
Responsible for small maintenance jobs and upkeep of yard, at both house and service accommodation that BAHSL provides for visiting personnel.

Michelle Tattersall & Kathy Fisher: Cleaners
Michelle and Kathy maintains a high standard of cleanliness for both BAHSL and the accommodation that BAHSL provides for visiting personnel.

In Conclusion:
The BAHSL team continue to work in partnership with the Brewarrina local Doctors surgery, Local Health Service, Primary Health Network and other health related organisations to provide culturally appropriate health services for the Brewarrina community. I would like to thank the staff at BAHSL, the WAMS CEO, WAMS Staff and the WAMS Directors for the continued support offered in my position. I look forward to the challenges and diversity of the following financial year and continuing to guide quality health service to the Brewarrina community.

KATRINA WARD. MANAGER
CHILDREN’S SERVICES
REPORT ON GOONIMOO MOBILE CHILDREN’S SERVICE  
JULY 2017 TO JUNE 2018

Introduction
This reporting period has seen the Goonimoo Mobile Children’s Service continue to provide a quality service to the Walgett community and surrounding areas. During this time, Goonimoo has welcomed two new staff members to the team with experience in Early Childhood Education. Goonimoo’s service delivery has expanded with the introduction of Play sessions being delivered from the Collarenebri Preschool, Walgett Community College Primary School and Carinda Public School.

Funding for the programs is received from two (2) sources:
Prime Minister and Cabinet - Locational Supported Playgroup
Prime Minister and Cabinet (Formerly Budget Based Funding Dept of Education – Community Support Programme.

Play sessions conducted at the following venues
- Collarenebri Preschool
- Carinda Public School and Carinda Hall
- Walgett Library
- Euragai Goondi
- Walgett Community College Primary / Biraleegal Preschool Walgett
- Apex Park Walgett

Referral Services accessed
WAMS Midwifery supporting Mums with antenatal appointments during play sessions
WAMS Social and Emotional Wellbeing Program team for family support and positive behaviour techniques
WAMS Exercise Physiologist and Dietitian for Nutrition Education as well as exercise programs tailored for parents and children.

Referrals to Goonimoo
Referrals have been received from the Local Doctors, Schools, Family and Community Services as well as Mission Australia. All these children from referrals have been visited by the Programme within the existing Playgroups or through one-on-one home visits where Early Childhood Education has been delivered in a Play-based approach.

Community Development Activities
- The Biggest Morning Tea Carinda
- Sista Speak (Empowering young Women mentoring)
- International Womens Day morning Tea
- Harmony Day Walgett Community College
- Pyjama Day in the Park
• Weekly engagement with Elders morning tea yarning circle at Playgroup on Fridays
• Bulldust to Bitumen Festival Move n Groove for under 5s (Music & Movement)
• Ricky Walford and Jenny Wright Shields Play and Information Session
• Walgett Show Art and Craft participation from all communities visited
• Activities at the Walgett Library
• Goonimoo Open Day
• NAIDOC Morning Tea with Elders at Cade 64 as well as Aboriginal Painting with local artist Frank Wright
• Reconciliation Week
• Sorry Day
• National Aboriginal Islander Children’s Day
• Christmas activities (Including Christmas Art & Craft and Santa and his Elves) visiting Schools and Early Childhood Services within the community.
• The Children’s services manager participated in the Show me the Way initiative
• Walgett Community College School Transition program (Term 3 & Term 4)

Professional Development
• First Aid for Early Childhood Education and Care and CPR update
• Community Early Learning Support – Mobile Meet conference
• Work health and Safety Training
• Team building
• Inclusive practices
• School readiness,
• creative play opportunities for under 5s

Staffing
Children’s Services Manager:
Amy Townsend
Early Childhood Educators:
Jade Thurston
Michael Purse
Katie Shields
Tara Smith (Casual)
Casie Saunders (Casual)

Conclusion

With the engagement of two new staff members Goonimoo has seen new and exciting activities roll out across the communities visited with additional services being offered to Support families to give children a good start in life through improved
Early Childhood development, care, Education and school readiness, that support children with successful transitions to school.

The feedback from children and families has been very positive therefore this has led Goonimoo to many new platforms in the New Year. The New Year will see Goonimoo working closely with Collarenebri Central School to deliver sessions to assist families with the transition to School process to build relationships and become familiar with the environment prior to attending school. Goonimoo has also had requests from other small communities within Walgett for Playgroup to focus on Early Childhood Education delivered through a Playgroup approach to work on School readiness activities in the absence of Early Childhood services being available.

The Goonimoo Mobile Children’s Services team look forward to continuing to build strong community relationships with children, families and community members in promoting the importance of Early Childhood Education through a play-based approach.

Amy Townsend
Children’s Services Manager
Funded by the Federal Department of Health and NSW Health
Celebrating 30 years of Service – 1985 to 2016

CHRONIC DISEASE
INTRODUCTION:
The Chronic Disease Program has gone from strength to strength with the introduction of new, exciting programs and enhancements to others. The team includes not only the regular day to day staff but also our many visiting specialists, allied health professionals and contractors who all work together so well.

STAFFING:
- Jill Murray  Chronic Disease Manager
- Gemma Groome  Acting Clinical Manager CDB
- Donna Thurston  Acting Administration Manager CDB

HEALTHY FOR LIFE PROGRAM
- Wayne Beddell  Healthy for Life Coordinator (Commenced Jan 2018)
- Ngawai Hyland  Registered Nurse
- Melissa Haley  Aboriginal Health Worker
- Sophia Byers  Gardener - Euragai Goondi Community Garden
- Danielle Fletcher  Dual Qualified Dietitian/Exercise Physiologist
- Annie Dean  Exercise Therapist
- General Practitioners  Locum General Practitioners for Health Checks

FAMILY CENTERED PRIMARY HEALTH CARE PROGRAM
- Gemma Groome  Registered Nurse – Team Leader (Commenced August 17)
- Melissa White  Aboriginal Health Worker (Commenced April 2018)
- Glenn Sands  Aboriginal Health Worker (leave Without pay)
- General Practitioners  Visiting General Practitioner Service
- Allied Health Staff  Visiting Allied Health Staff

ABORIGINAL OUTREACH PROGRAM
- Nichole Kennedy  Aboriginal Outreach Worker

ABORIGINAL FAMILY HEALTH
- Whitney Skuthorpe  Aboriginal Family Health worker (Commenced August 17)
DRUG & ALCOHOL
- Reg Rutene, Murdi Paaki Drug and Alcohol Network Coordinator
- Ricco Lane, Aboriginal Health Worker (Commenced August 2017)

EYE HEALTH PROGRAM
Jenny Hunt, Aboriginal Health Worker

PUBLIC HEALTH PROGRAM
Bradley Smith, Public Health Worker (Ceased Jan 2018)
Ricco Lane, Public Health Worker (Ceased August 2017)

SEWB
- Rebecca Atkins, Psychologist (Ceased June 2018)
- Judy Scolari-Gibson, Counsellor (Ceased June 2018)

BRINGING THEM HOME
- Will Grech, Psychologist

EXTERNAL RELATIONSHIPS

<table>
<thead>
<tr>
<th>Brien Holden Vision Institute</th>
<th>Walgett Community School</th>
<th>St Josephs School</th>
<th>Australian Hearing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Murdi Paaki Drug and Alcohol Network</td>
<td>Aboriginal Maternal and Infant Health</td>
<td>Mission Australia</td>
<td>Lightning Ridge Mental Health Team</td>
</tr>
<tr>
<td>Hear our Heart Program</td>
<td>Department of Education – Hearing Support Team</td>
<td>ENT – School based Clinics - Dubbo</td>
<td>Western NSW Eye Health Partnership</td>
</tr>
<tr>
<td>Dharriwaa Elders Group</td>
<td>Walgett Shire Council</td>
<td>Walgett Police</td>
<td>Pilliga Community Centre</td>
</tr>
<tr>
<td>Goodooga Health Service</td>
<td>Grawin Community Centre</td>
<td>Walgett Multipurpose Service</td>
<td>Thiyama-Li Family Violence</td>
</tr>
</tbody>
</table>

SUMMARY: HEALTHY FOR LIFE PROGRAM provides services to the communities of Walgett, Namoi and Gingie. This team provides the planning and implementation of Health Assessments for Aboriginal people and assisting clients to access the Chronic Disease Programs. The team also conduct weekly visits to the Dharriwaa Elders Group for health monitoring and organising guest speakers on requested topics. Together with Ray Kelly, the team offer a “Too Deadly for Diabetes” Program where participants are supported in a journey to improving their health.
FAMILY CENTERED PRIMARY HEALTH CARE PROGRAM delivers a GP and Chronic Disease Outreach service to the Goodooga and Pilliga communities. This service is supported by Visiting General Practitioners and has enabled people to access a doctor and be referred to specialists, medical or surgical treatment and allied health care.

ABORIGINAL FAMILY HEALTH
The Aboriginal Health Worker works collaboratively with local organisations to promote awareness of the impact of family violence on individuals, families and the community. The role also offers support and advocacy for those affected in addressing their health and legal needs.

DRUG AND ALCOHOL PROGRAM
The Murdi Paaki Drug and Alcohol Network Coordinator provides services to Walgett, Collarenebri and Brewarrina. This includes individual assessment and counselling, education sessions and health promotion activities.

SOCIAL, EMOTIONAL WELLBEING PROGRAM (SEWB)
The Psychologist offers culturally appropriate approaches to healing that are strength-based and empowering.

DIETETICS AND EXERCISE PROGRAM
The Dietetic and Exercise program continues with twice weekly exercise groups for the community. They provide assessment and supervision for individuals with, or at risk of chronic disease and are available via GP referral. The team run a newly established School Program, offering the use of the Exercise Therapy Room to School students with special needs requiring additional support to improve their exercise and wellbeing. The team also coordinate the 10 week NSW Health Challenge. During the ten week program staff provide exercise training and healthy cooking lessons through the Koori Cooking program. As well as assisting in the TDFD program.

VISITING SERVICES:

<table>
<thead>
<tr>
<th>Dermatologist</th>
<th>Diabetes Educator</th>
<th>Physiotherapist</th>
<th>Podiatrist</th>
</tr>
</thead>
<tbody>
<tr>
<td>Optometrist</td>
<td>Sexual Health Nurse</td>
<td>Cardiologist</td>
<td>Family Planning NSW</td>
</tr>
</tbody>
</table>

TELEHEALTH CLINICS

Endocrinology | Tele-home monitoring project

OTHER

Sleep Apnoea Clinic | Ultrasound Clinic
HEALTH CHECKS

<table>
<thead>
<tr>
<th>Location</th>
<th>Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>St Joseph’s School</td>
<td>Walgett Men’s Health</td>
</tr>
<tr>
<td>Walgett – Women’s Health</td>
<td>Walgett Secondary School</td>
</tr>
<tr>
<td>Walgett Primary School</td>
<td>WAMS Medical clinic</td>
</tr>
<tr>
<td>Children 0-5 years with Royal Far West</td>
<td></td>
</tr>
</tbody>
</table>

COMMUNITY PARTICIPATION AND PUBLIC HEALTH EVENTS

<table>
<thead>
<tr>
<th>Event</th>
<th>Date</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAIDOC events</td>
<td>Beat the Heat</td>
<td>International Women’s Day</td>
</tr>
<tr>
<td>Pink Ribbon Day</td>
<td>WCC Reading Program</td>
<td>ANZAC Day</td>
</tr>
<tr>
<td>Hep B NSW screening</td>
<td>WAMS Medical clinic</td>
<td>Walgett Show health promotion</td>
</tr>
<tr>
<td>NAIDOC events</td>
<td>Sister &amp; Brother speak</td>
<td>Meals On Wheels</td>
</tr>
<tr>
<td>Pink Ribbon Day</td>
<td>WAMS Medical clinic</td>
<td>Pick A Path</td>
</tr>
<tr>
<td>Hep B NSW screening</td>
<td>White Ribbon Day</td>
<td>SistaQuit</td>
</tr>
<tr>
<td>NAIDOC events</td>
<td>Literacy for Life</td>
<td>Breakfast Club</td>
</tr>
<tr>
<td>Pink Ribbon Day</td>
<td>R U OK Day</td>
<td>Child Protection Week</td>
</tr>
<tr>
<td>Hep B NSW screening</td>
<td></td>
<td>Dementia – Healthy Brain Ageing</td>
</tr>
</tbody>
</table>

PROFESSIONAL DEVELOPMENT:

- Wayne Bedell – First Aid, WH&S Mandatory training
- Jill Murray - The Shark Cage: Domestic Violence training, Marrabinya Information session, Online training – Motivating teams, Online training – Fair work compliance, Communicare Super user training, Grant writing workshop, Online training – Smoking and cannabis, WHS Mandatory training
- Ngawai Hyland – Drug and Alcohol First Aid, Youth Mental Health First Aid, WH&S Mandatory training
- Melissa Haley – Drug and Alcohol First Aid, Youth Mental Health First Aid, WH&S Mandatory training, Cert 4 Aboriginal primary health care
- Gemma Groome - Youth Mental Health First Aid, WH&S Mandatory training
- Whitney Skuthorpe – Youth Mental Health First Aid, Audiometry Screening and Assessment, WH&S Mandatory training
- Nichole Kennedy – Youth Mental Health First Aid, WH&S Mandatory training
- Jenny Hunt - WH&S Mandatory training
- Ricco Lane – Youth Mental Health First Aid, WH&S Mandatory training
- Reg Rutene – Youth Mental Health First Aid, Drug and Alcohol First Aid, WH&S Mandatory training
- Donna Thurston – WH&S Mandatory Training

CONCLUSION:

Collaboratively, with the Too Deadly for Diabetes Program, the Healthy for Life team have successfully worked with clients to achieve significant weight loss results, decreased medication dosing, and the ceasing the need for insulin in several diabetic participants in the program. A pleasure to witness with Type 2 Diabetes being an ever-present key focus for the Chronic Disease team.
The newly established School Exercise program has been brilliantly organized and well attended activity since the commencement of the program. A growing interest in Cardiac Rehab sees the potential for an additional class to cater to the increasing number of attendees and referrals for the program.

Outreach communities continue to receive GP and Chronic Disease services on a regular basis. Clinics are always well attended. The individual needs of each client are considered and respected in the delivery of holistic care.

Many outlying areas continue to receive the WAMS Optometry service provided in partnership with Brian Holden Vision. Substantial equipment allows for the Optometry team to deliver a high standard of care to each client, as well as providing follow up treatments and procedures, and fitting of spectacles as required.

Visiting Specialist service Walgett and the surrounding area, with an increase in clients seen with Dermatology and Cardiology look at increasing the number of visits. Cardiology confirmed to increase to monthly visits for the 2018 to 2019 reporting period. RDN looking to recruit another Dermatologist to increase the number of visits.

The Chronic Disease team consistently work to ensure the best possible outcomes are achieved for the Walgett community physically, mentally and emotionally.

**GEMMA GROOME**  
ACTING CLINICAL MANAGER - CHRONIC DISEASE

**Donna Thurston**  
Acting Chronic Disease Manager (Administration)
Funded by the Federal Department of Health and NSW Health
Celebrating 30 years of Service – 1985 to 2016
Introduction
The WAMS clinic continues to provide primary health, dental, midwifery and care for mothers and babies via a multidisciplinary team, contractors and locums.

Doctors
Dr Paige Darlington joined the clinic team in early 2018 and enhances the services provided by the other regular GP and locums.

Pharmacy
The pharmacy unit is managed by the Senior Aboriginal Health Worker (SAHW). All staff who assist in the dispensing of medications have achieved their Dispensary Assistant Certificate III through the Pharmacy Guild of Australia.

Transport
The transport team assists clients to attend specialist appointments in Dubbo, Collarenebri and Orange when no other means of transport is available. Local transport ensures clients can attend appointments with the doctor, Aboriginal Health Worker and allied health. This is a valuable service for clients with no other way to get to appointments.

Dental
WAMS has operated with locum Dentists during the year as attempts to recruit a permanent one continues.

The Dental Therapist is at WAMS Monday to Wednesday.

The team regularly visit the local pre-schools, Walgett Primary School and St Josephs Catholic School to conduct oral health screening and offer teeth brushing education.

Clinic
The Senior Aboriginal Health Worker works with the Endorsed Enrolled Nurse to provide pathology collection, wound care and physical observations for clients before they see the doctor.

Midwifery
The WAMS Community midwife and Aboriginal Health Worker provide antenatal care at home and at the clinic. The team consult with a Dubbo Obstetrician and place chosen for birth as well as work with GP’s in a shared care arrangement.

Collarenebri
The Aboriginal Health Worker (AHW) travels one day to Walgett and works the other four in Collarenebri. The AHW is proactive with community events in Collarenebri and also supports the WAMS team in Reception and GP Clinic.

Mothers & Babies
WAMS has a position for a qualified Maternal and Child Health nurse and a Health Worker to provide early childhood assessments, education and support with breastfeeding, sleeping and behavioural difficulties for children and families. One permanent and one contracted nurse were sourced however the position is currently vacant.
Students
Medical Student placements (5th year) are from the University of Western Sydney (UWS) and also the John Flynn Program. UWS students are on a five week rotating roster throughout the calendar year.

Meetings – internal

<table>
<thead>
<tr>
<th>Staff meetings</th>
<th>Clinic meetings</th>
<th>Supervision</th>
</tr>
</thead>
<tbody>
<tr>
<td>Annual reviews</td>
<td>Communicare</td>
<td>Quality</td>
</tr>
<tr>
<td>Senior Manager meetings</td>
<td>Case Conferencing</td>
<td></td>
</tr>
<tr>
<td>Planning meetings for local events at WAMS</td>
<td>Medical student presentations</td>
<td></td>
</tr>
</tbody>
</table>

Meetings – external

<table>
<thead>
<tr>
<th>Ministers</th>
<th>Dental</th>
<th>Community Care Collaboration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Schools</td>
<td>Walgett Shire</td>
<td>Regional RDN review</td>
</tr>
<tr>
<td>Out of Home Care</td>
<td>Funding bodies</td>
<td>Family Planning NSW</td>
</tr>
<tr>
<td>Integrated Care Strategy</td>
<td>Royal Far West</td>
<td>Child Protection</td>
</tr>
<tr>
<td>Outback Division of GP</td>
<td>Breastscreen</td>
<td>Cancer Council</td>
</tr>
<tr>
<td>AH&amp;MRC</td>
<td>Walgett MPS</td>
<td></td>
</tr>
</tbody>
</table>

Activities conducted
The following complementary programs were delivered to the community of Walgett:

- Breakfast Club St Josephs Primary School
- Breakfast Club Walgett Community College – Primary
- Oral Health Program St Josephs Primary School
- Oral Health Program Walgett Community College – Primary
- Oral Health Program Walgett Pre-schools – screening
- Walgett Show providing opportunistic health screens
- NAIDOC involvement
- WAMS support Local Sports activities & Walgett Shire youth events

Issues that impacted service delivery
WAMS provides a charter every second and fourth Monday of the month which allows our ‘Fly in’ and ‘Fly out’ specialists to attend clinics.

Professional Development
An internal in-service calendar is an opportunity for staff to be updated with information on the latest medical, health and social related issues pertaining to their work roles.

Projects and Research
WAMS has been working with Family Planning NSW to increase the number of Aboriginal women attending for cervical screening. This project also involves training for staff and doctors.

Working in conjunction with the Regional Eye Health Partnership “Improving access to NSW Spectacles Program”.

Celebrating 30 years of Service – 1985 to 2016
Funded by the Federal Department of Health and NSW Health
Staffing during the reporting period

- Phillip Dowse  Senior Aboriginal Health Worker
- Karen Rutterman  Administration – on extended leave
- Jessie Richardson  Clinic Practice Manager – resigned
- Cherin Singh  Endorsed Enrolled Nurse
- Kayla Thurston  Team Leader – Dental Team Leader
- Sarah Dowse  Dental Assistant
- Alyssa Walford  Dental Assistant – resigned after maternity leave
- Sue Jenkins  Collarenebri Aboriginal Health Worker
- Jacqui Lee  Compliance/Medicare Officer
- Salman Ahmed  Registrar
- Lynne Turner  Dental Therapist
- Richard Sharpley  Transport Team Leader
- Karen Rutterman  Administration – on extended leave
- Mary Sands  Administration – casual
- Cassie Skuthorpe  Administration – casual - Started 4/6/18
- Kylee Tuhura  Administration - Started 5/3/18
- Paige Darlington  General Practitioner - Started 30/4/18
- Louise Jefferies  Clinic Practice Manager (9/4/18 - 11/5/18)
- Arthur Murray  Transport driver - started 9/11/17
- Karin Jodlowski-Tan  General Practitioner - left June 2018
- Manori Malawaraarachchi  Registrar/General Practitioner - left February 2018
- Vallipuram Thayaparan  Registrar - left
- Muhammad Qasim File  Dentist – left
- Siglinder Anglerer  Child & Family Health Nurse (3 month contract)
- June Orako  Health Worker
- Jill Murray  Acting Clinic Practice Manager – March – June

Meetings
There have been many opportunities to work with local, regional and statewide stakeholders during the year resulting in great relationships, additions to funding and an understanding of the complexities of the Aboriginal medical service sector.

Acknowledgement
My thanks to all the staff who are so dedicated to the health and welfare of our community. Their joint effort along with the feedback from our clients helps us to keep improving and growing our services to meet local need.

JILL MURRAY
ACTING CLINIC PRACTICE MANAGER
DENTAL
REPORT ON ORAL HEALTH PROGRAM
JULY 2017 TO JUNE 2018

Aims

- To provide a culturally appropriate mix of dental health services to Aboriginal people who live in Walgett and surrounding areas
- To improve access to dental services for clients of WAMS
- To build an effective Dental workforce at WAMS
- To Work effectively with local partners in the provision of dental care

Activities

WAMS has continued to provide oral health services to the people of Walgett and surrounding areas. It provides dental care to Aboriginal and non-Aboriginal people.

During this financial year, WAMS engaged the following dentists:

- Dr Rong Winkelman  25 September - 17 October
- Dr Sheela Sampath  22 Jan - 6 February
- Dr Minakshi Pillai  5-29 March
- Dr Sheela Sampath  23 April - 4 May
- Dr Peter Hill  7-18 May
- Dr Michael Prochazka  4-8 June

Ms Lynne Turner, Dental Therapist, is employed on a part time basis to provide ongoing care and preventive advice to children and their families. Since January WAMS employed a newly graduated Oral Health Therapist, Ms Jackie Cunningham, who was mentored by Ms Turner.

In October 2017 WAMS started employing a Dental Prosthetist on a sessional basis to provide dentures to people on the waiting list.

We are very appreciative to these dental professionals for their commitment to our dental program and their enthusiasm for the organisation and the community. We now have a combined dental team that can provide the best care for the various groups, ie for children, denture needs, and general dentistry.

We are most grateful to Ms Jenni Floyd, Area Program Manager for Oral Health, Western NSW Local Health District, and to the staff at the Dubbo Community Dental Clinic, who have supported WAMS through funding and staff support.

Recruitment of Dentists in rural and remote areas is a national problem, and WAMS continues to be supported by a group of interested Dentists who are willing to commit to
regular visits to Walgett. WAMS also utilises other avenues of recruitment support such as linking in to professional networks to expand the pool of available and appropriate dental practitioners.

Performance Measures

The Dental program collects and analyses data using OASIS dental software, and demographic data using Communicare. The following services provided by dentists were recorded:

<table>
<thead>
<tr>
<th>Service</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>EXAMINATIONS</td>
<td>248</td>
</tr>
<tr>
<td>PREVENTIVE</td>
<td>40</td>
</tr>
<tr>
<td>RADIOGRAPHS</td>
<td>176</td>
</tr>
<tr>
<td>PERIODONTAL TREATMENTS</td>
<td>55</td>
</tr>
<tr>
<td>RESTORATIONS</td>
<td>271</td>
</tr>
<tr>
<td>TOOTH EXTRACTIONS</td>
<td>180</td>
</tr>
<tr>
<td>ENDODONTIC TREATMENTS</td>
<td>18</td>
</tr>
<tr>
<td>DENTURES</td>
<td>17</td>
</tr>
</tbody>
</table>

The following services provided by dental/oral health therapists were recorded:

<table>
<thead>
<tr>
<th>Service</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>EXAMINATIONS</td>
<td>255</td>
</tr>
<tr>
<td>PREVENTIVE</td>
<td>292</td>
</tr>
<tr>
<td>RADIOGRAPHS</td>
<td>88</td>
</tr>
<tr>
<td>PERIODONTAL TREATMENTS</td>
<td>15</td>
</tr>
<tr>
<td>RESTORATIONS</td>
<td>41</td>
</tr>
<tr>
<td>FISSURE SEALANTS</td>
<td>82</td>
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<tr>
<td>ENDODONTIC TREATMENTS</td>
<td>1</td>
</tr>
<tr>
<td>TOOTH EXTRACTIONS</td>
<td>13</td>
</tr>
</tbody>
</table>

Dental practitioners endeavour to practise preventive care and try to restore teeth rather than extracting them. However, the history of dental care seeking behaviour is weighted heavily towards relief of pain and associated tooth extraction/s.

The preventive approach adopted for the child dental program is resulting in fewer extraction cases, with a greater emphasis on restoring and preserving teeth.

Dental Practice Accreditation

WAMS continues to comply with the requirements of Dental Practice Accreditation through QIP by responding to requests for updates in quality performance reporting.

WAMS Child Dental Program

With the regular visits by Dental/Oral Health Therapists, WAMS can focus more on preventive programs for preschool and school aged children. The activities include regular screening and prioritising for dental care, implementing a Fluoride varnish application program for under 5’s at high risk of dental decay, and supporting school based toothbrushing programs, as well as working with young mothers and carers.

School Tooth brushing Program

The school based tooth brushing program continues to run at the Koolyangarra and Birraleegal preschools, and at Walgett Community College Primary School. The school tooth brushing program is enthusiastically supported by the staff of the schools.

The Dental Team visits the schools regularly to monitor the program and provide ongoing support. Staff also visit preschools to work with staff and parents on improvement of oral health.
Coordination with Health Check Programs

Staff are an integral part of the Health Checks organised by WAMS. These have been run for women, men, pre-schoolers, primary school and high school children. The Team provides a dental check, appropriate dental advice, and organises prioritised referrals for those requiring further care.

Further Oral Health Promotion Activities

Dental staff provided information about dental care and services at WAMS and distributed oral health care kits during NAIDOC week, at the Walgett Show, and at Grawin. They provided oral health sessions to mothers and babies groups, antenatal groups and playgroups, and Elders groups where they provided advice on oral hygiene and diet. The team is proactive with community education and acknowledge the importance of good oral hygiene messages ‘getting out to the public’

Medicare Child Dental Benefits Schedule (CDBS)
WAMS Dental continues to receive funding from the CDBS for eligible children - under the age of 18 and on Family Tax Benefit A, with an allocation of $1000 per 2 years for service item numbers.

Staff training and Support

WAMS dental staff are working towards completion of the Certificate III in Dental Assisting at OTEN. A one day seminar on infection control updates was conducted in the dental clinic, with dental and clinical staff attending, by the Dental Assistants Professional Association, who commented on the high compliance and standards of infection control in WAMS dental clinic.

Consultation and Co-operation

The Dental Consultant continues to support the program in offering best practice dental care to the community serviced by WAMS. The Consultant works actively to recruit and support Dentists, support local staff, and ensure adherence to adequate practice management and reporting procedures. The Directors and staff are extremely grateful for the support the Consultant has provided to promote and recruit resources for the Dental Clinic.

The Western NSW Local Health District provides ongoing technical support and advice for staff, and there are good referral procedures between WAMS and the Western NSW Local Health District dental clinics, for oral surgery and orthodontic cases. WAMS also has a good communication and referral network with private Dentists in Dubbo.

Conclusion

WAMS has managed to provide dental care to Walgett and nearby communities, with an increasing emphasis on preventative dental care, and adherence to best practice clinical management, despite ongoing issues with recruitment of appropriate personnel.

Acknowledgment must be given to the local dental team in Walgett who continue to demonstrate professionalism and a commitment to best practice dental care.

SANDRA MEIHUBERS
DENTAL CONSULTANT