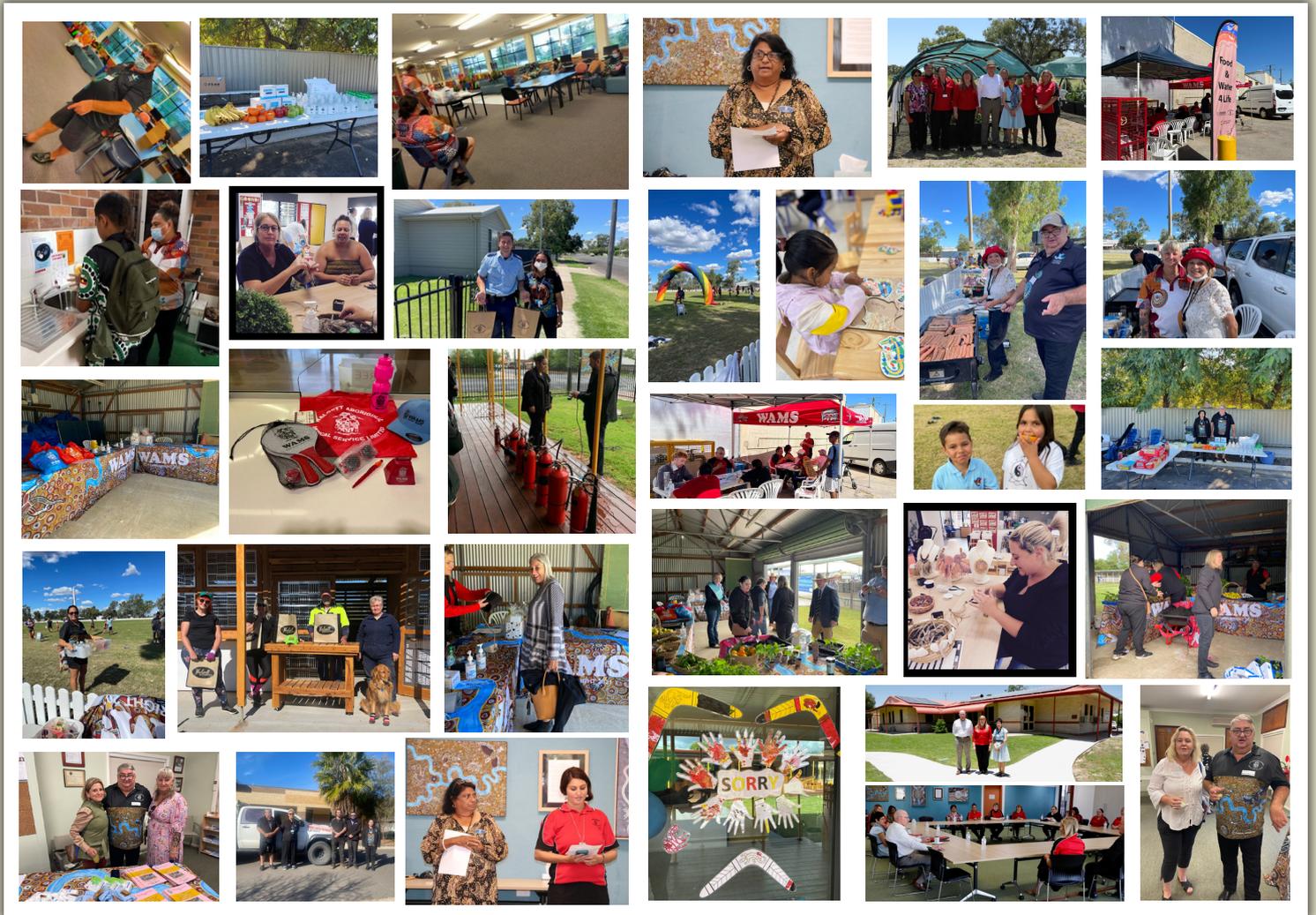




Walgett Aboriginal Medical Service Limited

1986 – 2022



ANNUAL REPORT

2021 – 2022





CONTENTS

	<i>page</i>
Board of Directors	2
Audit	5
Finance	36
Chief Executive Officer	38
Chief Operations Manager	42
Allied Health	46
Brewarrina Aboriginal Medical Service	51
Children's Services	57
Chronic Disease	60
Clinic	66
Oral Health Program	70
Dharriwaa Elders Group	75
Education	77



BOARD OF DIRECTORS REPORT JULY 2021 TO JUNE 2022

Introduction

The COVID pandemic continues to affect our daily lives. Walgett has had its share of community members being affected. Once again, WAMS were adapting their work roles to accommodate daily changes to their work. Screening, testing and follow-up care has taken its toll on staff who have had to work beyond their normal duties and work hours to accommodate the steady stream of clients who required such professional care.

Walgett Shire Council held elections in December, resulting in the appointment of a female Mayor, Mrs Jane Keir, OAM. WAMS sent a congratulatory letter to her for this nomination. The previous Mayor, Mr Ian Woodcock, OAM remains as a member of Council. Directors offered an invitation to meet the Councilors, and also visit WAMS. Unfortunately, due to respective appointments for both parties, along with COVID regulations, this has not occurred. It is anticipated that a meeting shall occur in July/August of the new financial year.

At the Walgett Shire Council Australia Day Awards, Mrs Betty Williams, the WAMS Vice Chairperson, was formally recognised for her services in Health. Betty has been a local stalwart in delivering Primary Health Care in Walgett and outlying communities. The Board of Directors are extremely proud of her achievement and pay homage to her recognition.

Visitors to WAMS

Walgett continues to be a “stop-over” for many Politicians (State and Federal Ministers). WAMS takes the opportunity to welcome visitors to our town, as we believe it is a time to showcase the good work of our service both inside our levee banks, as well as the outreach programs. The pandemic had limited person-to-person contact, therefore limiting travel to rural towns.

At the end of the calendar year, WAMS were privileged to host a visit by the Governor General, His Excellency the Honourable David Hurley AC DSC (retired) and his wife, Her Excellency Mrs Linda Hurley. The Governor General was invited to officially open the Walgett PCYC, and had requested to spend time at our facility. They were interested to learn of our longevity, programs delivered, the expansion of outreach services as well as appreciate the struggle with workforce retention. We were keen to learn of their interest in growing fresh produce. They commended WAMS on the quality of vegetables produced from the Community Garden.

Partners of WAMS

Without collegiate relationships, WAMS would not be in a position to consolidate services, share care and work productively as a collaboration of health and social care. Our corporate businesses are enhanced by such arrangements, client care is enriched and our staff have the chance to improve their skills base.

Quality

It was pleasing to have members of the Te Wana Review Team attend WAMS during the last weeks of June. Their time was spent interviewing both Directors, Staff, Stakeholders and consumers both at the Brewarrina and Walgett sites. At the feedback session, the team advised personnel that WAMS would be recommended for three years accreditation. I personally extend my thanks and appreciation to my fellow Directors and all of the staff who have collaboratively strived to reach such a milestone.



Additionally, WAMS have recognised the importance of becoming registered with the National Disability Insurance Scheme (NDIS). There are several ACCHO's across the nation who use this scheme to enhance client care for people with disabilities. Whilst the application was made in early 2022, we have been advised that it shall be late in the calendar year before we are informed of the application.

Quality in Culture

Quality is not only part of business standards, but it is an essential element of WAMS framework. Quality cultural identification is first and foremost for an Aboriginal Community Controlled Health Organisation (ACCHO) such as WAMS. Identity within the Constitution, the Strategic Plan and in the chapters of the Handbook supplied to the accreditation review team, gives overall recognition of Gamilaraay culture. With Frank Wright's art work now the branding of WAMS, front and centre at the new expansions, corporate shirts, office resources as well as WH&S markings on the glass sliding doors.

WAMS commenced the introduction of Gamilaraay language/signage at the opening of the expansions last year. The good work continues across WAMS businesses as well as residences. English translations is a secondary identifier for the naming of health areas (e.g. ears, eyes and dental) as well as general offices (e.g. toilets and kitchens).

The most recent cultural identification for Walgett, is WAMS commitment to creating a pictorial and narrative display of local events surrounding the Freedom Ride. Research has commenced to collate historical data from several archival institutions. Artists who created the graphics for the late Jimmy Little. AO, mural on the local water tower, along with an historian, are guiding WAMS to design such an exhibition. We anticipate the display to capture local history, personal memories Walgett's story within the travels across NSW and people's activism at this time.

Quality in Governance

Expressions of Interest were submitted to auditing firms in close proximity to Walgett to apply for the annual audit of our financial affairs. Responses from that were tabled at the members AGM of January 2022. Ryan and Rankmore, Auditors of some ten plus years, were re-appointed.

With the constant COVID restrictions across the nation, the Directors were unable to commence governance training for most of the reporting period. With this in mind, an open tender was designed in April, at which time a company was appointed. Initial discussions occurred in May, to orientate the Directors to their role, as well as plan the revision of the Strategic Plan. In June, Coolamon Advisors was appointed to undertake these two tasks.

Directors attended both an Orientation Workshop and the Strategic Planning discussions. Staff were also invited to attend Strategic Planning. It is now anticipated that the next edition of WAMS Strategic Plan shall be completed and available at the first quarter of the next financial year.

Brewarrina Aboriginal Medical Service (BAMS)

For some fifteen years (15) past, the federal government are not responding to WAMS formal applications for the expansion of the Sandon Street property. With each passing year, staffing of this property is limited, renovations are not possible, given WAMS are not the legal owners of the property, expansions of clinical care is restricted due to lack of office space.

WAMS has committed to the growth of BAMS by land development. Stage one of their efforts is to secure a block of land, close to the CBD, to construct a purpose built facility. The planned second stage is to source monies for the construction of a purpose built property.



Additionally, WAMS has purchased staff accommodation which is situated on a double land block. The vacant land has the space for the units to be transferred from the local caravan park and situated on this site. Such arrangements will offer staff to be established in one residential area, thereby offering community accommodation to staff. I extend my deep appreciation to the BAMS local team and visiting personnel who continue to deliver quality health care to Brewarrina.

Conclusion

The Board of Directors were cognisant of the stressors of staff, associated with the pandemic, e.g. additional workload, the worry of bringing home the disease to family and friends, sharing additional workloads when other staff were unwell. Given such a situation, they offered staff additional days off over the Christmas period in recognition of their dedication and diligence.

Towards the end of the reporting period the Labour Government rose to power. WAMS posted a congratulatory letter along with a floral tribute to the Honourable Linda Burney. MP, who was appointed to cabinet as Minister of Indigenous Australians. Minister Burney has worked with many people from Walgett, and those who live in Walgett. She has been a strong advocate for rural communities and speaks fondly and positively about the north-west, for which we are grateful.

I have enjoyed the first twelve months of my term of office. To understand the various associations, negotiations and representations that the CEO and her senior team espouse on behalf of the business, is to be commended. The challenges, successes, disappointments, are all part of the growth of WAMS, the Directors and the staff. Experiences and information offers strength and wisdom.

In closing, my sincere appreciation is extended to fellow Directors who have commenced this journey with me. Their collective knowledge and business acumen is what drives us forward together. Thank you once again to the staff, our clients, community and corporate partners who each share the journey, the travels, the destination.

**MARY PURSE, CHAIRPERSON
BOARD OF DIRECTORS**



Walgett Aboriginal Medical Service Limited

ABN: 78 014 990 451

Financial Statements

For the Year Ended 30 June 2022





Walgett Aboriginal Medical Service Limited

ABN: 78 014 990 451

Contents

For the Year Ended 30 June 2022

	Page
Financial Statements	
Directors' Report	7
Auditor's Independence Declaration	10
Statement of Profit or Loss and Other Comprehensive Income	11
Statement of Financial Position	12
Statement of Changes in Equity	13
Statement of Cash Flows	14
Notes to the Financial Statements	15
Directors' Declaration	34
Independent Audit Report	35



Walgett Aboriginal Medical Service Limited

ABN: 78 014 990 451

Directors' Report

30 June 2022

The directors present their report on Walgett Aboriginal Medical Service Limited (the Corporation) for the financial year ended 30 June 2022.

1. General information

Directors

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

Names	Position	Appointed/Resigned
Mary Purse	Chairperson	
Carol Janissen	Secretary	
Elizabeth Kennedy	Vice-Chairperson	Resigned 25 July 2022
Iris Hall		
Doreen Peters		

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

Principal activities

The principal activity of Walgett Aboriginal Medical Service Limited during the financial year were to:

- 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; and
- 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 changes in the nature of the Corporation's activity occurred during the financial year.

2. Operating results and review of operations for the year

Operating results

The Surplus/ (deficit) of the Corporation after providing for income tax amounted to \$2,135,624 (2021: \$1,509,633).

Dividends paid or recommended

No dividends were paid or declared since the start of the financial year. No recommendation for payment of dividends has been made.



Walgett Aboriginal Medical Service Limited

ABN: 78 014 990 451

Directors' Report

30 June 2022

2. Operating results and review of operations for the year (continued)

Review of operations

A review of the operations of the Corporation during the financial year and the results of those operations show grant revenue has increase \$554,799 compared to 2021. A number of funding bodies allowed the Corporation to retain grant funding to assist with COVID-19 and flooding support without any obligation, as a result the profit for the Corporation has increased as the relevant grant income is recorded as revenue on receipt. Payroll expenditure has also decreased \$506,102 due to difficulties in attracting and retaining required staff in remote communities. This is offset by a decrease in Doctors' fees revenue of \$337,719.

3. Other items

Significant changes in state of affairs

There have been no significant changes in the state of affairs of the Corporation during the year.

Events after the reporting date

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

Future developments and results

The directors are not aware of any likely developments that will materially affect the results of the Corporation's operations in future financial years.

Environmental issues

The Corporation's operations are not regulated by any significant environmental regulations under a law of the Commonwealth or of a state or territory of Australia.

The directors believe the Corporation has adequate systems in place for the management of its environmental requirements and are not aware of any breach of those environmental requirements as they apply to the Corporation.

Information on directors

Mary Purse	Chairperson
Occupation	Retired
Iris Hall	
Occupation	Retired
Elizabeth Kennedy	Vice-Chairperson
Occupation	Enrolled Nurse - Community Liaison Walgett Health Services
Carol Janissen	Secretary
Occupation	Australian Unity
Doreen Peters	
Occupation	TAFE services coordinator



Walgett Aboriginal Medical Service Limited

ABN: 78 014 990 451

Directors' Report 30 June 2022

Meetings of directors

During the financial year, 11 meetings of directors (including committees of directors) were held. Attendances by each director during the year were as follows:

Directors' Meetings	
Number eligible to attend	Number attended
Mary Purse	11
Iris Hall	11
Elizabeth Kennedy	11
Carol Janissen	9
Doreen Peters	9

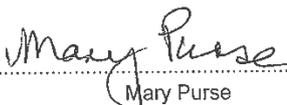
Indemnification and insurance of officers and auditors

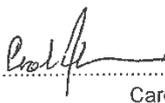
No indemnities have been given or insurance premiums paid, during or since the end of the financial year, for any person who is or has been an officer or auditor of Walgett Aboriginal Medical Service Limited.

Auditor's independence declaration

The auditor's independence declaration in accordance with Section 60-40 of the *Australian Charities and Not-for-profit Commission Act 2012*, for the year ended 30 June 2022 has been received and can be found on page 4 of the financial report.

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

Director

Mary Purse

Director

Carol Janissen

Dated 14 December 2022



PRINCIPALS
Kevin Rankmore B.Bus. CA, ACIS, ASCA, DipFP
Roger Estens B.Fin Admin, CA, DipFP
Mark Riley B.Bus, CA
administrator@ryanrank.com
www.ryanrank.com

Auditor's Independence Declaration

under Section 60-40 of the Australian Charities and Not-for-profit
Commission Act 2012

to the Directors of Walgett Aboriginal Medical Service Limited

I declare that, to the best of my knowledge and belief, during the year ended 30 June 2022, there have been:

- (i) no contraventions of the auditor independence requirements as set out in the Australian Charities and Not-for-profits Commission Act 2012 in relation to the audit; and
- (ii) no contraventions of any applicable code of professional conduct in relation to the audit.

Ryan and Rankmore
Chartered Accountants

Kevin Rankmore
RCA 1656

113-115 Darling Street
DUBBO NSW 2830

Dated 14 December 2022

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Wellington NSW 2820
T 02 6845 2177
F 02 6845 3373
Chartered Accountants

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T 02 6847 2177
F 02 6847 2656
Business Advisors



Liability limited by a scheme approved
under the Professional Standards Legislation



Walgett Aboriginal Medical Service Limited

ABN: 78 014 990 451

Statement of Profit or Loss and Other Comprehensive Income For the Year Ended 30 June 2022

		2022	2021
	Note	\$	\$
Revenue	4(a)	10,787,462	10,575,943
Other income	4(b)	196,129	203,909
Accounting and audit fees	17	(42,283)	(43,210)
Accommodation, meals and travel		(182,704)	(254,987)
Board expenses		(23,548)	(22,745)
Consulting and professional fees		(268,939)	(116,889)
Contractors		(1,884,336)	(2,379,091)
Depreciation and amortisation expense	5	(738,553)	(553,349)
Employee expense	5	(3,943,894)	(4,449,996)
Impairment of receivables	5	(230,492)	-
Loss on disposal of assets		-	(100,115)
Medical and dental supplies		(143,974)	(120,233)
Occupancy costs		(326,117)	(353,012)
Other operating expenses		(287,182)	(449,123)
Program costs		(110,848)	(114,097)
Repairs and maintenance		(315,973)	(171,944)
Telephone, internet and technology		(349,124)	(141,428)
Surplus/ (deficit) before income tax		2,135,624	1,509,633
Income tax expense		-	-
Surplus/ (deficit) for the year		2,135,624	1,509,633
Other comprehensive income, net of income tax		-	-
Total comprehensive income for the year		2,135,624	1,509,633

The accompanying notes form part of these financial statements.



Walgett Aboriginal Medical Service Limited

ABN: 78 014 990 451

Statement of Financial Position As At 30 June 2022

	Note	2022 \$	2021 \$
ASSETS			
CURRENT ASSETS			
Cash and cash equivalents	6	8,320,169	5,325,051
Trade and other receivables	7	23,177	510,907
Other assets	8	189,659	162,288
TOTAL CURRENT ASSETS		8,533,005	5,998,246
NON-CURRENT ASSETS			
Property, plant and equipment	9	13,692,999	13,476,503
TOTAL NON-CURRENT ASSETS		13,692,999	13,476,503
TOTAL ASSETS		22,226,004	19,474,749
LIABILITIES			
CURRENT LIABILITIES			
Trade and other payables	10	463,840	378,595
Employee benefits	11	433,725	403,150
Other liabilities	12	1,990,953	1,408,182
Lease liabilities	13	165,499	263,538
TOTAL CURRENT LIABILITIES		3,054,017	2,453,465
NON-CURRENT LIABILITIES			
Employee benefits	11	38,346	64,066
Lease liabilities	13	127,876	87,077
TOTAL NON-CURRENT LIABILITIES		166,222	151,143
TOTAL LIABILITIES		3,220,239	2,604,608
NET ASSETS		19,005,765	16,870,141
EQUITY			
Retained earnings		19,005,765	16,870,141
TOTAL EQUITY		19,005,765	16,870,141

The accompanying notes form part of these financial statements.



Walgett Aboriginal Medical Service Limited

ABN: 78 014 990 451

Statement of Changes in Equity

For the Year Ended 30 June 2022

2022

	Retained Earnings	Total
	\$	\$
Balance at 1 July 2021	16,870,141	16,870,141
Surplus/ (deficit) attributable to members of the Corporation	2,135,624	2,135,624
Balance at 30 June 2022	19,005,765	19,005,765

2021

	Retained Earnings	Total
	\$	\$
Balance at 1 July 2020	15,360,508	15,360,508
Surplus/ (deficit) attributable to members of the Corporation	1,509,633	1,509,633
Balance at 30 June 2021	16,870,141	16,870,141

The accompanying notes form part of these financial statements.



Walgett Aboriginal Medical Service Limited

ABN: 78 014 990 451

Statement of Cash Flows For the Year Ended 30 June 2022

	2022	2021
Note	\$	\$
CASH FLOWS FROM OPERATING ACTIVITIES:		
Receipts from customers	940,312	886,083
Receipts from government grants	10,848,130	10,462,209
Donations received	15,971	57,329
Payments to suppliers and employees	(7,816,193)	(8,762,205)
Interest received	2,492	6,182
Net cash provided by/(used in) operating activities	18 <u>3,990,712</u>	<u>2,649,598</u>
CASH FLOWS FROM INVESTING ACTIVITIES:		
Proceeds from sale of plant and equipment	131,818	-
Purchase of property, plant and equipment	(846,006)	(3,909,279)
Net cash provided by/(used in) investing activities	<u>(714,188)</u>	<u>(3,909,279)</u>
CASH FLOWS FROM FINANCING ACTIVITIES:		
Lease payments	(281,406)	(210,987)
Net cash provided by/(used in) financing activities	<u>(281,406)</u>	<u>(210,987)</u>
Net increase/(decrease) in cash and cash equivalents held	2,995,118	(1,470,668)
Cash and cash equivalents at beginning of year	<u>5,325,051</u>	<u>6,795,719</u>
Cash and cash equivalents at end of financial year	6 <u><u>8,320,169</u></u>	<u><u>5,325,051</u></u>

The accompanying notes form part of these financial statements.



Walgett Aboriginal Medical Service Limited

ABN: 78 014 990 451

Notes to the Financial Statements For the Year Ended 30 June 2022

The financial report covers Walgett Aboriginal Medical Service Limited as an individual entity. Walgett Aboriginal Medical Service Limited is a not-for-profit Corporation, registered under the *Australian Charities and Not-for-profits Commission Act 2012*.

The functional and presentation currency of Walgett Aboriginal Medical Service Limited is Australian dollars.

The financial report was authorised for issue by the Directors on 14 December 2022.

Comparatives are consistent with prior years, unless otherwise stated.

1 Basis of preparation

The financial statements are general purpose financial statements that have been prepared in accordance with the Australian Accounting Standards - Simplified Disclosure Standard and the Australian Charities and Not-for-profit Commission Act 2012. The Corporation is a not-for-profit entity for financial reporting purposes under Australian Accounting Standards.

The financial statements have been prepared on an accruals basis and are based on historical costs. The amounts presented in the financial report have been rounded to the nearest dollar.

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

2 Summary of significant accounting policies

(a) Revenue recognition

The core principle of AASB 15 is that revenue is recognised on a basis that reflects the transfer of promised goods or services to customers at an amount that reflects the consideration the Corporation expects to receive in exchange for those goods or services. Revenue is recognised by applying a five-step model as follows:

1. Identify the contract with the customer
2. Identify the performance obligations
3. Determine the transaction price
4. Allocate the transaction price to the performance obligations
5. Recognise revenue as and when control of the performance obligations is transferred

Generally the timing of the payment for sale of goods and rendering of services corresponds closely to the timing of satisfaction of the performance obligations, however where there is a difference, it will result in the recognition of a receivable, contract asset or contract liability.

None of the revenue streams of the Corporation have any significant financing terms as there is less than 12 months between receipt of funds and satisfaction of performance obligations.



Walgett Aboriginal Medical Service Limited

ABN: 78 014 990 451

Notes to the Financial Statements For the Year Ended 30 June 2022

2 Summary of significant accounting policies (continued)

(a) Revenue recognition (continued)

Specific revenue streams

The revenue recognition policies for the principal revenue streams of the Corporation are:

Rendering of services

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

Revenue from training services is generally recognised once the training has been delivered.

Grant income

Where grant income arises from an agreement which is enforceable and contains sufficiently specific performance obligations then the revenue is recognised when control of each performance obligations is satisfied.

The performance obligations are varied based on the agreement. Each performance obligation is considered to ensure that the revenue recognition reflects the transfer of control. Within grant agreements there may be some performance obligations where control transfers at a point in time and others which have continuous transfer of control over the life of the contract.

Where control is transferred over time, generally the input methods being either costs or time incurred are deemed to be the most appropriate methods to reflect the transfer of benefit.

Where contracts are either not enforceable or do not have sufficiently specific performance obligations the income is recorded in accordance with AASB 1058.

Amounts arising from the scope of AASB 1058 are recognised at the assets fair value when the asset is received. The Corporation considers whether there are any related liability or equity items associated with the asset which are recognised in accordance with the relevant accounting standard.

Once the assets and liabilities have been recognised then income is recognised for any remaining asset value at the time that the asset is received.

Capital grants

Capital grants received to enable the Corporation to acquire or construct an item of property, plant and equipment to identified specifications which will be under the Corporation's control and which is enforceable are recognised as revenue as and when the obligation to construct or purchase is completed.

For construction projects, this is generally as the construction progresses in accordance with costs incurred since this is deemed to be the most appropriate measure of the completeness of the construction project as there is no profit margin.

For acquisitions of assets, the revenue is recognised when the asset is acquired and controlled by the Corporation.



Walgett Aboriginal Medical Service Limited

ABN: 78 014 990 451

Notes to the Financial Statements

For the Year Ended 30 June 2022

2 Summary of significant accounting policies (continued)

(a) Revenue recognition (continued)

Donations

Donations collected, including cash and goods for resale, are recognised as revenue when the Corporation gains control of the asset.

Rental income

Revenue from rental receipts is recognised in the period the rental relates to and is recorded in accordance with the rental agreement.

Interest revenue

Interest revenue is recognised using the effective interest rate method.

Other income

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

(b) Income tax

The Corporation has been granted an exemption from income tax under section 50-20 of the *Income Tax Assessment Act 1997*. The exempt status of the Corporation applies indefinitely or until such time as a change in circumstances warrants a review of the exempt status.

(c) 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). In these circumstances the GST is recognised as part of the cost of acquisition of the asset or as part of an item of the expense.

Receivables and payable are stated inclusive of GST. The net amount of GST recoverable from, or payable to, the ATO is included with other receivables or payables in the statement of financial position.

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



Walgett Aboriginal Medical Service Limited

ABN: 78 014 990 451

Notes to the Financial Statements

For the Year Ended 30 June 2022

2 Summary of significant accounting policies (continued)

(d) Property, plant and equipment

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

In the event the carrying amount of plant and equipment is greater than its estimated recoverable amount, the carrying amount is written down immediately to its estimated recoverable amount and impairment losses are recognised in the statement of comprehensive income. A formal assessment of recoverable amount is made when impairment indicators are present.

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

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

Buildings are depreciated on a straight-line basis over the assets useful life to the Corporation, commencing when the asset is ready for use.

Plant, equipment and motor vehicles is depreciated on a reducing balance basis over the assets useful life to the Corporation, commencing when the asset is ready for use.

The depreciation rates used for each class of depreciable asset are shown below:

Fixed asset class	Depreciation rate
Buildings	2.5% - 10%
Plant and Equipment	4.5% - 40%
Motor vehicles	20% - 25%

At the end of each annual reporting period, the depreciation method, useful life and residual value of each asset is reviewed. Any revisions are accounted for prospectively as a change in estimate.



Walgett Aboriginal Medical Service Limited

ABN: 78 014 990 451

Notes to the Financial Statements

For the Year Ended 30 June 2022

2 Summary of significant accounting policies (continued)

(e) Financial instruments

Financial instruments are recognised initially on the date that the Corporation becomes party to the contractual provisions of the instrument. For financial assets, this is equivalent to the date the Corporation commits itself to either the purchase or sale of the asset.

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

Trade receivables are initially measured at the transaction price.

Financial assets

Financial assets are subsequently measured at:

- amortised cost; or
- fair value through other comprehensive income.

Financial assets comprising cash and cash equivalents, trade and other receivables and interest bearing deposits are subsequently measured at amortised cost as they meet the following conditions:

- the financial assets are managed solely to collect contractual cash flows; and
- the contractual terms within the financial assets give rise to cash flows that are solely payments of principal and interest on the principal amount outstanding on specified dates.

Derecognition of financial assets

A financial asset is derecognised when the Corporation's contractual rights to its cash flows expires, or the asset is transferred in such a way that all the risks and rewards of ownership are substantially transferred.

All of the following criteria need to be satisfied for derecognition of a financial asset:

- the right to receive cash flows from the asset has expired or been transferred;
- all the risks and rewards of ownership of the asset have been substantially transferred; and
- the Corporation no longer controls the asset.

On derecognition of a financial asset measured at amortised cost, the difference between the asset's carrying amount and the sum of the consideration received and receivable is recognised in profit or loss.

On derecognition of a financial asset classified under fair value through other comprehensive income, the cumulative gain or loss previously accumulated in the financial asset reserve is not reclassified to profit or loss, but is transferred to retained earnings.



Walgett Aboriginal Medical Service Limited

ABN: 78 014 990 451

Notes to the Financial Statements For the Year Ended 30 June 2022

2 Summary of significant accounting policies (continued)

(e) Financial instruments (continued)

Financial liabilities

Financial liabilities are subsequently measured at amortised costs using the effective interest method.

The effective interest method is a method of calculating the amortised cost of a debt instrument and of allocating interest expense in profit or loss over the relevant period.

The effective interest rate is the internal rate of return of the financial asset or financial liability, that is, it is the rate that exactly discounts the estimated future cash flows through the expected life of the instrument to the net carrying amount at initial recognition.

Derecognition of financial liabilities

A liability is derecognised when it is extinguished (i.e. when the obligation in the contract is discharged, cancelled or expires). An exchange of an existing financial liability for a new one with substantially modified terms, or a substantial modification to the terms of a financial liability, is treated as an extinguishment of the existing liability and recognition of a new financial liability.

The difference between the carrying amount of the financial liability derecognised and the consideration paid and payable, including any non-cash assets transferred or liabilities assumed, is recognised in profit or loss.

Impairment

The Corporation recognises a loss allowance for expected credit losses on financial assets that are measured at amortised cost.

A loss allowance is not recognised for investments measured at fair value through other comprehensive income.

Recognition of expected credit losses in financial statements

At each reporting date, the Corporation recognises the movement in the loss allowance as an impairment gain or loss in the statement of comprehensive income.

The carrying amount of financial assets measured at amortised cost includes the loss allowance relating to that asset.

Financial assets measured at fair value through other comprehensive income are recognised at fair value with changes in fair value recognised in other comprehensive income. The amount in relation to change in credit risk is transferred from other comprehensive income to profit or loss at the end of the reporting period.

(f) Impairment of assets

At the end of each reporting period the Corporation determines whether there is an evidence of an impairment indicator for tangible and intangible assets. If such an indication exists, the recoverable amount of the asset, being the higher of the asset's fair value less costs to sell and value in use, is compared to the asset's carrying value. Any excess of the asset's carrying value over its recoverable amount is expensed to the statement of comprehensive income.



Walgett Aboriginal Medical Service Limited

ABN: 78 014 990 451

Notes to the Financial Statements For the Year Ended 30 June 2022

2 Summary of significant accounting policies (continued)

(f) Impairment of assets (continued)

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

Impairment testing is performed annually for intangible assets with indefinite useful lives.

(g) Cash and cash equivalents

Cash and cash equivalents include cash on hand, deposits held at call with banks and other financial institutions, other short-term highly liquid investments with original maturities of twelve months or less, and bank overdrafts. Bank overdrafts are shown within short-term borrowings in current liabilities on the statement of financial position.

(h) Leases

At inception of a contract, the Corporation assesses whether a lease exists - i.e. does the contract convey the right to control the use of an identified asset for a period of time in exchange for consideration.

This involves an assessment of whether:

- The contract involves the use of an identified asset - this may be explicitly or implicitly identified within the agreement. If the supplier has a substantive substitution right then there is no identified asset.
- The Corporation has the right to obtain substantially all of the economic benefits from the use of the asset throughout the period of use.
- The Corporation has the right to direct the use of the asset i.e. decision making rights in relation to changing how and for what purpose the asset is used.

Lessee accounting

The non-lease components included in the lease agreement have been separated and are recognised as an expense as incurred.

At the lease commencement, the Corporation recognises a right-of-use asset and associated lease liability for the lease term. The lease term includes extension periods where the Corporation believes it is reasonably certain that the option will be exercised.

The right-of-use asset is measured using the cost model where cost on initial recognition comprises of the lease liability, initial direct costs, prepaid lease payments, estimated cost of removal and restoration less any lease incentives received.

The right-of-use asset is depreciated over the lease term on a straight line basis and assessed for impairment in accordance with the impairment of assets accounting policy.

The lease liability is initially measured at the present value of the remaining lease payments at the commencement of the lease. The discount rate is the rate implicit in the lease, however where this cannot be readily determined then the Corporation's incremental borrowing rate is used.



Walgett Aboriginal Medical Service Limited

ABN: 78 014 990 451

Notes to the Financial Statements For the Year Ended 30 June 2022

2 Summary of significant accounting policies (continued)

(h) Leases (continued)

Subsequent to initial recognition, the lease liability is measured at amortised cost using the effective interest rate method. The lease liability is remeasured whether there is a lease modification, change in estimate of the lease term or index upon which the lease payments are based (e.g. CPI) or a change in the Corporation's assessment of lease term.

Where the lease liability is remeasured, the right-of-use asset is adjusted to reflect the remeasurement or is recorded in profit or loss if the carrying amount of the right-of-use asset has been reduced to zero.

Exceptions to lease accounting

The Corporation has elected to apply the exceptions to lease accounting for both short-term leases (i.e. leases with a term of less than or equal to 12 months) and leases of low-value assets. The Corporation recognises the payments associated with these leases as an expense on a straight-line basis over the lease term.

(i) Employee benefits

Provision is made for The Corporation'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 payable later than one year 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 not satisfy vesting requirements.

(j) Adoption of new and revised accounting standards

The Corporation has adopted all standards which became effective for the first time at 30 June 2021. The adoption of these standards has not caused any material adjustments to the reported financial position, performance or cash flow of the Corporation.

New but not yet effective standards

At the date of authorisation of these financial statements, several new, but not yet effective, Standards and amendments to existing Standards, and Interpretations have been published by the Australian Accounting Standards Board (AASB). None of these Standards or amendments to existing Standards have been adopted early by the Corporation.

The Directors anticipates that all relevant pronouncements will be adopted for the first period beginning on or after the effective date of the pronouncement. New Standards, amendments and Interpretations not adopted in the current year have not been disclosed as they are not expected to have a material impact on the Corporation's financial statements.

3 Critical accounting estimates and judgements

The directors make estimates and judgements during the preparation of these financial statements regarding assumptions about current and future events affecting transactions and balances.

These estimates and judgements are based on the best information available at the time of preparing the financial statements, however as additional information is known then the actual results may differ from the estimates.



Walgett Aboriginal Medical Service Limited

ABN: 78 014 990 451

Notes to the Financial Statements For the Year Ended 30 June 2022

3 Critical accounting estimates and judgements (continued)

The significant estimates and judgements made have been described below.

Key estimates - impairment property, plant and equipment

The Corporation assesses impairment at the end of each reporting period by evaluating conditions specific to the Corporation that may be indicative of impairment triggers. Recoverable amounts of relevant assets are reassessed using value-in-use calculations which incorporate various key assumptions.

Key estimates - employee benefits

For the purpose of measurement, AASB 119: *Employee Benefits* defines obligations for short-term employee benefits as obligations expected to be settled wholly before 12 months after the end of the annual reporting period in which the employees render the related services. As the Corporation expects that most employees will not use all their annual leave entitlements in the same year in which they are earned or during the 12-month period that follows, the directors believe that obligations for annual leave entitlements satisfy the definition of other long-term employee benefits and, therefore, are required to be measured at the present value of the expected future payments to be made to employees.

Key judgements - COVID-19 impact on the financial statements

On 11 March 2020, the World Health Organisation declared a global pandemic in relation to the COVID-19 virus.

Compliance with Government Regulations designed to reduce the spread of COVID-19 have had a detrimental impact on the industry the Corporation operates in. However, due to government grants received during the financial year the COVID-19 virus has had very little impact on the operating result of the Corporation.

As of 30 June 2022, the Corporation had net working capital of \$5,478,988 and no long term debt.

The directors have prepared projected cash flow information for the twelve months from the date of approval of these financial statements taking into consideration the estimation of the continued business impacts of COVID-19. These forecasts indicate that, taking account of reasonably possible downsides, the Corporation is expected to continue to operate, with headroom, within available cash levels.

Based on these forecasts, the directors believe that it remains appropriate to prepare the financial statements on a going concern basis and the Directors have a reasonable expectation that the Corporation will remain a going concern for at least the next twelve months.



Walgett Aboriginal Medical Service Limited

ABN: 78 014 990 451

Notes to the Financial Statements For the Year Ended 30 June 2022

4 Revenue and other income

(a) Revenue from continuing operations

	2022	2021
Note	\$	\$
Dental revenue	11,246	16,807
Doctor's fees	785,210	1,122,929
Government grants and other assistance	4(c) 9,991,006	9,436,207
	<u>10,787,462</u>	<u>10,575,943</u>

(b) Other income

Donations	15,971	57,329
Insurance recoveries	43,922	53,547
Interest	2,492	6,182
Net gain on disposal of property, plant and equipment	16,695	-
Recovered expenses	51,192	26,541
Rent received	55,420	53,277
Sundry income	10,437	7,033
	<u>196,129</u>	<u>203,909</u>

(c) Government grants and other assistance

	2022
	\$
Government revenue (including grants)	
Commonwealth government	
Department of Health and Aged Care	6,896,410
National Aboriginal Community Controlled Health Organisation	112,590
National Indigenous Australians Agency	873,692
Pharmacy Programs Administrator	27,523
Western NSW Primary Health Network	94,773
Total	<u>8,004,988</u>
State government	
Aboriginal Affairs NSW	720
NSW Ministry of Health	1,589,150
Total	<u>1,589,870</u>
Other grants and assistance	
Aboriginal Health & Medical Research Council of NSW	11,250
NSW Rural Doctors Network	300,227
UNSW Sydney	84,671
Total	<u>396,148</u>
Total government grants and other assistance	<u>9,991,006</u>



Walgett Aboriginal Medical Service Limited

ABN: 78 014 990 451

Notes to the Financial Statements For the Year Ended 30 June 2022

5 Result for the year

The result for the year includes the following specific expenses:

	2022	2021
	\$	\$
Depreciation and amortisation expense		
- buildings	9(a) 421,148	280,025
- plant and equipment	9(a) 165,348	113,922
- motor vehicles	9(a) 152,057	159,402
	<u>738,553</u>	<u>553,349</u>
Employee benefit expense		
- employee wages	3,450,086	3,953,433
- movement in provision for employee benefits	470	-
- recruitment costs	56,209	65,308
- salary reimbursements	-	(4,802)
- staff training	41,780	16,151
- subsidies	(14,091)	(18,182)
- superannuation contributions	315,228	359,334
- workers compensation	94,212	78,754
	<u>3,943,894</u>	<u>4,449,996</u>
Impairment of receivables		
- Write off Western NSW Primary Health Network receivables	<u>230,492</u>	-
	<u>230,492</u>	-



Walgett Aboriginal Medical Service Limited

ABN: 78 014 990 451

Notes to the Financial Statements For the Year Ended 30 June 2022

6 Cash and cash equivalents

	2022	2021
	\$	\$
Cash on hand	925	453
Bank balances	7,696,989	4,703,894
Short-term deposits	622,255	620,704
	<u>8,320,169</u>	<u>5,325,051</u>

(a) Reconciliation of cash

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:

Cash and cash equivalents	<u>8,320,169</u>	5,325,051
	<u>8,320,169</u>	<u>5,325,051</u>

7 Trade and other receivables

CURRENT		
Trade receivables	<u>23,177</u>	510,907
	<u>23,177</u>	<u>510,907</u>

A receivable represents the Corporation's right to an amount of consideration that is unconditional (i.e., only the passage of time is required before payment of the consideration is due). They are generally due for settlement within 30 days and therefore are all classified as current. Trade receivables are recognised initially at the amount of consideration that is unconditional unless they contain significant financing components when they are recognised at fair value and subsequently measured at amortised cost using the effective interest method.

8 Other assets

CURRENT		
Prepayments	<u>189,659</u>	162,288
	<u>189,659</u>	<u>162,288</u>



Walgett Aboriginal Medical Service Limited

ABN: 78 014 990 451

Notes to the Financial Statements For the Year Ended 30 June 2022

9 Property, plant and equipment

	2022	2021
	\$	\$
Freehold land		
At cost	208,984	31,057
Total Land	<u>208,984</u>	<u>31,057</u>
Buildings		
At cost	16,510,246	10,299,851
Accumulated depreciation	(4,381,809)	(3,960,661)
Total buildings	<u>12,128,437</u>	<u>6,339,190</u>
Capital works in progress		
At cost	-	5,876,710
Total capital works in progress	<u>-</u>	<u>5,876,710</u>
Plant and equipment		
At cost	2,556,024	2,369,718
Accumulated depreciation	(1,783,870)	(1,618,522)
Total plant and equipment	<u>772,154</u>	<u>751,196</u>
Motor vehicles		
At cost	1,118,696	1,041,563
Motor Vehicles	(535,272)	(563,213)
Total motor vehicles	<u>583,424</u>	<u>478,350</u>
Total property, plant and equipment	<u>13,692,999</u>	<u>13,476,503</u>



Walgett Aboriginal Medical Service Limited

ABN: 78 014 990 461

**Notes to the Financial Statements
For the Year Ended 30 June 2022**

9 Property, plant and equipment (continued)

(a) Movements in carrying amounts

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

	Capital works in progress	Land	Buildings	Plant and equipment	Motor vehicles	Total
	\$	\$	\$	\$	\$	\$
Year ended 30 June 2022						
Balance at the beginning of year	5,876,710	31,057	6,339,190	751,196	478,350	13,476,503
Additions	-	177,927	333,685	186,306	372,254	1,070,172
Disposals	-	-	-	-	(115,123)	(115,123)
Transfers	(5,876,710)	-	5,876,710	-	-	-
Depreciation expense	-	-	(421,148)	(165,348)	(152,057)	(738,553)
Balance at the end of the year	-	208,984	12,128,437	772,154	583,424	13,692,999



Walgett Aboriginal Medical Service Limited

ABN: 78 014 990 451

Notes to the Financial Statements

For the Year Ended 30 June 2022

10 Trade and other payables

	2022	2021
	\$	\$
CURRENT		
Trade payables	323,344	274,031
Credit cards	2,808	322
GST payable	42,145	22,770
Other payables	16,985	8,503
PAYG withholding payable	49,491	47,401
Superannuation payable	29,067	25,568
	<u>463,840</u>	<u>378,595</u>

Trade and other payables are carried at amortised cost and represent the liabilities for goods and services received by the Corporation during the reporting period that remain unpaid at the end of the reporting period. The balance is recognised as a current liability with the amounts normally paid within 30 days of recognition of the liability. Trade and other payables are initially measured at fair value and subsequently measured at amortised cost using the effective interest method.

11 Employee benefits

CURRENT		
Provision for employee benefits	433,725	403,150
	<u>433,725</u>	<u>403,150</u>
NON-CURRENT		
Provision for employee benefits	38,346	64,066
	<u>38,346</u>	<u>64,066</u>

12 Other liabilities

CURRENT		
Unexpended government grants	1,990,953	1,408,182
	<u>1,990,953</u>	<u>1,408,182</u>



Walgett Aboriginal Medical Service Limited

ABN: 78 014 990 451

Notes to the Financial Statements For the Year Ended 30 June 2022

13 Leases

Corporation as a lessee

The Corporation has leases over a range of motor vehicles.

The Corporation has chosen not to apply AASB 16 to leases of intangible assets.

Information relating to the leases in place and associated balances and transactions are provided below.

Terms and conditions of leases

The Corporation leases motor vehicles with lease terms varying from 2 - 3 years, the lease payments are fixed during the lease term. No new motor vehicle leases were entered into during the financial year ended 30 June 2022.

The Corporation entered into a lease agreement for the installation of solar panels. Base instalments are \$3,090.78 ex. GST for a term of 60 months. The end of term residual value is \$38,719 ex. GST.

(a) Lease liabilities

	2022	2021
	\$	\$
CURRENT		
Motor vehicle leases	87,078	263,538
Solar panels lease	78,421	-
	<u>165,499</u>	<u>263,538</u>
NON-CURRENT		
Motor vehicle leases	-	87,077
Solar panels lease	127,876	-
	<u>127,876</u>	<u>87,077</u>

(b) Maturity analysis

Minimum lease payments:

- not later than one year	128,410	282,474
- between one year and five years	164,514	87,612
- later than 5 years	-	-
	<u>292,924</u>	<u>370,086</u>

14 Key management personnel remuneration

Key management personnel are those persons having authority and responsibility for planning, directing and controlling the activities of the Corporation, directly or indirectly, including any director (whether executive or otherwise) of that Corporation.

The total remuneration paid to key management personnel of the Corporation is \$ 716,626 (2021: \$714,062).



Walgett Aboriginal Medical Service Limited

ABN: 78 014 990 451

Notes to the Financial Statements For the Year Ended 30 June 2022

15 Contingencies

In the opinion of the Directors, the Corporation did not have any contingencies at 30 June 2022 (30 June 2021:None).

16 Related parties

(a) The Corporation's main related parties are as follows:

Key management personnel - refer to Note 14.

Other related parties include close family members of key management personnel and entities that are controlled or significantly influenced by those key management personnel or their close family members.

(b) Transactions with related parties

Transactions between related parties are on normal commercial terms and conditions no more favourable than those available to other parties unless otherwise stated.

Amounts paid to employees whom are close family members of Directors total \$200,834 for the financial year ended 30 June 2022.

Close members of the Directors family include:

- a) The Directors children and spouse or domestic partner;
- b) Children of the Director's partner; and
- c) Dependants of the Director or the Director's spouse or domestic partner.

There have been no other transactions with related parties during the financial year.



Walgett Aboriginal Medical Service Limited

ABN: 78 014 990 451

Notes to the Financial Statements

For the Year Ended 30 June 2022

17 Auditors' remuneration

	2022	2021
	\$	\$
Remuneration of the auditor Ryan and Rankmore Chartered Accountants, for:		
- auditing the financial statements	30,250	24,750
	<u>30,250</u>	<u>24,750</u>

18 Cash flow information

(a) Reconciliation of result for the year to cash flows from operating activities

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

Surplus/ (deficit) for the year	2,135,624	1,509,633
Cash flows excluded from profit attributable to operating activities		
Non-cash flows in profit:		
- depreciation	738,553	553,349
- impairment of receivables	230,492	-
- net (gain)/loss on disposal of investments	(16,695)	100,115
Changes in assets and liabilities:		
- (increase)/decrease in trade and other receivables	257,238	(261,612)
- (increase)/decrease in prepayments	(27,371)	(162,288)
- increase/(decrease) in income in advance	582,771	1,026,002
- increase/(decrease) in trade and other payables	85,245	92,431
- increase/(decrease) in employee benefits	4,855	(208,032)
Cash flows from operations	<u>3,990,712</u>	<u>2,649,598</u>

19 Events occurring after the reporting date

The financial report was authorised for issue on 14 December 2022 by the board of directors.

On 11 March 2020, the World Health Organisation declared a global pandemic in relation to the COVID-19 virus.

Compliance with Government Regulations designed to reduce the spread of COVID-19 are expected to have a continuing detrimental impact on the operations of the Corporation during the 2023 financial year. However, due to the uncertainty in relation to the extent of containment of the virus, it is not possible to reliably estimate the effect of this matter on the results of the operations of the Corporation in future financial years.

Except for the above, no other matters or circumstances have arisen since the end of the financial year which significantly affected or could significantly affect the operations of the Corporation, the results of those operations or the state of affairs of the Corporation in future financial years.



Walgett Aboriginal Medical Service Limited

ABN: 78 014 990 451

Notes to the Financial Statements For the Year Ended 30 June 2022

20 Statutory information

The registered office and principal place of business of the Corporation is:

Walgett Aboriginal Medical Service Limited
37 Pitt Street
Walgett NSW 2832



Walgett Aboriginal Medical Service Limited

ABN: 78 014 990 451

Directors' Declaration

The directors of the Corporation declare that:

1. The financial statements and notes, as set out on pages 5 to 27, are in accordance with the *Australian Charities and Not-for-profits Commission Act 2012* and:
 - a. comply with Australian Accounting Standards - Simplified Disclosure Standard; and
 - b. give a true and fair view of the financial position as at 30 June 2022 and of the performance for the year ended on that date.
2. In the directors' opinion, there are reasonable grounds to believe that the Corporation 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

Mary Purse

Director

Carol Janissen

Dated 14 December 2022



PRINCIPALS
Kevin Rankmore B.Bus. CA. ACIS, ASCA, DipFP
Roger Estens B.Fin Admin, CA, DipFP
Mark Riley B.Bus, CA
administrator@ryanrank.com
www.ryanrank.com

Independent Audit Report to the members of Walgett Aboriginal Medical Service Limited

Report on the Audit of the Financial Report

Qualified Opinion

We have audited the financial report of Walgett Aboriginal Medical Service Limited (the Corporation), which comprises the statement of financial position as at 30 June 2022, the statement of profit or loss and other comprehensive income, the statement of changes in equity and the statement of cash flows 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, except for the effects of the matter described in the *Basis for Qualified Opinion* section of our report, the accompanying financial report of the Corporation is in accordance with the *Australian Charities and Not-for-profits Commission Act 2012*, including:

- (i) giving a true and fair view of the Corporation's financial position as at 30 June 2022 and of its financial performance for the year ended; and
- (ii) complying with Australian Accounting Standards - Simplified Disclosure Standard and Division 60 of the *Australian Charities and Not-for-profits Commission Regulation 2013*.

Basis for Qualified Opinion

We could not determine if the balance of buildings recorded in note 9 is carried at more than its recoverable amount and if the Corporation is required to recognise an impairment loss. Our audit procedures included requesting a valuation of the buildings to determine if any impairment should be recognised, however, management were unable to provide such a report. As a result, we were not able to satisfy ourselves whether there is any indication that the buildings balance of \$12,128,437 was impaired.

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Report* section of our report. We are independent of the Corporation 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 Division 60 of the *Australian Charities and Not-for-profit Commission Act 2012*, which has been given to the directors of the Corporation, would be in the same terms if given to the directors as at the time of this auditor's report.

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

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1 Swift Street
PO Box 40
Wellington NSW 2820
T 02 6845 2177
F 02 6845 3373

Chartered Accountants

Dubbo Office
113-115 Darling Street
PO Box 1014
Dubbo NSW 2830
T 02 6884 4474
F 02 6845 3373

Registered Company Auditors

Gilgandra Office
35 Miller Street
PO Box 109
Gilgandra NSW 2827
T 02 6847 2177
F 02 6847 2656

Business Advisors



Liability limited by a scheme approved under the Professional Standards Legislation



FINANCE AND ADMINISTRATION REPORT JULY 2021 TO JUNE 2022

Introduction

The Finance and Administration Department has two main functions;

- 1) Maintain the Financial records of the organisation. This includes payroll, prepare the accounts for audit and provide financial reporting to the funding bodies.
- 2) Provide Administrative support to WAMS. This includes but is not limited to; handling accommodation and travel bookings for visiting specialists and staff, coordinating external trades, purchases, insurance schedules, Asset registers and other files.

Thanks to WAMS's Auditing firm, Ryan and Rankmore, Kevin Rankmore, Jason Brown and their audit team for all their hard work in getting the audit completed.

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

- The Australian Government Department of Social Services (DSS)
- The National Indigenous Australians Agency (formerly The Australian Government Department of the Prime Minister and Cabinet)
- The NSW Ministry of Health
- The Western Local Health District
- NSW Rural Doctors Network
- Western NSW Primary Health Network

Staffing

Finance/Admin personnel:

- | | |
|--------------------|----------------------------|
| • Mathew Baker | Manager Finance |
| • Sally Barton | Team Leader Administration |
| • Mellisa Timmins | Finance Assistant |
| • Melissa Beacroft | Administration Assistant |
| • Jessica Graham | Administration Assistant |

Cleaning Team personnel:

- | | |
|--------------------|-------------|
| • Caran Doolan | Team Leader |
| • Kerry Kennedy | |
| • Deborah Fernando | |
| • Anne Peacock | |
| • Robyn Cran | |
| • Jennina Doolan | |
| • Helen Sharpley | |

Overview

WAMS finished the year with a total funding and other revenues of \$12.8 million including \$0.78 million in Medicare, down from the previous year as we continue to feel the lasting effects of COVID restrictions and flooding. WAMS has continued to develop new capital equipment, dental equipment, renovations of WAMS facilities and accommodations.



Walgett

It has been a difficult and busy year in Walgett. With an end to lockdowns we have finally been able to start making some head way on our capital works projects. We have finalised our initial solar panel installation and have already started seeing savings on our electricity expenses. And planning commenced for several projects including Carpark and clinic renovations.

With thanks to the Australian Government Department of Social Services, NSW Ministry of Health and NACCHO we saw further increases to our funding for COVID/pandemic response measures and vaccinations via our Respiratory Clinic.

We also lodged successful applications to both Australian Government Department of Social Services and the NSW Ministry of Health Capital grants for funding of additional renovation and maintenance and building repairs for the Clinic and Admin Buildings.

WAMS also participated in the Indigenous Health Pharmacy Support Program. University of NSW funding for an ongoing food and water program and Early Childhood safety program. NACCHO also provided funding to assist with the ongoing development of our National Disability Insurance Scheme service setup. The Dept. of Aboriginal affairs and the Dept. of Premier and Cabinet have provided one of funding for our Freedom Ride installation.

Brewarrina

Brewarrina also faced a busy and challenging year. And similarly, the end of lockdowns has led to plans being drawn up to compete several capital works and maintenance projects including security for accommodation and improvements to facilities at Brewarrina.

Additional staff accommodation was purchased from Funds provided by the Australian Government Department of Social Services and plans were drawn up to relocate our demountable accommodation from the Brewarrina Caravan Park to the vacant part of the new premises. This relocation is also being funded by a DSS capital works grant.

Brewarrina also received additional funds for COVID/pandemic response strategies from The Australian Government Department of Social Services, NACCHO and The NSW Ministry of Health.

Conclusion

Overall 2021/22 has been a year of slow recovery with the region coming out of prolonged COVID19 lockdowns, flooding and other disruptions to supply chains and services. Our repairs and maintenance activity continues to be delayed due to staff shortages across the region and economic disruptions affecting the supply of materials. Walgett and Brewarrina are continuing to face these challenges with flexibility and resourcefulness. In closing I would also like to acknowledge the continuing support and advice of the CEO and COM along with my team Mrs. Sally Barton, Mrs. Mellisa Timmins and Mrs Melissa Beacroft in our administration office. Thank you.

MATHEW BAKER
FINANCE MANAGER



CHIEF EXECUTIVE OFFICERS REPORT JULY 2021 TO JUNE 2022

Introduction

WAMS operations has been affected, once again, by the pandemic with the regulations and the restrictions. Walgett had its first positive case in July. The following month the community was in lockdown. Some people were isolated from their daily family support as well as access to food and social care. I sincerely thank the diligent work of our staff to ensure community members received medical and welfare contacts, as well as understand what it means to live with COVID.

At the beginning of the 2022 calendar year, Walgett saw positive cases identified in the first week. Staff worked with other local and regional front line emergency services, who are members of the Local Emergency Management Committee (LEMC), to ascertain positive cases, arrange alternate accommodation (the installation of mobile homes at the main football oval), and ensure people had access to food. My sincere appreciation is extended to our partners in Health, personnel of Walgett's Western Local Health District, particularly under the strong leadership of the Health Service Manager.

Wet weather continued in the second quarter of this reporting period. Before the festive season, the Naomi and Barwon rivers were in flood, with some families having to move out of their homes. Knowing that once the water recedes, an infestation of sandflies and mosquitos will occur, WAMS re-commenced social calls to members of the community delivering packs of PPE which included insect repellents.

Winds of Change (once more)

It comes as no surprise for those working in the health industry the difficulties our workforce is experiencing, both in recruitment, inadequate staffing levels, aged and hospital care service and also visiting health professionals. In December, WAMS lodged a submission to the "Health Inquiry into Health Outcomes and Access to Health and Hospital Services in rural, regional and remote NSW". Staff also gave evidence at a schedule hearing for health agencies and local government within the Walgett Shire. It appears that the State Government shall provide a formal update at the beginning of the new financial year.

The announcement by the state Government to establish a portfolio for regional health saw the appointment of the Hon. (Bronnie) Taylor, MLC who held several portfolios including Minister for Women, Minister for Regional Health and Minister for Mental Health. Additionally, Luke Sloane is appointed as the Coordinator General for the Regional Health Division. Both he and Brendon Cutmore (seconded from the Western Local Health District) Director Information and Performance Support, visited WAMS as part of the introductory meet and greet around the north-west.

The ongoing pandemic has impacted the ability to provide our core primary health care activities. The COVID clinic remained opened for part of the reporting period with staff conducting PCR testing. Where possible, staff conducted testing at people's residences, as well as on site at our facility. Staff were surprised to receive deliveries of light refreshments from several donors who expressed their gratitude of the work conducted.

We have been fortunate to receive donations of Personal Protection Equipment (PPE), sanitisers, RAT testing, gloves and masks. These units have been delivered around people in the Walgett township, to other agencies, as well as to outlying communities that we conduct outreach clinics.

Quality

To ensure personnel Contracts and Job Descriptions are aligned with legislative and corporate regulations as well as staff appraisals, an HR service has been engaged. Having a professional and qualified agency with personnel who have worked for many years in the ACCHO sector, affirms WAMS commitment to securing people who are au fait with the philosophies. Staff were invited to speak about their own issues about work performances.

WAMS have prepared themselves for a review to be undertaken to be organisationally re-accredited. Both Directors, staff, stakeholders and consumers will have an opportunity to share their experiences of WAMS and its service delivery.

Celebrating over 36 years of Service since 1986



An initial meeting was held for Directors and staff in early 2022, to be familiar with the processes of accreditation, responsibilities of both layers of WAMS businesses, to produce documents and records that meet the standards of such certification. After several delays, the actual review was conducted the last week of this financial year. It shall be some time before an outcome is received.

Quality in Operation

Preliminary consultations commenced with external contractors to meet both Directors and staff for the first draft of the WAMS three-year Strategic Plan. The document will compliment both our funding requirements, legislative obligations, industrial rulings and meeting accreditation standards. A twelve-month Business Plan shall be compiled to steer the internal operations via executive personnel to their respective team members. Operations, whether delivered daily, weekly and beyond, are measured for performance with feedback supplied via our internal evaluation reports.

An application was lodged with the NDIS Commission to be eligible to deliver programs under the National Insurance Disability Scheme (NDIS). An external agent is engaged to review existing Policies and Procedures, clinical and medical documents, which may need modification. We expect to be notified in the first half of the new financial year.

Representing WAMS

Having associations with agencies and individuals that progress our operations, is essential to creating “wrap around” programs for clients and community events.

During the reporting period my membership as Aboriginal Health and Medical Research Council of NSW (AHMRC) representative ceased for the Rural Doctors Network, as well as a zone representative for AHMRC/ACCHO members across NSW. Whilst formal association has ended, contact continues with both entities for the operations of our ACCHO's. Both BAMS and WAMS personnel had representation on the Western Primary Health Network's (PHN) Aboriginal Health Advisory Committee. The term “Advisory” does not offer direct influence or decision making for determination of service delivery. The decision to withdraw membership of an Advisory committee was with regret and due consideration of a tenure to be deemed as an “adviser”.

Visiting WAMS

Visitors are offered internal printed materials of our businesses, including the Annual report, Profile of Services, internal pictorial articles and various booklets that we have designed on nutrition, culture and language. With COVID restrictions changing during this year, very few on-site visits occurred.

The Minister for Health, the Hon Brad Hazzard. MP, conducted a regional tour in September. He paid WAMS a visit, to meet staff and discuss with them how they were managing both client and community responses to the pandemic. He heard of inaccurate reporting about COVID cases therefore causing unnecessary anxiety and stress to some community members.

In December the Governor General, His Excellency the Honourable David Hurley AC DSC (retired) and his wife, Her Excellency Mrs Linda Hurley officially opened Walgett's PCYC. They offered some of their time to attend WAMS facilities, including the community garden, and to converse with Directors and staff representatives.

Quality in Culture

Gamilaraay language continues to be expanded across our facilities. The next stage of signage for door entries has occurred for the Board room, Community Hall, kitchens and vaccine clinic. Frank Wright's art work of “My Home, My Country” is now affixed to the entrances as well. Further displays of his works are being planned.

An internal “way finder” shall be constructed and completed in the following reporting period. The signage shall offer directions to WAMS work places, both in English and in Gamilaraay language. Discussions are underway to record the overall culture and history of WAMS over the past thirty five years.



WAMS-owned snake puzzle is offered as an introduction to internal staff orientation. This educational and teaching resource is also available to local agencies, government and non-government entities.

Cultural mentors, who are a local couple with family connections at Walgett and Goodooga, returned to WAMS to offer a workshop to staff. Discussions surrounded Aboriginal alphabet and language, identifying plants and cultural safety. Staff feedback has been positive in regards to their presentations. Given WAMS have a regular turnover of staff due to both personal and professional reasons, a further workshop shall be conducted before the end of the calendar year.

The first collection of information for the Freedom Ride display has commenced. Land has now been purchased, which is situated in the main street. Several people have replied and offered documentation on their recall from family members of their involvement at this time. Submissions were lodged for the three stages of the display – the art/panelling with narrative and graphics, I.T. access (using QR coding) and the landscaping for native gardens. Visits to various archival institutions is being planned in the following financial year.

Collegiate Working Arrangements

Arrangements are designed according to health care offered to clients of our organisation from Memorandums of Understandings, Service Level Agreements or Project-driven Contracts. Such partners are involved in the fields of child care, Community Working Parties, personnel in Western Local Health District programs, elders health and wellbeing, employment services, eye care, Family Planning NSW, government and non-government related businesses, hearing screen, innovative training program with the University of Newcastle, Lands Councils, Local Government, oral health, philanthropic support for the community garden, Police, rehabilitation centre, REDI.E, RFDS, Schools (from pre-school to secondary school) men's and women's programs.

Meetings held with WAMS and Dharriwaa Elders Group (DEG) Directors and senior personnel have commenced to discuss collaborative relationships. Additionally, continue to support our health and well-being programs. Combined working groups entitled "Food and Water for Life", "Meal of the Month" as well as the ongoing development of the community garden has allowed us to expand both the produce offered to clients as well as clients of other local government services. DEG donations for BAMS and WAMS of automatic sanitisers was gratefully received.

The training and workforce initiative, (RN on Country), which WAMS has partnered with the University of Newcastle, has not progressed due to monies not being approved. Both agencies shall continue to advocate to Ministers, members of parliament and other significant persons to advise of the benefits of a local-based vocational program. The program is modelled according to the career opportunities as identified by community members as well as structured to opt into a range of tertiary professions.

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

The AHMRC continues to advocate the ACCHO across the state of NSW. Their representation at a national level for COVID meetings, ability to secure resources, and recruit locum personnel, allowed the members capacity to manage the logistics involved with the ongoing pandemic.

It was pleasing to learn of the establishment of a new ACCHO at Gilgandra, under the management of Coonamble ACCHO. WAMS personnel attended the opening along with other members, funding agencies and government dignitaries to celebrate a momentous milestone.

National Aboriginal Community Controlled Health Organisation (NACCHO)

NACCHO is the primary advocate for ACCHO's across the nation. Their networks in the health fields have particularly assisted local members during the pandemic. Personnel from the national office communicated with ACCHO members via webinars for general conference, workshops, information sessions, etc. The secretariat were also given the opportunity to assist ACCHO's across the nation to source grant funding to conduct COVID-related activities.



Community Events/Health Promotion Programs

With COVID regulations (e.g. social distancing, wearing masks, and sanitiser applications), some meetings and events were held. Listed are the meetings and events that staff attended both on site and via webinars;

AECG	SRG	School Awards	ANZAC
Local Community Working Party	International Women's Day	Police Aboriginal Advisory Council	Local Interagency
St Joseph's Primary School	Local High and Primary Schools	Family Planning NSW	LEMC
Walgett Shire Council Harmony Day	Walgett Shire Council Reconciliation	Walgett Shire Council Australia Day	Walgett Shire Council Sorry Day
Walgett Shire Council Meet and greet event	WAMS Christmas for children deferred due to floods	WAMS Christmas raffle – vouchers purchased to boost local economy	Tour de OROC (fund raising for Macquarie Home Stay, Dubbo)

Public information and announcements are essential to the constant changes of the rules and regulations associated with the pandemic, as well as our operations. WAMS regularly re-vamp their social media pages, continue to update our electric signboard as well as the phone message services, and advertise in the local paper. Staff conducted WAMS-led programs and activities, as well as attending community events and other agency led events. Some of which are listed below;

CDAT	Youth Week	Xmas Raffle	Walgett Show	ANZAC Day	Children's Day
Children's Health Checks (Primary schools)	Health Checks (High School)	Elders Health Checks	NAIDOC celebrations (deferred due to COVID restrictions)	Bro speak and Sista speak	COVID daily client calls
Men's Health Checks	Women's Health Checks	Dharriwaa Elders Group	Remembrance Day	Fruit and vegetable deliveries	International Women's Day

Closing Comments

COVID continues to limit local service delivery, referrals pathways away from Walgett, and also allow travelling services to our business. It is concerning that our clients and our business have had to delay elements of their operations both clinically and commercially.

The decision to close Walgett's only nursing home facility will have severe consequences for our frail and aged members of the community. This will not only have a detrimental impact on members of the community who are currently residents of the facility, but leave no opportunity for senior members to spend their twilight years at their "home".

At the end of the financial year, I was required to take leave. My sincere gratitude is extended to the Directors who supported my absence. I thank Ms Katrina Ward who stepped into my role, and also extend appreciation to staff who responded to, and acted on, the operational directives. To the Directors, I thank you for your governance and leadership. To the staff, your clinical care and advocacy is beyond reproach to our clients as well as forging collegiate relationships with significant individuals and agencies for the delivery of quality health services.

CHRISTINE CORBY, OAM
CHIEF EXECUTIVE OFFICER



CHIEF OPERATIONS MANAGER REPORT JULY 2021 TO JUNE 2022

Introduction

I am fortunate to be appointed WAMS first Chief Operations Manager (COM) on the 1st of July 2021. The COM provides cultural leadership across the organisation and is responsible for the management and growth of all public health and social and emotional wellbeing programs to ensure that operations are managed effectively and achieve agreed program performance indicators. This role also supports the CEO's achievement of organisational objectives and facilitates delivery of business operations across both WAMS and BAMS. The position also includes overseeing Human Resources (HR) and recruitment following the resignation of the HR Manager the previous year. HR matters have been contracted out to a private company, HR Abundance, following difficulties sourcing a replacement HR Manager. This initiative has been beneficial as it has provided the pathway for updating essential documentation related to human resources and recruitments such as, employee contracts, job descriptions, performance appraisals and recruitment processes etc.

COVID

The ongoing impact of the Covid 19 pandemic has impacted the workforce with staff shortages continuing during the reporting period. Both WAMS and BAMS have been very fortunate to have had their existing staff, especially the Aboriginal Health Workers who "stepped up" and excelled to protect and provide genuine care to both communities as front-line workers way beyond the role and duty for which they were employed. Staff have upskilled through receiving additional training in operating Point of Care Testing techniques and vaccination processes which I am very grateful. Without staff willingness and commitment to WAMS it would be difficult to provide such essential and professional service for the local and surrounding communities. COVID 19 regulations played major havoc to normal operations but with ongoing support and teamwork staff were able to adapt and be flexible within their work roles to provide the services required at any given time. Staff adjusted and encouraged community members to adhere to NSW Health recommendations of complying with PPE regulations such as maintaining social distancing, hand sanitising and wearing face masks to reduce the risk of infection of this catastrophic virus.

Vaccine clinics were operating in full force in both communities including communities that we provide an outreach service. We were very fortunate to have received assistance from the RFDS and the University of Newcastle who provided 5 Registered Nurses to assist with the vaccination clinics when the demand was at its peak. Along with the vaccination clinic WAMS had the GP Respiratory Clinic that was providing GENEX Testing for the community which was also utilised by local businesses for protection of their staff after the lockdown was lifted. This provided results quickly limiting the spread of the disease. With the continual changing of rules by the NSW Government WAMS saw a lot of changes in regulations to keep up to date. This was proven to be difficult but as a business the changes were achieved with the best results possible. These changes contributed to many hours being worked by staff in addition to their required duties to keep up with providing our communities with the best possible outcome and protection during the pandemic.



Workforce

Unfortunately, the effects of the pandemic and border closures contributed to our full time GP – Dr Deb Hough to resign and relocate to family in Queensland. However, WAMS have been very fortunate to have employed another full time GP in Dr Nina Dowling who has moved to the district permanently. With three Medical Centres in Walgett I am very proud to recognise that WAMS was the only organisation to maintain GP services throughout the pandemic. The Pandemic had taken its toll on the staffing of the organisation with an extraordinary amount of leave being taken due to COVID infections and staff exhaustion which, as the Chief Operations Manager, I understood and supported with the aim of preventing such factors with great difficulty. This has led to having a domino effect creating an extraordinarily low level of staffing. Through a lot of advertising and word of mouth many positions were filled by the end of the financial year.

A major success in trying times was to be able to employ both a Clinic and Chronic Disease Manager. These ladies bring to the organisation stability and support for staff through their professionalism and individual skills set which is an achievement in giving both clinics continuity and leadership for staff and community members. Prior to their employment local Aboriginal Health Workers were willing to act up into these positions which at times was not an easy feat. These Acting up Managers required a lot of support in decision making and leadership during very difficult times and I commend them for providing leadership to their peers and ensuring operations of WAMS were maintained. WAMS and BAMS were fortunate to be able to access the Remote ACCHS Workforce Response (RAWR) program which addresses the critical workforce shortage in remote Aboriginal and Torres Strait Islander communities created by the COVID-19 pandemic. This program has been instrumental in backfilling vacancies of Registered Nurses and has assisted in ensuring professional services continue through our organisations. The RAWR program continues to be a vital workforce response to COVID-19 and has helped WAMS/BAMS distribute vaccines throughout the local and surrounding communities.

Accreditation

WAMS as an organisation has been successful in being accredited for a period three years in Quality Assurance with Te Wana following the many hurdles caused by COVID restrictions. This is a wonderful achievement and one that WAMS is very proud to hold. Both WAMS and BAMS clinics are due for their respective accreditations early next financial year following extensions from the accreditation bodies following the impacts of the pandemic. BAMS staff have been working toward achieving the standards to be accredited with AGPAL which was due in August 2022 have been accredited whilst WAMS has had their QPA accreditation extended to 2023.

Conclusion

To conclude, this year may go down as the one to remember or to forget! Although there was continuing impacts of the pandemic there has been many positive changes to WAMS organisational structure and business activities which will be beneficial in the future operations of WAMS and to be able to build on the services presently available. I would like to personally thank all staff who have weathered the storm and continue to be focused on providing improved services for our local and surrounding communities.

KATRINA WARD
CHIEF OPERATIONS MANAGER







Health is Life is Health

ALLIED HEALTH

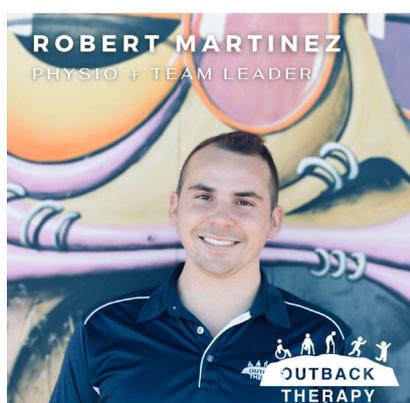


OUTBACK THERAPY

ALLIED HEALTH SERVICES

2021-2022

WALGETT ABORIGINAL MEDICAL SERVICE



OVERVIEW

Outback therapy is a branch of Raymond Terrace Therapy, and provides Allied Health services to Walgett Aboriginal Medical Service (WAMS). The allied health services delivered to WAMS include Physiotherapy, Speech Pathology and Occupational Therapy.

After an eventful year in 2019-20, 2020-21, 2021-22 continues to provide challenges for our Outreach service model with the resurgence of the Covid-19 coronavirus pandemic. Outback Therapy are proud to partner with WAMS and have continued to provide services to the community during these challenging times, through an adaptive service delivery model. 2022 has seen a somewhat return to usual service delivery with increased referrals and uptake of face to face service provision.



Outback Therapy 2021-2022 WAMS



SPEECH PATHOLOGY

ALLIED HEALTH PROFESSIONAL

Miss Bethany Eden
Speech Pathologist (March 2021 - present)

SERVICE PROVIDED

- ❖ Provision of paediatric speech pathology services in the clinic, school, home programs and within the home
- ❖ Provision of Adolescent and Adult speech pathology services in the clinic, community & home consultation
- ❖ Speech, language and literacy; assessment and recommendations
- ❖ Palliative care
- ❖ Mealtime management
- ❖ School Screenings
- ❖ Use of Telehealth services were appropriate
- ❖ Incorporation of WAMS Aboriginal Health Workers in service delivery
- ❖ Resource development: Culturally sensitive Activity Packs, assessments, resources
- ❖ Liaising with & supporting local services; schools, preschools, Western LHD
- ❖ Liaison with project officer of Dharriwaa Elders Group

Over the previous year, Beth (Speech Pathologist) has continued to provide fortnightly Speech Pathology services to WAMS. Beth has supported clients of all ages and abilities to work toward their communication goals.

Beth has been focused on creating positive relationships with local services including the schools, preschools and Western LHD in Walgett. Beth has provided health promotion resources and education sessions which have assisted in an increase in referrals and promotion of how Speech Pathology can support the Walgett community.

Beth has developed a streamlined approach to the Speech Pathology service, there is currently no waitlist for services which ensure more clients are being seen.

The Speech Pathology service continues to be embedded with WAMS service offerings. With the recent opening of a paediatric specific therapy space in the WAMS Chronic Disease Building is very exciting for the Speech Pathology service and will be well loved by clients. We are excited for the future of Speech Pathology at WAMS, to continue enhancing service delivery and utilising the vibrant and welcoming therapy space.



OCCUPATIONAL THERAPY

ALLIED HEALTH PROFESSIONAL

Miss Samara Unwin
Occupational Therapist (2019 - present)

SERVICE PROVIDED

- ❖ Provision of paediatric occupational therapy review and assessments
- ❖ Provision of occupational therapy to adolescents and adults
- ❖ Home programs
- ❖ Play Group intervention / information sessions
- ❖ School Screenings
- ❖ Post care hand and upper limb injury
- ❖ My Aged Care referrals and assessment
- ❖ Equipment prescription and exploration of funding options
- ❖ Funding applications and advocating for individuals
- ❖ Fall prevention and mobility equipment provision
- ❖ Home environment review and modifications recommendations
- ❖ Liaising with and supporting local services; schools, preschools, Western LHD

Over the previous year, Samara (Occupational Therapist) has provided monthly Occupational Therapy outreach services to WAMS. The Occupational Therapy service run through WAMS addresses the needs of all of the community, from paediatrics, to adults, to our elders.

The Occupational Therapy role continues to adapt and incorporate the growing and changing needs within the community. The Therapist has been asked to become involved with ongoing and emerging local groups; such as Local Children's play groups (Goonimoo) and the Elders group.

The service has also adapted through the Covid-19 crisis to offer Telehealth and remote access of WAMS practice software to allow for continued service delivery. This includes indirect client service provision; this may include funding reports for home modification to adapt the home environment to be better suited for individual needs. The Telehealth Service also has addressed issues of geographical isolation for some residents, who are unable to travel, therefore increasing access to service and providing a more inclusive service to the Walgett community.

Occupational Therapy Clinics are also being offered in surrounding areas supported by WAMS service catchment. An OT clinic at Brewarrina Aboriginal Medical Service (BAMS) and clinic in Collarenebri are being trialed. Again, increasing access to remote communities to this service.



PHYSIOTHERAPY

ALLIED HEALTH PROFESSIONAL

Mr Robert Martinez
Physiotherapist (2014 - present)

SERVICE PROVIDED

- ❖ Paediatric physiotherapy review and assessments
- ❖ Physiotherapy services across the age span
- ❖ Musculoskeletal conditions assessment & intervention & Acute conditions
- ❖ Group programs: Cardiorespiratory rehabilitation “ Heart Matters”
- ❖ Chronic and complex disease management
- ❖ Outpatient service provision within the clinic and community
- ❖ Palliative care
- ❖ Complex and chronic pain management
- ❖ Team Leader for Allied health team
- ❖ Incorporation of WAMS Aboriginal Health Workers in service delivery

Over the previous year, Rob Martinez (Physiotherapist) has continued to provide monthly physiotherapy outreach to WAMS. Physiotherapy at WAMS continues to provide a wide ranging physiotherapy service for acute and chronic conditions.

Our physiotherapist welcomed the new Exercise Therapy Room (ETR) and assisted the design and procurement of new exercise equipment to fill the space. The specialised gym equipment allows rehabilitation, improves accessibility and allows variety for exercise. The ETR space allows for individual physiotherapy and larger group exercise.

2022 has seen an influx in physiotherapy referrals, reflective of a strong community need and a strengthened relationship with internal and external referral pathways.

Group programs continue to attract a higher number of participants and enhance access to fun and supervised exercise groups. The physiotherapy led cardiorespiratory rehabilitation, “Heart Matters” continues to be a valuable WAMS service offered to the community, now having two weekly groups. The physiotherapist-led fall prevention group has been developed, stemming from COVID-19 mandated isolation, reduced mobility, social isolation and an increased fall risk and fear of falling.

Physiotherapy is the most established service that Outback Therapy offers to WAMS and Robert is excited to continue to expand these services. The future of Physiotherapy at WAMS will hopefully see more programs being offered & continuation of the above mentioned services and inclusion of physio to Brewarrina Aboriginal Medical Service (BAMS).



Health is Life is Health

BREWARRINA



BREWARRINA REPORT JULY 2020 TO JUNE 2021

Introduction

WAMS continues to maintain the arrangement with Department of Social Services to enable the community of Brewarrina to access quality health care by continuing to manage the operations of the Brewarrina Aboriginal Medical Service (BAMS). The team includes not only qualified and professional staff but also many visiting specialists, allied health professionals and contractors who all work together with a shared goal to improve the overall primary care health outcomes of the local and surrounding communities.

Accreditation

The diligent staff at BAMS continuously work toward improving excellence in the quality of services provided by the team and visiting allied health providers. These achievements are recognised through being successfully accredited with AGPAL Quality in Practice, which was scheduled for review in August 2022 following delays due to interruptions from the impacts of the Covid 19 pandemic. The team continued to strive toward improving their skills and qualifications to provide professional health care services that are welcoming and culturally appropriate for our clientele.

Covid 19 Impacts

This reporting period presented with unprecedented challenges with the impacts of the Covid 19 Pandemic continuing throughout this reporting year. The way business operated dramatically changed with the continuation of Covid screening, social distancing and deep cleaning becoming standard practice. The focus on Covid 19 vaccination became a priority in attempts to remain healthy and free of the ill effects the virus could cause.

Visiting services include:

- General Practitioner - Medical Locum service 5 days a week
- Psychologist – Social Emotional Well Being program, 2 days a week
- Drug and Alcohol counsellor Weekly
- Sexual Health Clinic monthly
- Family Planning – Women’s Health clinic fortnightly
- Podiatry fortnightly
- Ear Nose & Throat Specialist every 3 - 4 months
- Brien Holden Vision Institute quarterly
- Dietician and Physio/exercise program 2 days a week
- HAPEE Hearing quarterly

Services Offered:

Triage, assess and refer clients to appropriate health providers		
Wound care	Clinical services as they present	Chronic Disease Management
Follow up referred clients	Medications review & monitoring	Local Medical Transport
Family planning support	General medical duties	Outreach clinic Orana Haven
Visiting Health Clinics	Health Assessments	Home visits
SEWB Support	Vaccination clinics	GP Consultations
Health education and awareness promotions	Advocate and coordinate health care & referrals	Case management and review with service providers



Healthy for Life Program

- Health Check Clinics

Weilmoringle Primary School	Orana Haven Clients	Community members
Gainmarra-Birralee Pre School	Clontarf Boys Academy	St Patrick's Primary School
	Brewarrina Central School	

- Influenza and COVID 19 vaccination clinics

Brewarrina Central School	Community members	BAMS Staff
Orana Haven	Weilmoringle	

Regional Meetings:

Regional Eye Health Partnership	Suicide Prevention Advisory Group	Bila Muuji Aboriginal Health Service Inc.
Ear Health Advisory Committee	NIAA	RN on Country -UoN
Aboriginal Health Council	WLHD Partnership Planning	

Local Representation:

Interagency Health Meetings	Ngemba Community Working Party	Suicide Prevention Network Initiative
Integrated Care Program	DV Youth Project	NAIDOC Week Celebrations
Tenant Support Family Fun Day	ANZAC March	Remembrance Day
	Local Emergency Management Meetings	

WAMS

Board of Directors Meetings and AGM	CQI Meetings	Healthy 4 Life Regional Meetings
Managers Meeting	WHS Meetings	Transport meetings
Respiratory Clinic	RN on Country	Local Emergency Management Meetings

Conferences / Forums Attended

AHMRC AGM	NACCHO AGM	RDN Forum
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Health Promotion

Health Checks	Covid 19 Awareness	Wellness Packs delivery
School Flu Vaccine Clinic	Homelessness day	Covid positive packs
NAIDOC week	Community Wellbeing Event	Open Day/May Measure Month
White Ribbon Day	Women's Health Awareness	Careers expo
RUOK Day	Child protection Week	Ochre Day



Staff In-services & Training

Covid 19 Immunisation	Covid 19 Infection Control	Cold Chain Breach
Work Health & Safety	Medicare Claiming	First aid/ CPR
Covid 19 Awareness	Covid 19 Vaccination updates	AGPAL /PENCAT
Work Health & Safety	Wound Care Seminar	Retinal Camera refresher
	Certificate 4 AHP PHC	

External Relationships

Brewarrina Multipurpose Service	Mission Australia	McKillop
Western Local Health District	Brewarrina Central School	St Patrick's School
Brewarrina Shire Council	Weilmoringle Public School	Brien Holden Vision Institute
Ngemba Community Working Party	Orana Haven Drug & Alcohol Rehabilitation Centre	Dubbo Western NSW Eye Health Partnership
Primary Health Network	NIAA	AHMRC / NACCHO
Brewarrina Lands Council	Brewarrina Museum	University of Newcastle
Local Emergency Management Committees (LEMC)	Brewarrina Police, Fire & Ambulance Services	Brewarrina Sporting Clubs

Staffing:

- Katrina Ward Chief Operations Manager and Acting CEO (WAMS)
- Bernadette Hertslet Endorsed Enrolled Nurse – Clinic & Team Supervisor
- Dee-Anna Nixon Endorsed Enrolled Nurse - Healthy for Life
- Chris Boney Gardener / Maintenance
- Bronwyn Moore Cleaner (casual)
- Joseph Gordon Trainee AHW
- Gemma Roper Dietitian (commenced January 21)
- Ingrid Beetson Receptionist
- Nekaya Anderson AOW / Admin Support (commenced February 21)
- Belinda Loughnan Medicare Compliance Officer
- Christine Foletti Registered Nurse / Midwife (RAWR Program)
- Noeline Murphy AHW/Cleaner (commenced June 21 – resigned January 2022)
- Beau Williams Coordinator H4L (commenced Jan 21- resigned April 21)
- Claire Williams Registered Nurse (commenced Jan 21 - resigned April 21)

The Chief Operations Manager is responsible for overseeing operations and staff performance of the medical service including, coordinating, and leading clinical services and programs for the local community. This position is a key leadership role where the BAMS team is lead and manage to provide quality health care to local and surrounding communities ensuring all activities undertaken meet legislative, accreditation and professional standards and funding obligations.

- Katrina Ward

General Practitioners are contracted on a locum basis. The visiting GP's are responsible for monitoring and managing the Primary Health Care and Chronic Disease needs of clients. They work alongside the BAMS team to provide medical interventions to improve the overall health and well being outcomes for our communities.

Dr Scott Porter	Dr Mervat Malek	Dr Sue Cory
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Administration Staff are the frontline personnel who often become multi skilled and perform the general office duties that assist in the daily conduct of Clinics and other support services.

- Ingrid Beetson Receptionist

Aboriginal Outreach Program provides an avenue to promote better health and to advocate on client's behalf to access healthcare assistance.

- Nekaya Anderson Aboriginal Outreach Worker / Admin support
- Belinda Loughnan Medicare Compliance Officer

Medical Clinic provides a Locum GP service 5 days a week to enabled people to access a doctor in a timely manner and receive referrals to specialists, medical or surgical treatment and allied health care as required. The clinic team assist the GP's and provide initial medical assessment and care to clients prior to them consulting with the GP.

- Bernadette Hertslet Endorsed Enrolled Nurse
- Joseph Gordon Aboriginal Health Worker
- Christine Foletti Registered Nurse

Healthy for Life Program provides primary health care services to the Brewarrina and surrounding communities including Weilmoringle and Orana Haven Drug & Alcohol Rehabilitation Centre. This team provides the planning and implementation of Health Assessments and GP Management Plans for individuals and assist clients to access the Chronic Disease Programs such as exercise and nutritional programs on offer. Health promotion education and awareness events are also coordinated by the healthy for life team.

- Dee Anna Nixon Endorsed Enrolled Nurse
- Julia Bow Registered Nurse
- Gemma Roper Dietitian
- Annie Deane Exercise Therapist

SEWB / Suicide Prevention Program provides visiting Psychologists who offers culturally appropriate approaches and therapeutic intervention to healing that are strength-based and empowering. A SEWB support worker and Community Development worker also provided ongoing support and education for community members.

- Will Grech Psychologist
- Fran Read Psychologist

Drug & Alcohol Counsellor visits from WAMS weekly and provides services to Brewarrina, which includes individual assessment, counselling, education sessions and health promotion activities.

- Gabby Sledge Drug and Alcohol Network Coordinator

Auxiliary Staff ensure the BAMS grounds and premises are well maintained and presented in an inviting and clean manner.

- Chris Boney Gardener/Maintenance
- Bronwyn Moore Cleaner

BAMS Operations

The BAMS team provides culturally appropriate health services for the Brewarrina community and work in partnership with the local VMO Doctors surgery, Local Health Service, Primary Health Network, and other health related organisations. Many of the visiting Allied Health services continued to be interrupted due to NSW Health guidelines relating to reducing the spread of the Covid 19 virus that had the potential to be devastating to the health of the local community. Coordination of several immunisation clinics were implemented to increase the uptake of the influenza and Covid 19 vaccinations from March 2021. The Covid 19 pandemic also saw the need to adapt practice standards to abide by NSW Health restrictions and guidelines. Staff were flexible in adopting pre-screening



measures, promoting social distancing, deep cleaning and frequent use of hand washing and/or the use of hand sanitizer, all of which are becoming accepted as common practice.

The GP clinic located within BAMS continues to provide quality medical service and primary health care management through engagement of Locum GP's 5 days a week. BAMS staff and the community members became innovative and adapted to utilising technology via telehealth services when practical. Through being flexible in providing a complete and professional service, clients not only continued to receive comprehensive medical intervention and monitoring they were managed accordingly to improve overall health outcomes. The visiting GP's work closely with the Healthy for Life team who consciously coordinated adult and child health checks, which continues to be a beneficial tool in identifying and monitoring chronic disease throughout the Brewarrina and Outreach communities. Despite interruptions contributed from the Covid 19 pandemic BAMS staff were able to increase Medicare revenue through ensuring clients were consciously followed up to receive GP Management Plans and be recalled for 3 monthly medical reviews.

The team from Brien Holden Vision Institute continues to support BAMS in providing expert Optometry services, where access to substantial equipment allows for the Optometry teams to deliver a high standard of care to individual clients, as well as providing follow up treatments and procedures, including fitting of spectacles and retinal photography to monitor degenerative changes of an individual's vision. Other visiting Allied Health Services who frequent BAMS include Psychological intervention, Ear Nose and Throat Specialist, Drug and Alcohol Counselling, Podiatry, Women's Health, Family Planning and Sexual Health clinics.

The inability for clinicians and health professionals to travel and community LEMC plans restricting access to remote communities saw many clinics cancelled for several months. Where possible telehealth services were substituted to provide a service and BAMS staff maintained physical contact with community members. Community spirit and wellbeing was improved through the distribution of welfare packs, children's activity packs and food parcels during the heightened floods. The effects of the floods also caused concerns for community members. Although spirits were lifted with a full river the influx of mosquitos and mice caused additional torment to the community. BAMS was instrumental in providing care packages which included insect repellents and mice baits to assist in reducing any harm that could occur.

Conclusion

During the reporting period I spent time at WAMS in the Acting CEO position and oversaw both operations in the CEO's absence. I was impressed by the BAMS staff willingness and ability to ensure operations continued strongly whilst I was off site. I would like to wholeheartedly thank and congratulate the dedicated staff at BAMS for their ongoing diligence and commitment to ensuring the best possible health care. The team often provide ongoing services outside their job descriptions and whilst extremely short staffed which does not go unrecognised.

Sincere thanks is also extended to the WAMS CEO, WAMS Staff and the WAMS Directors for their continued support offered in my position as Acting CEO. I look forward continuing to guide quality primary health care services to members of the Brewarrina and surrounding communities as well as consolidating ongoing professional support and mentoring to the WAMS / BAMS teams.

KATRINA WARD

CHIEF OPERATIONS MANAGER / ACTING CEO



Health is Life is Health

**CHILDREN'S
SERVICES**



GOONIMOO MOBILE CHILDRENS SERVICE REPORT JULY 2021 TO JUNE 2022

Introduction

Goonimoo Mobile Children's service provides a Playgroup visiting small rural towns and isolated communities within the Walgett Shire. The program provides an Early Childhood Educational program in areas where access to other services is limited. Playgroup sessions foster a play-based learning approach to build on Early Childhood Education and learning as well as role-modelling positive play techniques for children 0-5 years.

Staff at Goonimoo also delivered a Child Injury Prevention Program that continued to be a part of Goonimoo's services throughout the reporting period. The project involved a community-led child injury prevention program in partnership between the Walgett Aboriginal Medical Service Ltd (WAMS), the Dharriwaa Elders Group, Walgett (DEG), the University of New South Wales (UNSW), Kidsafe NSW and the University of Wollongong. The CHIPP program offered families with access and support to a variety of home safety resources, Water Safety Awareness activities and road safety information. This program ended on the 30th June 2022.

During this reporting period all Goonimoo's face-to-face services were impacted by the COVID 19 Pandemic that resulted in closure for the NSW lockdown period of 11th August to 1st October 2021. In absence of face-to-face services Goonimoo developed 'At Home Learning packs' for families that were enrolled in Playgroup. These activities were delivered to families via postal and contactless home visits.

These activities were designed to meet Goonimoo's Funding KPIs and outcomes of assisting families with activities to role model Play, focusing on School readiness as well as promoting activities for parents/carers and children to engage together to promote positive nurturing relationships.

After the lockdown period identified in 2021 Goonimoo re-commenced all playgroups with ongoing visits to Collarenebri, Carinda and Walgett groups for the remaining months of 2021. During the commencement of 2022 Goonimoo overall received many new enrolments seeing an increase in the weekly participation rates and attendance by families.

Funding for the programs is received from two (2) sources:

- NIAA - Locational Supported Playgroup
- UNSW - The Australian Prevention Partnership Centre

Play sessions conducted at the following venues

- Collarenebri Preschool
- Carinda Hall
- Goonimoo Centre

WAMS Referral Services accessed

- Midwifery supporting Mums with antenatal appointments during play sessions
- Social and Emotional Wellbeing Program team for family support and positive behaviour techniques
- New Directions Mums and Bubs Nurse Children's Immunisation and check ups
- Healthy for Life team, Children's Health Checks
- Eye Health Referrals
- Oral Health – Dental team, Dental therapist – Information and check ups
- COVID Vaccination Clinic
- Allied Health Professionals Speech and Occupational Therapy.



Referrals

- Goonimoo continues to receive referrals through its links to programs within WAMS as well as referred to playgroup from other organisations within the community.

Staffing

Children's Services Manager

Amy Townsend (1st July 2021 – 29th April 2022)

Early Childhood Educators

Tara Smith

Cloe Dowell

Leola Thurston

Community Development Activities

Assistance with WAMS health promotion	Goonimoo Open Day
Jewellery workshop at Goonimoo with Signal Creative	Dental staff visit – Dental Health
Language introduction to WAMS buildings	Activities at the Walgett Library
Walgett Show Art & Craft Entries	Educators Day
Remembrance Day	International Women's Day
Reconciliation Week	Sorry Day
National Aboriginal Islander Children's Day	Christmas activities (Including Christmas Art and Craft)
Harmony Day	Assistance supporting COVID-19 Care packs
Grandparents recognition day	Child Injury Prevention Awareness activities and resources via social Media
Indigenous Literacy Day	At home learning activities
	Child Road Safety Workshop

Professional Development

- WAMS In-services delivered by Abundance HR
- Early Childhood Online Training
- AMSED Training
- Manager completed training in Leadership and Management
- Austswim Infants and Preschool Teacher of swimming training

Conclusion

Goonimoo has successfully delivered play sessions 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. Given the operational circumstances during COVID-19 Goonimoo staff continued to reach out and support families during the trying times of despair where families were in isolation and battling with the changes and the lack of community connectedness.

Goonimoo were also fortunate that this provided opportunities for new families that connected with the Playgroup service and received additional support seeing a remarkable increase in enrolments and regular attendance across all sites visited.

Given the departure of the Children's Service Manager Amy Townsend in April 2022 the team at Goonimoo 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 and providing many resources and services that support families and children.

AMY TOWNSEND
CHILDREN'S SERVICES MANAGER



Health is Life is Health

**CHRONIC
DISEASE**



CHRONIC DISEASE SERVICES REPORT JULY 2021 TO JUNE 2022

Introduction

Chronic disease management plays an integral part in the wellbeing of a client. It provides a structure for safe and improved care, supports the client to access care, supports self-management of clients, financially supports care while maintaining quality and client satisfaction and contributes overall to population health of the community.

Chronic Disease Services consists of a range of programs and individual services focusing on prevention, identification and management of chronic disease in the community.

Team Members

Staffing

Gaby Alvarez-Sledge	Murdi Paaki Drug and Alcohol Network Coordinator
Annie Deane	Exercise Therapist
Selene Dennis	Aboriginal Health Worker (seconded to clinic)
Jenny Hunt	Aboriginal Health Worker Eye Health
Nichole Kennedy	Aboriginal Outreach Worker
Carl Mason	Public Health Worker (ceased October 2021)
Darlene Mason	AOD Health Worker (ceased Dec 2021)
Bruce Moore	Health promotions Officer
Melissa Nathan	Chronic Disease Manager (commenced September 2021)
Rhiannon Peoples	Healthy for Life Coordinator (commenced May 2022)
Kelly-Anne Rowe	Aboriginal Health Worker
Kiara Smith	Aboriginal Health Worker
Whitney Skuthorpe	Aboriginal Family Health worker (ceased Jan 2022)
Rubina Thapa	Healthy for Life RN
Loretta Weatherall	AHW Healthy for Life

Challenges

The COVID-19 pandemic significantly impacted service delivery. Lockdowns required the cancellation of many outside specialists, chronic disease care and usual group activities. Alternate activities such as welfare checks, food and medication deliveries and telehealth consults were undertaken by staff in place of usual programs.

- COVID illness, continuing lockdowns, PCR and RAT testing and vaccine delivery continued to impact Chronic Disease service delivery in 2021/22. The demands of COVID care and on-going staff vacancies all impacted heavily on the delivery ability of the team to carry out their normal duties.
- Staff vacancies were on par with the rest of Australia where border closures and lockdowns prohibited new staff members from undertaking positions. This remains the case nationally and Walgett is no exception. The entire Team worked tirelessly across the organisation back-filling a number of positions where required as a priority while continuing to maintain the COVID Testing / Genex programs.



- Lack of a chronic disease GP has impacted the chronic disease service, with little access to the completion of care plans, health assessment support, referral requirements etc. Chronic Disease management of clients has been heavily impacted also due to staffing capacity and COVID care being the priority.

Achievements

- The demands of COVID care brought with it a new range of skill sets where staff actively trained to be PCR swabbers and testers, trained in the respiratory app, managed results, managed welfare visits on vulnerable of sick clients, delivered PPE and welfare supplies to many homes and drop off points.
- Three Aboriginal Health Workers enrolled in TAFE to undertake Aboriginal Health Practitioner Training. This will allow them to upskill to a nationally recognised qualification and work clinically to support the health of their community. Expected finish early 2023.
- Outreach service to Goodooga community were able to be maintained where possible due to the commitment of the 3 chronic disease GPs.
- 5th year medical students from UWS were welcomed into the service and complimented staff numbers so that services could be maintained. The students gained a variety of experience including immersion in outreach services and the Aboriginal experience.
- A new outreach GP attended Goodooga on a trial and has commenced as a permanent share GP.
- Commencement of Family Planning Services delivered by FP Dubbo in November 2021 offering all family planning services either on site or by referral. A slow start in Walgett over the summer has seen an increase as we moved into the cooler months. This program also supported training and 2 WAMS RNs have upskilled to become accredited to deliver Implanon contraception.

Specialist Services

Specialist Services were maintained in some capacity through 2021, with full return to most services from May 2022. Unfortunately the loss of the Ultrasound Clinic due to the dissolving of Lakes Ultrasound were heavily felt with clients now having to attend Coonamble, Moree, Narrabri or Dubbo for this service.

Clients seen in services 2021 to 2022 as follows (note numbers are severely reduced due to COVID). **Note: Figures for 2021-2022 year approximate only.** Communicare entry data requires improvement to fully capture service delivery and to inform future delivery. This will be an on-going process in 2022-2023.



SPECIALIST CLINICS	# CLIENTS SEEN	
CARDIOLOGIST Dr Kanishka Kalamadasa	47	1 service per month. Recommended on-site visits March 2022.
DERMATOLOGIST Dr David Cook Dr Adam Harris	78 43	3 month. Welcomed Dr Adam Harris who has an interest in dermatology surgery. Dr McCrossin retired in 2021
ENDOCRINOLOGIST Dr Guttikonda	105	Fortnightly. Supported by Zoe Rose Diabetes Educator
LIVER CLINIC Dr Joseph Lawler	n/a	Based in clinic – Stats not available
PAEDIATRICIAN Dr Gina Mariano	13	2 monthly
ALLIED HEALTH CLINICS		
HEARING AUSTRALIA		Stats unavailable. HAPPEE Hearing (under 6 years commenced in June 2022)
FAMILY PLANNING	49	New service commenced Nov 2021
OPTOMETRIST VARIOUS	281	
OCCUPATIONAL THERAPY	32	1 week per month
PHYSIOTHERAPIST Rob Martinez	146	3 days/month
PODIATRIST Luke Buchtman, Sonika Prasad, Savo Maric	810	Mathew Love ceased. Savo Maric commenced
PSYCHOLOGIST Will Grech	891	Continued via telehealth
SPEECH THERAPIST BETH EDEN	128	
OCCUPATIONAL THERAPY SAMARA UNWIN	26	

Programs

ALCOHOL AND DRUGS PROGRAM Coordinator provides services to Walgett, Collarenebri and Brewarrina. This includes individual assessment, advocacy, counselling, education sessions and health promotion activities. Ongoing vacancy of AHW in this program impacts service delivery. Aim for 2022-2023 is to increase services

EYE HEALTH PROGRAM continues to be in demand. Two gaps identified. Retinal camera screening is an essential part of eye assessment. Staff members trained however use of machine remains problematic so retraining is required. Kelly Anne Rowe moved into the Eye Health program to support clinically and to capture processes. Aim for 2022-2023 is to increase WAMS presence with Brien Holden and the Regional Eye Health Partnership

FAMILY CENTERED PRIMARY HEALTH CARE PROGRAM (FCPHC) delivers GP and Chronic Disease Outreach services to the Goodooga and Pilliga communities. FCPHC outreach programs provide comprehensive and coordinated primary health care to Aboriginal and Torres Strait Islander people in rural and remote areas where mainstream services are limited.



This service is supported by Visiting General Practitioners, nurses and health workers and is able to treat acute and chronic conditions, undertake chronic disease management planning, and provide health assessments, and continuity of care where access may be difficult. A major challenge has been staffing shortages and all CD team have pulled together to ensure continuity of care for these clinics. 2022 welcomed Dr Kathryn Hutt to the Goodooga GP team. Aim for 2021-2023 is to include Collarenebri as an outreach clinic and to strengthen the delivery in all outreach clinics.

OUTREACH CLINICS	
GOODOOGA GP	
DR KATH HUTT	106
DR KATHRYN KEENAN	124
DR MARK YOUNG	236

Pilliga clinic has continued to be serviced with vaccine clinics on demand, GP when available and the continuation of the podiatry clinics. Goal for the 2022/2023 period is to expand services to Pilliga, embed current services and maintain consistency.

HEALTHY FOR LIFE PROGRAM provides services to the communities of Walgett, Namoi and Gingie. The team welcomed the new Healthy for Life Coordinator in May 2022. Health promotion planning is a key deliverable for this team and 2022 has seen a number of days delivered, COVID PPE supplies have been included at every opportunity. Event days included but not limited to:

- Far West Active Fest
- International Women’s Day
- Anzac Day
- Outback Youth Fest
- Weekly B/Fast club @ High School
- School Hand Hygiene
- Mission PPE delivery and education
- Walgett Show
- PPE delivery for Collarenebri Knock Out
- Quest for Life
- Face mask making @ High School
- Bro Speak
- Food and Water Survey
- Reconciliation week
- Sorry Day
- Child restraint fitting day
- Rowena community - suicide intervention and PPE delivery.

Health assessments: In collaboration with the Clinic a total of 213 health checks were attended in 2021-2022. Barriers included lockdowns and COVID Care. Aim for 2022-2023 is to re-engage schools, outreach areas and develop MOUs as part of the health check service.

Other achievements for Healthy for Life included continuing to build strong interagency relationships within the Walgett region and increased engagement of community members at local events due to increased presence of local stake holders. Growing capacity for involvement in local events and building a health promotion model that facilitates both prevention and intervention programs, ensuring it also captures community members across all age groups will see a stronger and more cohesive team delivery in the next year.



The team also undertakes the weekly visits to the Dharrivaa Elders Group for health monitoring and organising guest speakers on requested topics, and general support of chronic disease clients.

Lifestyle Modifications Program; which comes under the Healthy for Life banner were heavily impacted by COVID restrictions until April 2022. Clients were encouraged to remain active during lockdowns, and both Brewarrina and Orana Haven continue to be supported. The year saw the receipt of new equipment that allowed for a greater range of exercises.

The exercise room (ETR) hosts the Cardiac Rehab program which currently runs 2 x sessions/week and Falls Prevention sessions. Other sessions included:

- Community exercise in Apex Park (Boot Camp) - Rain saw the parks grasses flourish which had a positive impact on exercises classes.
- Yoga continued to run throughout the year although in reduced capacity and following COVID guidelines - staff make use and appreciate the yoga sessions which have a positive wellbeing effect.
- Youth Exercise Program at PCYC – along with individual programs.

WAMS is working with both DEG and UNSW Impacting Engineer students to develop the local Community Garden. The project aims to deliver water security to the garden by installing 100 wicking beds, allowing for garden maintenance and increasing productivity in our drought stricken region.

Working together to establish the garden will be important for food security, creating a community space and producing vegetable boxes for members of the community most in need. Rural Aid volunteers arrived in May 2021 and completed the greenhouse shed.

We were happy to welcome the Governor General General David John Hurley, AC, DSC, FTSE on the 15th December 2021 for a meet and greet with staff and an overview of the gardens. The visit was well received by both parties.

Professional Development

The Chronic Disease Manager holds a certificate in Training and Assessment and has actively worked to increase in-service upskilling in collaboration with the Education Manager. Inservices held include cold chain management, anaphylaxis, Medicare and Communicare. Aim for 2022-2023 is to upskill clinical staff in performing health checks and to undertake care planning.

Acknowledgement

The Chronic Disease staff are to be commended in their tireless and ongoing commitment to supporting and maintaining services during the challenging year across the organisation.

Chronic Disease staff have backfilled in all areas from reception, swabbing, PCR testing to transport whilst trying to maintain their own programs. Staff have done this willingly and show a commitment to wanting to be a more unified team. The team looks forward to the post pandemic era and getting back to business.

**MELISSA NATHAN
CHRONIC DISEASE MANAGER**



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CLINIC



CLINIC TEAM REPORT JULY 2021 TO JUNE 2022

Introduction

The Clinic provides many services to the Walgett community. We have one permanent Doctor as well as GP locums that regularly visit the organisation.

Our core purpose as an organisation is improving the health and wellbeing of the Walgett and surrounding communities. The clinic focuses on both preventative and ongoing care within a multi-disciplinary team which consists of General Practitioners, Registered Nurses, Aboriginal Health Workers and Midwives.

Doctors

Dr Deborah Hough formally resigned from WAMS as the Senior Medical Officer in October 2021. In November 2021, we welcomed Dr Nina Dowling as a permanent GP, who is supported by regular visiting GP locums. Plans are in place for a GP registrar to commence in August 2022.

Pharmacy

The dispensary is managed by the Senior Aboriginal Health Worker. Any staff member who assists in the dispensing of medications must have achieved their Dispensary Assistant Certificate III through the Pharmacy Guild of Australia.

Transport

The team assists clients to WAMS appointments and out of area pre-booked medical appointments. Local transport ensures clients can attend their medical appointments with any of the WAMS services. By offering transport, we are able to increase the accessibility to medical care for our clients. The team also works in collaboration with Walgett pharmacy ensuring clients medications are delivered directly to their homes.

Transport was suspended during the peak of the Covid 19 pandemic in an endeavor to keep staff and community safe from the virus. However, the service resumed in January 2022. Emergency local transport services were maintained throughout the pandemic with risk assessments completed by the Senior Medical Officer.

Gardens and Maintenance

COVID restrictions, wet weather and staff vacancies created some challenges over this past year. Maintaining outside properties proved difficult with these circumstances. Workforce retention was an additional concern. The team leader resigned in June and all positions in this team remain vacant. Management of the team has been handed over to the Finance Manager to plan an arrangement for a sustainable labour market.



Clinic

In May 2022, WAMS recruited a permanent Registered Nurse to the clinic, Bronte Hiscox. Bronte is supported by agency Registered Nurses from the Remote Area Health Corp (a support service for agencies who are funded by the Commonwealth program for COVID clinics) and Aboriginal Health Workers.

Since March 2020, the Covid -19 pandemic has continued through until time of report. We encourage all staff and patients to use precautionary measures (wearing masks, sanitising hands, wiping down surfaces and wearing appropriate PPE attire) as required. We have also received donations of PPE, which have been distributed to community members, local agencies, at community events and also delivered to clients who attend our outreach clinics.

The GENEX machine (COVID 19 testing machine) was provided to WAMS from the *Indigenous Health Branch of the Australian Government Department*. The Genex machine was utilised well in our community during the peak period of the pandemic. The staff set up a drive through testing clinic on the corner of Pitt and Dundas St. The staff would swab clients in their vehicles and run the swabs through the Genex machine. Results were sent to clients via SMS on their phone.

Expansions Building

The Building has been utilised for many purposes; Covid-19 and influenza vaccination hub from June- Dec 21, returning to the Midwifery and New Directions Mothers and Babies program in early 2022.

- *Midwifery/ AMIHS program*- the community Midwife and Aboriginal Health Worker provide antenatal and postnatal care to expecting mothers and their newborn babies. The Midwife works in consultation with the GP and associated hospitals where women have elected to birth.
- *New Direction Mothers and Babies*- the Child and Family Health Nurse and Aboriginal Health Worker provide childhood immunisations and ensure children are reaching their developmental milestones and appropriate assessments are attended if required.
- The Child and Family Health Nurse was also heavily involved in the roll out of Covid-19 vaccinations.

Covid-19

The COVID-19 pandemic has been the most significant challenge that WAMS and any health service has ever faced. Staff and services have had to pull together to get through such a challenging time. Due to travel restrictions, social distancing measures and community safety, contractors were unable to visit, transport was restricted and some services have been unable to operate. These services have all gradually resumed with the easing of restrictions. Telehealth and video conferencing have become the new norm and we have become very reliant on this technology which does create its own challenges for clients and staff.

The COVID-19 pandemic has shown us how important it is to maintain infection control standards and therefore all staff need to be vigilant in ensuring they keep up to date with infection control training. Due to the demand for GENEX and COVID-19 testing all AHW's and various other staff



were trained online to obtain these skills which was overseen by the Senior Medical Officer. This enabled continuity of the service.

Medical Students

Medical students recommenced placements at WAMS in 2022 following a hiatus due to Covid. Fifth year medical students from the University of Western Sydney undertake a five week placement at WAMS. Learning takes place through immersion, by observing direct patient care delivered by the grass root services and by working in and with Aboriginal communities.

They are introduced to the complexity of health care of families, communities and gain insight into patient-centred primary health care. They are also given opportunities to appreciate the community and social supports available to Aboriginal people, as well as the barriers and difficulties in accessing health services.

Acknowledgement

I wish to acknowledge Philip Dowse (Senior Aboriginal Health Worker) for his efforts in acting as Clinic Practice Manager. Since my commencement in this role in April 2022, I have been made to feel very welcomed by the staff at WAMS and the local community.

I have received many compliments from community members about the professionalism of staff and the wonderful facilities and services offered by WAMS. I appreciate the efforts of staff to step up and help out when required. Staff should be congratulated on their outstanding efforts during the Covid pandemic particularly with testing and vaccinating of the community.

WENDY SMYTH
CLINIC PRACTICE MANAGER



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ORAL HEALTH PROGRAM



REPORT ON ORAL HEALTH PROGRAM JULY 2021 TO JUNE 2022

Aims of WAMS Dental Program

- To provide a culturally appropriate mix of dental health services who reside in WAMS service 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

Impact of COVID-19

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.

The situation since March 2020 has been very challenging due to the impact of the COVID-19 pandemic. The dental clinic has been closed for several weeks at a time, with dental staff redeployed in other programs at WAMS where necessary. The Dental Consultant has provided regular updates for dental management during COVID times, including patient and clinic management, and relevant infection control practices. The Consultant attended regular Community of Practice meetings established by NSW Health, and accessed pertinent webinars and information provided by the Australian Dental Association (ADA), as well as researching published literature.

As restrictions eased, the dental clinic has been practising with necessary risk management and enhanced protocols according to NSW Health and ADA Guidelines.

During this financial year, WAMS engaged the following dentists for a total of 13 weeks:

Dr Michael Prochazka	12-16 July, 13-24 September, 1-12 November, 28 Feb - 11 March, 26 April-6 May, 13-24 June
Dr Sheela Sampath	19-23 July, 14-18 March.

WAMS employs an Oral Health Therapist on a part time basis to provide ongoing care and preventive advice to children and their families. Mr Ashraf Nesirwan works at WAMS 3 days per month. He provided 10 rounds of service to WAMS.

Mr Ashraf Nesirwan	26-28 July, 23-25 August, 27-29 September, 25-27 October, 22-24 November, 21-23 Feb, 28-30 March, 18-20 April, 6-10 June, 27-29 July.
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WAMS engages the services of Mr Alex de Matos a Dental Prosthetist on a sessional basis to provide dentures to people on the waiting list. Denture demand was low due to previous high levels of service, and lower patient attendance rates during the COVID times.

Mr Alex de Matos	26 July, 4-6 April, 9 May
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WAMS is very appreciative to these dental professionals for their commitment to our dental program, particularly during these trying times, 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 program coordination and staff development support.

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

Performance Measures

The following services were provided by Dentists.

Service type	No. provided	No. patients	Service type	No. provided	No. patients
Examinations / Diagnostics incl Radiographs	238	123	Preventive	120	52
Periodontal Treatments	40	39	Tooth Extractions	39	32
Restorations	92	47	Endodontic	1	1
Dentures	26	9	Medications	24	24

The following services by the Oral Health Therapist

Service type	No. provided	No. patients	Service type	No. provided	No. patients
Examinations / Diagnostics incl radiographs	147	56	Preventive	90	37
Restorations	14	12	Tooth Extractions	25	20
Endodontic	0	0			

The following services by the Dental Prosthetist

Service type	No. provided	No. patients
Examinations / Diagnostics incl radiographs	26	9
Preventive --mouthguard	0	0
Prosthetic services		
- Complete upper denture	3	2
- Complete upper and lower denture	3	2
- Partial upper cast metal denture 2 teeth	1	1
- Partial upper cast metal denture 5-9 teeth	2	2
- Partial lower cast metal denture 4 teeth	1	1
- Partial lower cast metal denture 5-9 teeth	3	2
- Relining complete denture processed	2	2
- Replacing tooth on denture - per tooth	1	1



Dental practitioners endeavour to practise preventive care and try to restore teeth rather than extracting them. However, the history of dental care seeking behaviour, by adults particularly, 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.

The Centre for Oral Health Strategy provides funding to WAMS, with the performance targets being 263 Dental Weighted Activity Units (DWAUs) for the 2021/22 financial year. The WAMS dental team achieved 137 DWAUs, in another year with reduced capacity to provide dental services due to the COVID pandemic.

Dental Practice Accreditation

WAMS continues to comply with regulatory guidelines and quality improvement processes, and in line with enhanced practices during the COVID-19 pandemic.

Child Dental Program

With the regular visits by 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 tooth brushing programs, as well as working with young mothers and carers.

The dental team utilises a mobile dental drills unit to do simple techniques such as fluoride applications and decay treatments at the schools.

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.

Some of these visits were disrupted due to school closures, and community transmission risks during the COVID-19 pandemic.

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 the Grawin Opal Fields. 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 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 \$1026 per 2 calendar years for specified service item numbers.

Staff training and Support

Dental staff Kayla Thurston and Sarah Dowse are planning to enrol in the Certificate 4 in Dental Radiography at OTEN. In February the training team from the Dental Assistant Professional Association conducted an Infection Control and Prevention update via Zoom for the WAMS dental team.

Dental staff continue to receive updated advice during the COVID-19 pandemic and have attended relevant in-service training programs.

Consultation and Co-operation

The 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 support for the WAMS dental program, and there are good referral procedures between WAMS and the Western NSW Local Health District dental clinics, for oral surgery and orthodontic cases.

Conclusion

WAMS has provided dental care to Walgett and nearby communities, with an increasing emphasis on preventative dental care, and adherence to best practice clinical management, despite the challenges posed by the COVID pandemic.

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

Dr SANDRA MEIHUBERS AM
DENTAL CONSULTANT



Health is Life is Health

**DHARRIWAA
ELDERS GROUP**



Above: WAMS and DEG staff and directors gathered with Yuwaya Ngarrali collaborators by video to launch the 5 year Food and Water for Life research project in November 2021, as soon as safe to do so after starting the program together months earlier. DEG's Trish Tonkin made the presentation.



Above: WAMS's Amy Townsend established a new tradition of Elders drawing the famous WAMS Xmas raffle at DEG in December 2021

WAMS and DEG



Above: Feb 22 DEG's low sodium drinking water kiosk reverse osmosis system arrives.



Above: WAMS and DEG attended the Coalition of Peak Aboriginal Organisations consultation on Closing the Gap in Dubbo March 2022. WAMS and DEG are the two Walgett Aboriginal community-controlled organisations (ACCOs) and work together in that role.

1

Walgett's Dharriwaa Elders Group with Walgett Aboriginal Medical Service and partners from The George Institute and Global Water Institute for Global Health successfully applied for a NH&MRC grant to "Co-create and evaluate sustainable community-led innovations to strengthen food & water security". This 5 year project began in 2021. Covid19 severely delayed the project however all of the community projects progressed – WAMS Community Garden expansion, progressing the design of a low sodium drinking water kiosk, undertaking a regulatory analysis of impacts to food and water security, establishing supermarket food choices promotions and conducting a baseline Food and Water Security community survey in March 2022.

Right: Alinta Trindall, Ty Madden, Niall Earle, Jacqui Webster, Trish Tonkin joined Annie Deane, Loretta Wetherall and Bruce Moore from WAMS to undertake the community food and water security survey in March 2022. They used WAMS' Euragai Goondi as a base for training and collating daily survey results. Below right: On completion of the survey, the Yuwaya Ngarrali team briefed the WAMS CEO and later the full WAMS Board on early findings and next steps.



Food & Water 4 Life

Below: WAMS' Loretta Weatherall conducted DEG's weekly Elders Health program during the period. She is seen here delivering a donation of RATS (rapid antigen tests) in April 2022 which became the main method DEG used to monitor Covid safety after full PCR testing ceased to be offered.



Above Right: Jacqui Webster returned to provide a briefing to DEG and WAMS in June 2022. Right: DEG conducted a session with George Institute colleagues to document the impacts of the IGA fire emergency impact on food and water security.



Above: WAMS and the Food and Water for Life program invested in a second expansion of the WAMS new water-efficient Community Garden in June 2022

2



Health is Life is Health

EDUCATION



EDUCATION MANAGER REPORT JULY 2021 TO JUNE 2022

Introduction

The Education Manager position was established as a permanent part-time position, commencing July 2021. The Education Manager reports to the Chief Operations Manager and works alongside the Finance Manager, Chronic Disease Manager and Clinic Practice Manager to ensure staff are upskilled and the organisation is undertaking training that ensures WAMS is compliant.

The Education Manager works closely with Managers around providing training support, after Managers take into account:

- the knowledge of what staff have requested training for in their staff appraisal
- the skills gaps within their team and/or service delivery
- staff capabilities and
- daily/weekly staffing levels and deficits

This will result in a focused and considered approach to meeting the requirements of service provision and client needs and as well as increasing the level of training currency.

Training for Quality

Organisational training needs to be undertaken in the following areas:

- Triage
- Hand hygiene
- Cold Chain management
- Infection control
- Safe use of practice equipment
- CPR training
- Medical terminology
- Cultural awareness

Training Formats

In the course of this year training has been delivered in a variety of ways including:

- Private providers
- Online
- Face to face
- Small groups targeted to a specific issue/area
- Organisational meetings

Training Processes

Staff are encouraged to complete a Training Application which outlines what the training is about and the associated costs. Upon return staff are then required to submit a Program Evaluation Report and the activity is then entered into the Training Register.



The Year in Training

July – December

In July 2021 staff undertook Manual Handling Training. This training was delivered by Rob Martinez, from Outback Therapy with the intent of increasing staff awareness around moving heavy and or large objects in the workplace.

August, September and October 2021 saw no training taking place. It was during this period that staff were busy with the second Covid-19 outbreak.

Brien Holden Institute provided Retinal Camera Training, as a clinical in service for staff from the Chronic Disease Team, in November 2021. The training was to upskill staff to be competent in performing retinal photography. In the longer term this will improve the effectiveness of the care for WAMS diabetes clients.

TaFE Western delivered a combination of First Aid and CPR Training, over three days. Covid-19 had meant that training in this area was not generally being undertaken and may staff faced the situation of their previous training expiring. Three staff commenced the first block of Certificate IV ATSI Primary Health Care Practice which will allow participants, at the completion of training, to become Aboriginal Health Practitioners. This course is delivered via block release by TaFE New England and requires students to undertake both a theoretical and practical component.

The Advanced Diploma in Leadership and Management was completed by two staff in December 2021. This course was overseen through UNE Partnerships and was predominantly studied online, due to the impact of the Covid-19 Pandemic. This qualification took two years to complete.

January – June

An information session covering key points on hand washing importance, mask selection and RAT (Rapid Antigen Testing) was a timely reminder for all staff around the importance of handwashing and access to sanitisers, selecting the right mask for the current environment and the difference between consumer RAT testing and PCR Testing. The January 2022 Staff Meeting was the delivery point for this training. The second block for the Certificate IV in ATSI PHC also took place in late January/early February for participants.

Julia Trendall, Abundance Human Resources, presented an information session covering the key points on code of conduct, bullying and harassment for all staff, in February 2022. In the same month the Dental Team undertook training called, DAPA Infection prevention and control in the Dental Practice.

TaFE Western again delivered a combination of First Aid and CPR Training, for one day, in March 2022. This training enabled those staff who were either new or unable to attend the training in November to gain the required qualification. Staff attended Cope to Cope – The Responder Toolkit Training to learn practical strategies/skills to better support young people who experience acute mental health issues, emotional dysregulation and challenging behaviours. This enabled participants a better understanding of an evidence based frame work (TAR3 Model) and support plans (Risk management Plans). The third block for the Certificate IV in ATSI PHC again took place in March 2022 for participants. In preparation for WAMS undertaking their Strategic Planning Cycle an information session was presented by the Education Manager at the March Staff Meeting. Staff undertook some practical activities with the purpose of better being able to participate in the strategic planning process, later in the year.



A clinical in service was undertaken by a number of clinical staff in April 2022. Lyn Thrupp, Registered Nurse was the presenter and staff were provided with a definition and examples of Anaphylaxis as well as a practical activity involving an EpiPen. At the Staff Meeting later in the month, a social learning activity based on staff roles was offered by the Education Manager. Staff enjoyed this activity and there was much debate aligning the definition and correct word, which related to staff roles in the organisation.

Attendance at an information webinar that provided updates and latest evidence based on immunization information in relation to Japanese Encephalitis and Covid-19 took place in May 2022. The differing lengths of Covid-19 vaccine length of efficiency was also discussed by the webinar presenters, the Primary Health Network. John Turner, Dynamic Fire trained staff over a three day period in Level 1 – Demonstrate First Attack Fire Fighting Equipment and Level 2 – Fire Warden Training as well. Staff participated in a rigorous training session that encompassed theory and practical activities. For many staff it was the first time that staff had used a Fire Extinguisher to put out a fire and many staff were surprised at how heavy the red canisters were. The Level 2 training ensures that each building has a Fire Warden. The next aspect of this training will be for Dynamic Fire to complete a Fire Drill and review with WAMS staff. The Chronic Disease Manager completed some initial training on Communicare for a new staff member in an effort to have more staff familiar with Communicare. The final group of staff undertook a combination of First Aid and CPR Training, for one day, again delivered by TaFE Western. This training enabled those staff who were either new or unable to attend previous training to gain the required qualification. At the end of May the Board of Directors, Senior Executive, Managers and Team Leaders undertook a Statement of Attainment - Merit Selection, provided by Tafe Western. This non accredited interactive workshop explored best practice recruitment and selection processes around coordinating interviews, understanding bias and the process of merit selection. The customised program was based on WAMS recruitment processes and policies.

Julia Trendall, Abundance Human Resources, presented an information session covering the main aspects of the Work, Health and Safety Policy for staff in June, 2022. Workplace safety, WHS regulations, due diligence, reporting incidents and injuries, Personal Protective equipment and managing risks were some of the topics covered. Small group work, scenarios and discussions were some of the strategies used so that the information session was interactive and practical. Statement of Attainment – Merit Selection, part two was undertaken mid-way through the month and this training was delivered using Microsoft Teams. Todd Healey, Allen’s Training, was engaged to provide a combination of First Aid and CPR Training for the staff at Brewarrina Aboriginal Medical Service. It was positive to see one staff member re-engage with training they had previously commenced but were yet to complete. This meant that Certificate IV ATSI PHC was also being delivered by Tafe Western, in the same manner of block release as Tafe New England.

Conclusion

Over the past year the profile of training within the organisation has definitely been raised. There is an expectation that staff are willing to undertake a level of training that not only is aligned to their role but also aligns to organisational goals and the Strategic Plan. Whilst COVID-19 has changed how training is often undertaken, this along with staffing shortages and the need to maintain service delivery has meant that some very creative thinking has been required to ensure that training continues to be on the agenda for staff and the organisation.

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EDUCATION MANAGER





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