

ANNUAL REPORT 2023



We acknowledge the Traditional Owners of the land where ATSICHS Mackay Ltd now stands and recognise that this has always been a place of teaching and learning.

We wish to pay respect to Elders past, present and future, and acknowledge the important role Aboriginal and Torres Strait Islander people continue to play within ATSICHS Mackay Ltd.

Contents

About Us	3
Meet our Board of Directors	5
Chairpersons Report	6
Executive Manager Report	8
Primary Health Care Manager Report	10
HR Report	18
Quality, Governance & Risk Report	23
Social Emotional & Wellbeing Unit Report	28
Alcohol & Other Drugs Report	30
NDIS Report	33
Integrated Team Care Report (ITC)	37
Senior Medical Officer Report	40
Finance Manager Report	44

About Us

Our Vision

Our vision is to provide the highest standard of primary health care through a holistic approach toward diagnosis and management of illness. We are committed to promoting health, wellbeing, and disease prevention to all clients. We aim to treat all clients with dignity and respect.

Our Values

- Community controlled and lead
- Respect for Aboriginal and Torres Strait Islander people's culture
- Integrity and honesty
- Support to and for our community

Our Mission

Our Mission is to deliver a quality and appropriate primary health care service to our regional community, the Aboriginal and Torres Strait Islander people of the local Government areas of Mackay, Isaac, Whitsunday, and Central Highlands that is tailored to meet their health needs. To accomplish this, we work in partnership with appropriate organisations to ensure services are appropriate and accessible for our clients.

Overview of ATSICHS Mackay Ltd

An Indigenous community-controlled health organisation. The Aboriginal and Torres Strait Islander Community Health Service Mackay LTD (ATSICHS Mackay) is one of the increasing numbers of self-governing, independent, community-controlled Indigenous organisations providing primary health care services to Indigenous people across Australia.

ATSICHS Mackay was developed out of the desire of local Indigenous people wanting to take control of their own health and of how primary health care services are delivered to and within Indigenous communities in the local Government Areas of Mackay, Isaac, Whitsunday, and Central Highlands. In line with the principle and practice of self-determination, the general membership of ATSICHS Mackay has the mandate to determine the broad policies and procedures governing the operations of ATSICHS Mackay.

The Board of Directors are entrusted by the Indigenous community with the mandate to manage ATSICHS Mackay on their behalf. At each year's Annual General Meeting of members, a minimum of eight new Board Members are elected on a rotation of four new Board members being elected each year. The new Board of Directors is thereafter delegated with the authority to undertake the executive management of ATSICHS Mackay over the following twelve months.

ATSICHS Mackay was established in 1978 (incorporated on the 2nd of November 1978) by the Mackay and district Aboriginal and Torres Strait Islander community. The purpose of this service was to improve primary health care to Aboriginal and Torres Strait Islander people in the local government areas of Mackay, Islaac, Whitsunday, and Central Highlands.

ATSICHS Mackay is funded primarily by the Department of Health. The focus of the service is to ensure the primary health care of Aboriginal and Torres Strait Islanders is equitable to that of the mainstream health system. ATSICHS Mackay is responsible and accountable for the day-to-day operation and management of the Health Service. Consequently, assessments and reports of the standard of the health care is provided by the organisation to the Aboriginal and Torres Strait Islander community as well as to State and Federal Government Health Departments.

ATSICHS Mackay Constitution

ATSICHS Mackay's Constitution sets out the fundamental principles and established precedents. The Constitution is written down in a single comprehensive document, embodied as the codified Constitution. ATSICHS Mackay is committee to the community per the constitutions governing nature and the Companies Limitation Guarantee.

Legal Structure

ATSICHS Mackay is incorporated under the Corporations Act and Regulations 2001 (Commonwealth). The Board has adopted a corporate governance framework comprising principles and policies that are consistent with the Corporations Act and Regulations 2001 (Commonwealth). This framework is designed to promote responsible management and assists the Board to discharge its corporate governance responsibilities of behalf of the organisations members.

CORPORATE GOVERNANCE STATEMENT

ATSICHS Mackay Ltd is committed to achieving the highest standards of corporate governance to ensure that the organisation is properly managed to protect and enhance members community interests, ATSICHS Mackay, its directors, office bearers and employees operate in an appropriate environment of corporate governance. Best practice corporate governance is guided by the Australian Stock Exchange Corporate Governance Council (ASXCGC) that develop the Corporate Governance Principles and Recommendations.

As an unlisted company limited by guarantee, ATSICHS Mackay Ltd is not required to report against the CGPR. However, ATSICHS Mackay Ltd uses the CGPR as a guide to best practice and has implemented these principles as far as they are relevant to it as a member organisation. ATSICHS Mackay Ltd reports against the CGPR in this corporate governance statement as part of its commitment to preserving stakeholder confidence.

Meet our Board of Directors



Chairperson Janice Binsiar



<u>Deputy Chairperson</u> Merle Barba



Secretary
Patricia Wright

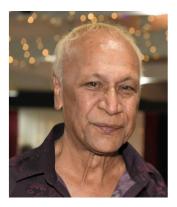


<u>Treasurer</u> Andrew Ramsamy

DIRECTORS



Linda Smith



Raymond Bobongie



Adam Doull



Sonetta Fewquandie

Chairpersons Report

By Janice Binsiar

I acknowledge the Traditional Owners of this land on which I work and live. I pay my respects to Elders past, present and future and acknowledge our Torres Strait and Australian South Sea Islanders Elders.

As the Chairperson I am pleased to present my annual report.

Our board members have a variety of life experiences and professional capabilities. They are informed of local issues, understand policies and are aware of impacts of past social injustices and accustomed to the protocols and practices of the local community.

Background

The Aboriginal and Torres Strait Islander Community Health Service (ATSICHS) Mackay was incorporated on the 2nd November 1978 and began as a referral service. It is through the commitment and dedication of many community members that ATSICHS Mackay is where it is today. ATSICHS Mackay continues to develop improvements to advance the organisation in which we are continuously expanding and upgrading our services and programs. We have been successfully delivering 45 years of culturally appropriate primary medical health services to our community and the wider outlying communities.

Staff

ATSICHS Mackay has staff who are managed by our experienced Executive Manager Valerie Pilcher and her competent senior management team. Thank you all for the hard work and dedication put towards helping our people and serving our community.

We have seen staff come and go over the year but with the combined efforts of our dedicated staff they always ensure essential services continue to be delivered to our communities.

We are committed to the improvement of our people's general health and the ongoing well-being for everyone.

Throughout the year some of the board members have represented ATSICHS Mackay and attended relevant meetings and governance training which has also broadened our knowledge and understanding of the health system.

Our Vision

Our vision is to provide the highest standard of primary health care through a holistic approach towards diagnosis and management of illness. We are committed to promoting health, well-being, and disease prevention to all clients. We treat all clients with dignity and respect.

Our Mission

Our mission is to deliver a quality and appropriate primary health care service to our regional community. The Aboriginal & Torres Strait Islander people of the local government areas of Mackay, Isaac, Whitsunday, and central highlands can access service that is tailored to meet their health needs. To accomplish this, we work in partnership with the appropriate organisations to ensure services are appropriate and accessible or our clients.

Clinical Services are offered at ATSICHS Mackay by the multi-disciplinary team of health workers, registered nurses, and general practitioners.

We continue to provide essential services to our clients within the community. Due to the growing needs within the community, another clinic at Bucasia has opened which helps service the Northern Beaches clients.

ATSICHS Mackay also auspices the Pioneer Murri Court Elders and Binga Birry Justice Group.

As the year draws closer to an end, I would like to thank the board of directors for their support, dedication and commitment to the organisation as well as acknowledge all the staff who provide quality health care and assistance to the community.

Thank you.

Executive Manager Report

By Valerie Pilcher

First and foremost, I would like to acknowledge the traditional custodians the Yuwi people on the land our organisation is and where we provide services and programs to our Aboriginal and Torres Strait Islander and South Sea Islander community and pay my respect to all the Elders past, present and our emerging leaders.

I further wish to thank the Board of Directors on their leadership, guidance and support they have provided to me, and to the staff of the organisation throughout the year. I would also like to thank the Mackay community for their continued support they provide to ATSICHS.

I wish to acknowledge the passing of all Aboriginal and Torres Strait Islander and South Sea Islander people from our Mackay community in the past 12 months.

I also would like to acknowledge the dedicated and hardworking staff employed at ATSICHS Mackay Ltd who continue to be committed to providing quality primary health care to our community in a culturally appropriate environment. ATSICHS Management and staff strive towards meeting the strategic plans set by the Board of Directors for the organisation with the mission statement being strong in our delivery of services.

ATSICHS Mackay Ltd continue to provide health and allied services to the community which include a GP service, Social Emotional Wellbeing service, and programs. ATSICHS has continued to provide face to face GP consultations along with having telehealth consultations to our community. ATSICHS continues to auspice the Community Justice Program for the Pioneer Murri Court Elders. ATSICHS further supports the United Women's Cultural Group and the Bama Men's Group.

ATSICHS has had movement of staff during the past 12 months. In the ATSICHS clinic we have 7 Gp's, Dr Virja Panday (Senior Medical Officer), Dr Therese Sheedy, Dr Ljiljana Banic, Dr Alex McLaren, D Ai Han, Dr Joanna Chu & Dr Gorata Rampete who works out at our Bucasia Clinic, nurses, health practitioners, health workers and administration staff. Our Social Emotional and Wellbeing (SEWB) Unit is home to our SEWB Counsellor, Alcohol and Drugs Counsellor, and male Mental Health Worker.

The Deadly Choices Team is improving the health and wellbeing of our indigenous community by offering both school programs and community events to assist people with choosing healthy lifestyle options as well as supporting our community members to quit smoking. The team is headed up with Jardine Bobongie (Regional Manager), Corbin Tass (Coordinator) and their team of Program Officers of Marmin Barba, Jia Quakawoot, Yaza Stephen and Zahfia Bobongie.

The Bucasia Clinic is continuing to grow with Ruth Mallie (Branch Manager) Dr Rampete (GP), Justine Collins (Nurse Practitioner), along with health workers and Sharon Baggow as the receptionist.

Two of our Health Workers are now Enrolled Nurses both Shonnah Conlon and Renae Mitchell continue to work for our organisation.

ATSICHS Mackay Ltd has an offsite office situated at 10 Carlyle Street, which supports our Deadly Choices Team, and our Social Emotional Wellbeing Unit.

YuwiYumba Cultural Hub is situated at 9 River Street Mackay. The YuwiYumba Cultural Hub is home to Binga Birry Justice Elders Group, Yuwibara Aboriginal Corporation, Murri Watch and our Community Closet. The Community closet offers free clothing to our community members. The Cultural Hub is still available for access to the community to use the premises. Everyone is welcome to visit and get information about our service providers in the Mackay region.

ATSICHS has a NDIS Team at 10 Carlyle Street which has 2 Support Coordinators, Paula Watts and Veronica Bayles who is supported by an admin officer. We also have an Aboriginal Disability Liaison Officer, Wyder Daniel, who supports our Aboriginal and Torres Strait Islander clients apply and access the NDIS program.

On behalf of ATSICHS I would like to acknowledge and thank the following agencies for the support and contributions they provide to our success in the 2022/2023 financial year.

- Department of Health (DOH)
- National Indigenous Australian Agency (NIAA)
- Queensland Aboriginal and Islander Health Council (QAIHC)
- National Aboriginal Community Controlled Health Organisation (NACCHO)
- Institute for Urban Indigenous Health (IUIH)
- Department of Justice and Attorney General (DJAG)
- Primary Health Network Northern Queensland (PHN)
- James Cook University (JCU)
- Mackay Health and Hospital Service
- Queensland Health
- Yuibera Aboriginal Corporation
- Yuwibara Aboriginal Corporation
- MARABISDA
- Mudth Niyleta Aboriginal Corporation
- Girudala Aboriginal Corporation
- Herbert Street Medical Centre, Bowen
- Lives Lived Well
- Mackay Regional Mental Health Network
- ACT for Kids
- BADIYY- Badiyybadi Yalobugu Yuribaya (Growing Children Strong) Mackay Connected Beginnings.

ATSICHS Mackay was successful in receiving funds from the Department of Health to build behind our main building, it is hoped that the building will commence sometime later this year.

ATSICHS Mackay has continued to maintain successful accreditation of the Australian General Practice Accreditation Limited (AGPAL), the International Standards of Organisation 9001 (ISO9001) accreditation and the National Quality Safety and Health Standards (NQSHS)

ATSICHS continues to strive in excellence in working towards continuous improvement of their services and programs to the community to improve the health and wellbeing of our First Nations People.

Primary Health Care Manager Report

By Allannah Munro

So much has happened within the last twelve months.

It was not that long ago we were preparing for the Covid Pandemic.

A few months later the panic settled down, everything returned to normal.

As a health organisaition we are still mindful of the necessary precautions that need to be in place if we are ever faced with another Pandemic.

Only twelve months ago we celebrated our NAIDOC 2022.

Due to poor weather conditions ATSICHS Mackay postponed their events/activities.

By the end of the week the weather conditions improved we were able to join with the community in celebrating our NAIDOC Family Day.

Our recruitment process for our ITC Team was completed in July 2022 and positions were filled.

The role of the Integrated Team Care Team is accessing mainstream services and providing care co-ordination for eligible Frist Nations Clients who access the mainstream GP clinics.

The service delivery model directly contributes to better treatment and management of chronic conditions by having access to appropriate health care via care coordination and provision of supplementary services.

The year 2022 was another big year as we are preparing ourselves for the transitions of the new software- Communicare.

There were many weeks of training with allocated time slots for the relevant staff to attend.

At the start of 2023 the software was installed.

I would like to acknowledge and thank our IT Team Crystal Gill and Mariah Mallie who did a lot of the groundwork.

Regular meeting was held with Queensland Health regarding Our Mob Together Strong Health Equity.

The official launch was held in September 2022. With the strategy in place, we hope to see change within the local hospital system that our local indigenous community are treated with respect, empathy and having access to quality care.

A stakeholders meeting was held to address concerns raised regarding the wellbeing of our indigenous clients being placed in the Mackay Watch House and not having access to their regular medications for their mental health.

Those stakeholders include Queensland Health Community Mental health, Murri Watch, Queensland Police Service and Northern Queensland Primary Health Network.

As a community-controlled organsiation, we also address concerns of our GP's having access to the watch house, as well as Queensland Community Mental Health Staff.

After many meeting ATSICHS Senior Medical Officer Dr Panday now has access.

The stakeholders continue to meet regularly to discuss any concerns and how we can continue to work together.

This year I was invited to attend the James Cook University Cultural Training Day held at the Mackay Base Hospital and Health Service training rooms.

A total of 19 GP Registrars attended on the day. I along with Aunty Veronica Ahwang was invited to sit on the question panel.

The last few months we have a changeover of staff. I would like to acknowledge and welcome our new staff. I would also like to wish those staff that have left the organisation all the best in their new journey and acknowledge their commitment and dedication to ATSICHS Mackay during their time here.

Onboarding

GP Registrar

• Dr Ai Han

Nurse Practitioner

Justine Collins

Trainee Health Workers/ Health Worker

- Kerri-Ann Wright
- Shaylah Barba
- Shontaya Pilcher
- Charmaine Han

ITC

Athaliah Power

Quality and Safety Co-Ordinator

Nicole Muscat

NDIS- Aboriginal Disability Liaison Officer

Wyder Daniel

Deadly Choices team

Uriel Pearson

- Yaza Stephens
- Zahfia Bobongie

SEWBU- Male Mental Health Worker

Jaiden Baldwin

Community Project Officer

Alicia Wienert

Cleaner

Malachi Samalu

Best wishes

Quality and Safety Co-Ordinator

• Ms. Nadine Bellear

Receptionist

- Kaihlee Mcdonald
- Candace Tareela

Registered Nurse

- Ms. Gail Thorn
- Kayla Donovan

Health Worker

- Kathryn Ives
- Colin Costello
- Sari Jeffcoat

Trainee Health worker

Lamar Enoch

Deadly Choices Team

Latoya Latimer

Social and Emotional Wellbeing team

Andrew Doyle

Bucasia Clinic

On the 26th of August the Bucasia Clinic had a visit by the AGPAL assessment team to conduct an onsite accreditation assessment.

Congratulations to Bucasia Team on doing an amazing job based on the level of compliance demonstrated by the team, the clinic is now accredited.

The Clinical Supervisor- Ruth Mallie oversees the clinic on a day-to-day basis/

Staff rotation is ongoing allowing our clinical staff to have the opportunity to work at both sites.

The Nurse Practitioner is based at the Bucasia Clinic two days a week.

Clinical supervisor

• Ms. Ruth Mallie

General Practitioner

Gorata Rampte

Registered Nurse

• Terry Tetuai

Enrolled Nurse

Shonnah Conlon

Receptionist

Sharon Baggow

Reception/Transport

The reception team continue to do an amazing job in providing quality customer service to the community.

At times it can be very challenging in meeting the needs of the community and the demands of the clinical staff.

Our transport team works closely with our reception staff who co-ordinate the transport list.

The usage of taxi voucher numbers has decreased with the transport drivers being utilized in place of the taxi vouchers.

Reception Team

• Chantal Jeffcoat (Senior Medical Receptionist)

Transport Drivers

- Kerrod Doyle
- Harrison Daniel
- Tony Munro

Main Clinic

Our current clinical team consists of the following staff:

General Practitioners

• Dr Virja Panday (Senior Medical Officer)

- Dr Ljiljana Banic
- Dr Therese Sheedy
- Dr Alex McLaren
- Dr Joanna Chu
- Dr Gorata Rampete

GP Registrar

Dr Ai Fern Han

Nurse Practitioner

• Ms. Justine Collins

Clinical Supervisor/ Registered Nurse

Tekee Malcolm

Registered Nurse Team

Teiraen Toarei

Enrolled Nurse

Renae Mitchell

Health Workers

- Selbena Mallie
- Brancis Taylor
- Charmaine Han
- Meryl Yasserie

Trainee Health Worker

- Kerri-Ann Wright
- Shayla Barba
- Shontaya Pilcher

Aboriginal and Torres Strait Islander Health Practitioners/ Health Workers

Over the last twelve months we have seen a changeover of staff within our clinical area.

With the Maternal and Child Health worker Sari Jeffcoat resigning we had to do some restructuring within the clinic.

It has always been difficult in this area to maintain staff. However, we continue to accommodate by utilising the staff we have currently.

At times it does require changing of roles and Position Descriptions.

Congratulations to Shonnah Conlon and Renae Mitchell, both ladies have completed their Diploma of Enrolled Nursing.

Ongoing support continues for our Trainee Health Workers.

Four hours per week is allocated for study whilst within the workplace.

Registered Nursing Team

We welcome the Nurse Practitioner – Justine Collins to both the Registered Nurse team and GP Team.

Justine provides a high level of clinically focused, autonomous health care for both acute and chronic conditions.

We look forward to Justine working with our Maternal and Child Health Team in providing Antenatal care for our First Nations Mum's.

I would also like to acknowledge the rest of the Nursing Team for their contribution to ATSICHS Mackay.

That you to our Clinical Supervisor- Mr. Tekee Malcom for his tireless dedication and commitment to ATSICHS Mackay.

Chronic Disease Team

Our Chronic Disease Team continues to work closely with our Allied Health Team.

We welcome our new Podiatrist – Mr. Oliver Peel from Place Podiatry Servies.

All podiatry consultations are onsite.

We say farewell Diabetes Educator – Ms. Jacqueline Holster. Jacqueline, who relocated down south towards the end of last year, continues to service our ATSICHS clients through phone consults.

We hope to obtain the services of another local Diabetes Educator within the next few months.

For our Chronic Disease Team, transition to the new software- Communicare was very challenging.

The ladies do an amazing job in coordinating the Chronic Disease Clinic. As both ladies approach retirement age they will be truly missed.

Allied Health Team

- Endocrinologist- Dr Kunwarjit Sangla
- Podiatry- Oliver Peel
- Dietitian- Ms. Sherine Elias
- Pharmacist- Ms., Aneesa Davis

Child and Maternal Health Team

Paediatrician – Mackay Base Hospital and Health Service

- Paediatrician- Dr Peter Roddenby
- HAP-EE Clinic

Integrated Team Care (ITC)

In June 2022 we welcome our new ITC Team.

- Project Officer Sharni Dorante
- Care Co-Ordinator- Alma Hawdon
- Outreach Worker- Athaliah Power
- ATSICHS Outreach Worker- Thelma Fry

Since commencing, the team has been busy connecting with the mainstream GP Service both locally and within the Isaac region.

Thelma works closely with the team in supporting our ATSICHS ITC clients.

Regular meetings are held with the Project Officer who provides updates on the program and team members.

BAMA Men's Group

The men have been busy raising funds over the last few months to attend the Laura Festival.

Being blessed with the musical talents the men have been invited to various events to perform, showcasing their instrumental and vocal abilities.

The group has grown with a regular attendance of 16-20 per week.

Outings have included BBQ's, fishing, hunting, and gathering.

Occasional the men would meet up with the younger ATSICHS men's group.

The men look forward to the weekly gatherings which had been good for their mental health and wellbeing.

United Women's Group

The United Women's Group numbers have remained consistent. Community speakers are invited to the group to provide information about their service.

Some of the services included the Queensland Police Service providing information on Elders Abuse, Scam and Fraud.

Leading up to NAIDOC week the ladies were invited to the various schools.

- North Mackay State High School
- Pioneer State High School
- Northern Beaches Starte High School

A morning was spent with the Mackay Childrens and Family Centre where the ladies interacted with the younger children playing games and telling stories.

Well-known dancers and performer Mr. Patrick Thaiday attends the weekly group teaching the ladies dance and providing exercise sessions.

Community Events/ Activities

Survival Day Walk

This year was the first time the Mackay Community participated in the Survival Day walk on the 26th of January across the Forgan Smith Bridge. The event was organised by the Badi Yalobaya Yuribaya (Grow Children Strong) Mackay Connected Beginnings. The day was enjoyed by all community members that attended. Thank you to Fiona Bobongie and her team for organising the day.

Mabo Day

Celebrations were held at the Yuwi Yumba Cultural Hub.

It was great to see students from Mackay State High School attend and help on the day. This year we invited a special guest – Uncle Bel Lui and his wife Criscilla to our MABO celebration. I would also like to acknowledge Ms. Kerri-Ann Wright for cooking the lovely meal, Ms. Thelma Fry for coordinating the event and Mr. Frank Cook for being the MC on the day.

Thank you.



HR Report

By Amanda Prewett MAHRI

OUR APPROACH

Welcome to the HR report. Another Year has passed, where do they go? I really enjoy my job and I am honored to work for this wonderful organisation, and I am grateful for the position that I hold.

For any business to be successful in achieving goals, it first needs. to recognise that the employees are its greatest asset. We at ATSICHS Mackay Ltd strongly believe, to be successful, we must value and nurture our staff professional development to meet their individual career objectives while maximizing organisation goals. We also recognise that the way in which we go about our business is just as important as the results that we achieve. We endeavor to have the policy and procedures in place to support and develop our staff.

STAFF CHANGES

ATSICHS Mackay Ltd prides itself on employing staff from gender equality. For the period ending 30th June 2023, we have employed 15 new staff members. Changes to the Organisational Chart have seen some structural rearrangements that have occurred. The Social and Emotional Wellbeing unit incorporates a SWEBU Manager, Male Mental Health Worker, AODS, SEWBU Assistant and Receptionist. We have three new Deadly Choices Officers that have filled the position of departing staff. The position of NDIS Support Coordinator and filled externally taking the team to five including ADLO, Support and Admin. Dr Joanna Chu passed her exams and is now FRACGP, and we have one full time GP Registrar Dr Ai Fern Han. At our Bucasia Clinic we have FRACGP Dr Rampete, Clinic Supervisor, Registered Nurse, Enrolled Nurse, and a receptionist. Congratulations to our newly AHPRA enrolled nurses who recently graduated. Welcome our new Nurse Practitioner Justine Collins.

EMPLOYEE TURNOVER

Employee turnover refers to the number of employees that have departed from our organisation, in last financial year, 13 of the employees departed from the organisation. Staff departed from our organisation due to relocation, pursuing other career paths and full-time studies. We hired 12 replacement staff. We have two School Based Trainees, 1 in IT and 1 in Clinic.

The Dashboard reflects employment movements to 30th June 2023 including current and departed employees. It gives a good snapshot of movements in the past financial year. At the bottom of the page, we have 68 current employees.

TRAINING AND DEVELOPMENT

As mentioned previously, we recognise that one of the critical ingredients of operating a successful business is to have a skilled workforce. ATSICHS Mackay has made this commitment to its employees. We have either funded or are/will be funding the costs associated with Certificate III and IV in Aboriginal & Torres Strait Islander Primary Health Care, Certificate IV Mental Health. Plus, Continuous Professional Development for Doctors, Accountants and Human Resources Officer. We currently have two female and two male trainees in the main Clinic, undertaking Cert III Primary Health. Congratulations to Shonnah Conlon and Renae Mitchell who are now Enrolled Nurses and are AHPRA registered.

Human Resources News

NEW BLUE CARD LAWS

There are important changes with the Queensland Blue Card System. From 31st August 2020, prospective new employees will be required to obtain a Blue Card before commencing employment. The changes to the Blue Card system allow for non-working people to apply for a card to be job ready. An organisation can then link a card when employed.

Volunteers and students will still be able to obtain a blue card for free. The Blue Card system has a great online application portal and is easy to navigate.

The Blue Card system proudly supports Aboriginal and Torres Strait Islander Communities. They have released new videos for A&TSI including:

- What does No Card, No Start mean?
- How do I apply for a Blue Card?
- New forms superseding any before 31st August 2020.
- New Photo ID for Blue and Yellow Exemption Cards.
- RN and TMR (Department of Transport) Photo Required I.E. Driver's License.
- Increase in Fees.
- Restricted person and restricted employment.
- Volunteer Cards now have business name attached.

Speak to Blue Card directly on 1800 113 611

Source:

https://www.qld.gov.au/law/laws-regulated-industries-and-accountability/queensland-laws-and-regulations/regulated-industries-and-licensing/blue-card-system-changes

NDIS YELLOW CARDS

Yellow cards will be applied in the portal for all staff associated with NDIS and Support in those areas.

It is now easy to apply for both Blue and Yellow Cards at the same time online using the CRN number on Drivers Licenses.

FAIR WORK COMMISION AND NATIONAL EMPLOYMENT STANDARDS

The National Employment Standards (NES) are 10 minimum terms and conditions of employment (set out in Part 2-2 of the Fair Work Act 2009) that apply to national workplace relations system employees. The NES are minimum standards that cannot be overridden by the Terms of enterprise agreements or awards.

The 10 National Employment Standards

The 10 NES relate to the following matters:

Maximum of 38 weekly hours of work – plus reasonable additional hours. **Requests for flexible working arrangements** – in certain circumstances employees can request a change in their working arrangements.

Parental leave and related entitlements – up to 12 months unpaid leave for each employee, plus a right to request an additional 12 month's unpaid leave, plus other forms of maternity, paternity, and adoption related leave.

Annual Leave

- 4 weeks paid leave per year.
- Plus, an additional week for certain shift workers.

Personal/Carer's leave (includes Sick leave), compassionate leave and unpaid family and domestic violence leave.

- 10 days paid personal/carer's leave (includes sick leave).
- days unpaid carer's leave as required.
- days compassionate leave (unpaid for casuals) as required.
- 10 days paid family and domestic violence leave (in a 12-month period).

Community Service Leave – unpaid leave for voluntary emergency activities and up to 10 days of paid leave for Jury Service (after 10 days is unpaid).

Long Service Leave/QLeave – The Queensland Government has introduced legislation that provides Community Service workers with access to portable long service leave. QLeave administers Queensland's portable long service leave scheme for workers and employers. Under the Community Services Industry Act 2020, you can accrue long service leave benefits based on your service across the industry, not just the length of time with an individual employer. As of 1st January 2021, each quarter your employer submits a return detailing your wages and pays a levy to QLeave.

Helpful Link:

https://www.qleave.qld.gov.au/community-services/workers/frequently-asked-questions

Public Holidays – a paid day off on each public holiday, except where reasonably requested to work.

Notice of Terminations and Redundancy Pay

Up to 4 weeks' notice of termination (plus an extra week for employees over 45 years of age who have been in the job for at least 2 years).

Up to 16 weeks' severance pay on redundancy, both based on length of service.

The Fair Work Information Statement is available from the Fair Work Ombudsman. This must be given to all new employees. It contains information about:

- The NES
- Modern awards
- Agreement making
- Freedom of association and workplace rights
- Termination of employment
- Individual flexibility arrangements
- Right of entry
- Transfer of business
- The role of the Fair Work Commission
- The role of the Fair Work Ombudsmen

Last updated Monday 11th May 2023

Source: https://www.fwc.gov.au/awards-and-agreements/minimum-wages-conditions/national-employment-standards

HR DASHBOARD 2022 - 2023

79

60

14
t-time Employees

5 sual Employees

NEW Employees 2022-2023: 13							
Department	Job Title	Start Date					
Main Clinic	GP Registrar	24/01/2023					
Main Clinic	2 Male & 2 Female Trainee Health Workers	Various Dates 2022- 2023					
Main Clinic	Male RN and Nurse Practitioner	2022-2023					
Main Clinic	1 Receptionist	Various Dates 2023					
Bucasia Clinic	Receptionist	12/01/2022					
Bucasia Clinic	Female Health Worker	8/02/2022					
SEWBU	SEWB Support Worker	25/05/2022					
DC Team	2 Officers	2022-2023					
МСН	Health Workers and the Connected Beginnings Team	Various Dates					

Female Fulltime

3Female
Casual

16 Male Fulltime

6 Male Part-time

2Male
Casual



Admin 10 Management

3

GPs **7**

Clinic 6

Outreach 4

SEWB

Deadly Choices 6 Registered Nurse

Trainees
4

мсн 4

Cleaners 3

2

Drivers **4** Gardeners 2

NDIS
5

Employees Left 2022 - 2023: 13 This Financial Year Ourrent Employees 68
This Financial Year

Quality, Governance & Risk Report

By Nicole Muscat – Quality and Safety Coordinator

I begin by acknowledging the Traditional Owners of the land on which I work, live and learn, the Yuwi people of the Yuwibara Nation, and pay my respects to Elders past present and emerging.

Hi, I'm Nicole, one of the ATSICHS 2023 new employees. I joined ATSICHS team late January, in the Quality & Safety position, which Nadine Bellear pathed beautifully for me in the preceding 10 + years. Although my time so far has been short, I have very quickly witnessed a dedicated and hardworking organisation that is committed to providing quality primary health care to our Aboriginal and Torres Strait Islander community in a culturally appropriate environment. This is what I love most about working in quality roles, I am driven and inspired by the opportunity to work alongside others who are passionate about finding a better way and being part of that change. I am extremely grateful and proud to be a part of the ATSICHS Mackay team.

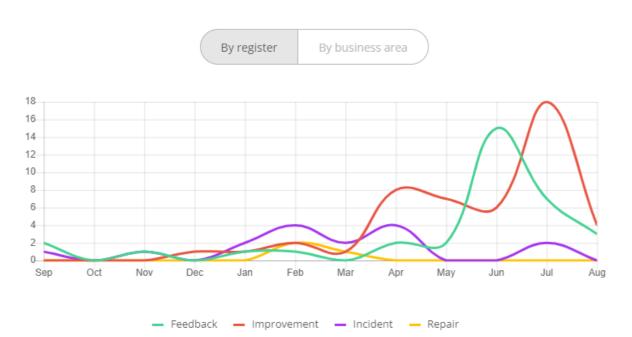
ATSICHS Mackay is representative of the Aboriginal and Torres Strait Islander community, in the Local Government Areas, on matters relating to Aboriginal and Torres Strait Islander health. Due to this, it is imperative we meet international and national health care standards as part of our commitment to the community to provide quality, safe and responsive primary health care. We aim to achieve and deliver the highest levels of holistic health care by maintaining certification of ISO3001:2015 Quality Management Systems Requirements, RACGO Standards for General Practice and NDIS Practice Standards and Quality Indicators. Within the next 6-12 months, ATSICHS Mackay will also be working towards adding to this multifaceted set of standards, the 2021 National Safety & Quality Primary and Community Healthcare Standards. Watch this space.

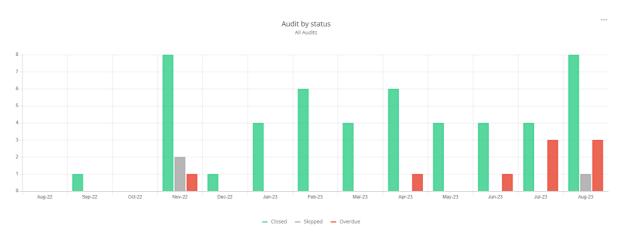
Before this year is out, we will see the review and update of our Strategic plan. Perhaps now more than ever, having a clear strategy for shaping the future and creating momentum, as opposed to reacting, is what any business is craving, especially after the COVID pandemic. Update of our Strategic plan will also see update of our quality objectives and review of our quality policy. These documents are key organisation documents which will give us clear goals and guidance on how we address and build on quality improvements throughout our systems. So, it is a very exciting time for me to be here indeed!

Quality, Governance and Risk QMD snapshots

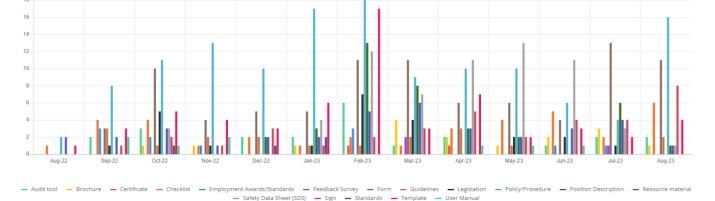


Reporting Culture 3









External Reviews & Accreditation

Accreditation is recognised as an important driver for safety and quality improvement and Australia's health accreditation process are highly regarded internationally. Accreditation is a system to promote and support safe patient care and continuous quality improvement of the health service through a process of regular assessment and review.

ATSICHS Mackay maintains a single Management System (LOGIQC) which addresses the requirements of its chosen multifaceted sets of standards. June 2023 seen the successful recertification of ISO 9001:2015 Quality Management System Requirements for another 3 years. An interim NDIS certification audit was conducted in November 2022 and a full recertification is planned for early 2024. ATSICHS Mackay has continued to maintain successful accreditation of Australian General Practice Accreditation Limited (AGPAL), the International Standards. The next accreditation reassessment will be July 2024 for the main clinic, and mid 2025 for Bucasia clinic.

ATSICHS was commended on Evidence of good practice and organisation strengths and continuous improvement since the last ISO 9001 audit including:

 Introduction of Communicare healthcare solution provided by Telstra implemented and replaced Medical Director.

- Employment of additional staffing for NDIS program to facilitate growth.
- Appointing an ADLO Aboriginal Disability Liaison Officer.

Business challenges confronting the organisation and areas for improvement currently include:

- Resources and workforce need (GP's and Nurse's)
- Need for Strategic Plan Update
- Organisational risk to be reviewed as a part of the Strategic Plan review.

A look through the years....

2010 - Quality Improvement and Accreditation certificate awarded from the Qld Aboriginal and Islander Health Council.

2014 - Met with Merit award from the Australian Safety Quality Commission in Healthcare 2021 for the National Standards for Safety and Quality in Healthcare, Standard 1.1.2

2017- Successful transition to ISO 9001:2015 Quality Management Systems: Requirements.

2020 - NDIS Stage 1 accredited.

2021- Successful transition to RACGP Standards ED. 5

2022- Successful Certification of Accreditation against the RACGO Standards ED.5 for our Bucasia Clinic

2023- Successful recertification of ISO 9001:2015 Quality Management Systems: Requirements.

Workplace Health & Safety

News from the Workplace Health & Safety (WHS) Committee

- WHS team upskilled as per the regulation and the organsiations continual commitment to Risk Analysis and Safety across all workplaces. This included Workplace Health and Safety Representative training for two staff members, Fire Warden, and Extinguisher training for six staff members.
- Continuous compliance with key performance indicators (embedded by regulations and organisations requirements) to strengthen the WHS systems overall through compliance checks and audits maintained within the QMS, LOGIQC.

- April 2023 seen the introduction of the Managing the risk if psychological at work Code of Practice 2022, various activities have been undertaken to inform and train staff to recognise and respond to and understand their responsibilities in relation to psychosocial hazards.
- 2023 All ATSICHS sites underwent fire evacuation plan reviews and updates
 to meet current regulatory requirements, as well as an upgrade to the
 installed Alarm Signaling Equipment (ASE) at the main clinic site. These
 works were part of a state-wide rollout to upgrade ASEs from the obsolete
 PSTN/36 compatible modules to 4g/5g compatible Alarm Signaling
 Equipment.
- Continuing to work in collaboration with internal departments to improve health and safety relevant to their workplace.

Thank you.

Social Emotional & Wellbeing Unit Report

By Patricia Kemp

Firstly, I would like to acknowledge and pay my respects to the Traditional Owners of the land & sea of Yuwi country, that has allowed me to work & live on. I would also like to pay my respect to all Elders, past, present & emerging.

Stepping into the role of SEWB Manager late 2022 has been challenging but rewarding at the same time. I can play an integral part of applying programs, to which will benefit and have a positive effect on ATSI Individuals & families in the Mackay Community, and surrounding areas. I am currently studying for a Diploma of Leadership & Management, which will provide me with more skills for my position.

SEWB Unit has successfully completed several community days in the Mackay area, which has been well attended by the wider community. These days provide us an opportunity to yarn with our community people, which guides the type of programs we provide and how they are achieved.

2023 Sorry Day was especially successful, we had students from Mackay State High School & Clontarf meet and greet with our Elders, and Stolen Generation people. The students assisted our Elders to their seats and served them tea, coffee, and lunch. Our special speakers were part of the Stolen Generation, and we were privileged to have them share their story. Our local Elders Men's Group provided us with musical entertainment for the day. Everyone enjoyed the dance group, which was very large and had children of all ages. It was good to see that Aboriginal Dance Traditions are getting stronger through the younger generation. We received good feedback from the community.

2023, one goal was to have the SEWB team more out in the community, which was accomplished by attending significant community days with non-indigenous organisations. These days provided us with an opportunity to see what barriers there were and what ATSICHS SEWB team could do to assist them to become culturally safe for our mob. One area we were able to assist in was Probation & Parole. They refurbished a room to be culturally appropriate with the assistance of Community Elders, which officially opened throughout NAIDOC week. We are working with them to provide a wraparound service for our mob once they are released from prison, by inviting the different services that are needed, Centrelink, Clinic Health Worker, Community support worker, AOD, and counselling. This will be held at Yuwi Yumba Cultural Hub, away from the P&P offices.

SEWB has faced challenges this year due to staff leaving, which has left positions unfilled for long periods of time. Also, staff are being moved to other internal positions within ATSICHS. All new staff are currently studying certificates to become more skilled and certified for their positions. Our newest staff are Jaiden Baldwin, who has filled the role of Male Mental Health worker, Betty Binsiar has gained the role of Community Support worker and Tyeller Masso who is our new receptionist.

SEWB team look forward to all coming in 2024. Thank you.



Alcohol & Other Drugs Report

By Suzie Penny- AOD Counsellor/ Case Manager

There has been an increase across Mackay seen by all AOD services of client's behavior who use Methamphetamines, making people more impulsive, mor chaotic, and thinking less about consequences than usual. This is thought to be attributed to Fentanyl being mixed with Methamphetamine.

Fentanyl us 50-100 times more potent than Morphine. Fentanyl is a drug whose effects include euphoria, relief from pain, drowsiness, reduced appetite, incoherent or slurred speech and a slow pulse rate to name a few.

Other problematic drugs of choice we've seen is Cannabis, Methamphetamine, and alcohol.

Caping is on the increase, especially with our youth. On September 20th, 2023, we will be running the first of many workshops on Vaping with youth in schools.

AODS/ SEXUAL HEALTH POP UP CLINIC

In May we held our first POP UP Clinic at Orange Sky Mackay, since then we have visited Selectability, KMG (Kutta Mulla Gorinna), Changes Café, Community Solutions with others to come. Our AODS unit joined Pam Reichardt (QLD Health AOD's) Sue Fatnowna (QLD Sexual Health), and Tricia Plate from Mackay St Vincent's De Paul Residential Rehab. Our aim is to provide the community with more information and support for Sexual Health, AOD and other addiction information and to have access to it. Another aim is to provide AOD and community health information and preventative care to our Aboriginal, Torres Strait Islander and Australian South Sea Islander community, including support and referrals.

The outcomes we are wanting to achieve are reduced stigma and shame in seeking help, improved knowledge of AOD service and supports offered, increase in AOD engagement – counselling, withdrawal/rehab, day programs, support groups such as NA and AA, increase in 715 annual health checks and increase.

AOD's BBQ

Our BBQ's stopped in March this year as many other external agencies is now running their own.

CLIENTS ATTENDING BBQ's		F	М	Indigenous
Number of clients	474	50%	50%	60%

'MACKTOWN SISTAS' GROUP

We still provide transport, facilitate educational groups, go on outings, learn cultural practices and support one another. The group continues to be a healing and support group for women who are struggling with substance misuse issues, domestic violence, Mental health issues and a variety of other concerns. It gives women in

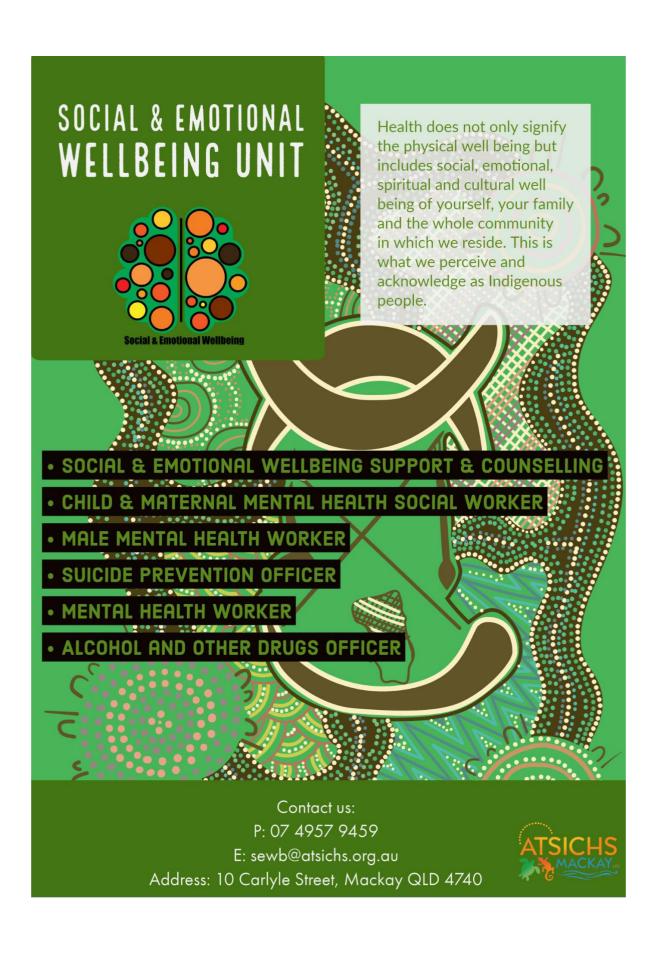
these situations a way to reconnect with community, feel safe and supported, and somewhere safe to be in a non-judgmental environment. It's a place where women can come share their stories, learn new ways of coping with day-today struggles, share their laughs and joys, be supported, and support one another. A place where they can learn new skills and meet new people. The women can receive a variety of support from ATSICHS and external services in the community.

The past year we were lucky enough to participate in two projects with Felicity Chapman which ended in exhibitions at the library and Jubilee Community Centre.

In May 2023 we attended the Women's Weaving Stories – Yarning Together, healing Together camp – we had 21 women attend this amazing healing camp. Laughter was heard all around, a little bit of tears, some breakthroughs were made m no incidents or dramas occurred, learnings were discovered, and some friendships forged. The healing camp objective was to bring together survivors of DFV (Domestic and family Violence) who reside in Mackay Region. The amp's focus was to explore several programs with participants which focus on self-esteem, self-confidence, mental health, AOD related issues, SEWB and parenting. There was a culturally appropriate Yearning Circle, Drumming Sessions, weaving sessions, kayaking. We hired two buses, and all drove together – once again much laughter and singing were had. WE stayed at the APEX campgrounds.

WOMAN'S GROUP INDIVIDUAL CLIENTS		F	F Indigenous		
Number of clients	244	244	93%		

Alcohol and Other Drugs Annual Report 2022-2023						
INDIVIDUAL CLIENTS		М	F	Indigenous	%	
Number of clients	132	72	60	118	89%	
Number of new clients	42	23	19	36	85%	
CLIENTS WHO ENTERED REHAB	8	7	1	7		
CLIENTS WHO FOUND ABSTIENTCE WITHOUT REHAB	6	1	5	5		



NDIS Report

By Paula Watts, Veronica Bayles, Angela Russell – NDIS Support Coordinator Wyder Daniel – Aboriginal and Torres Strait Islander Disability Liaison Officer Sarah Brown – NDIS Administrative Assistant



L to R Wyder Daniel, Paula Watts, Sarah Brown, Veronica Bayles & Angela Russell

Paula Watts - NDIS Support Coordinator/ Specialist Support Coordinator

We'd like to begin by acknowledging the Traditional Owners of the land on which we work, live, and learn the Yuwi people of the Yuwibara Nation and pay our respects to Elders past present and future.

The past financial year has again seen growth and change in the NDIS Team with both Veronica (Vee) Bayles and I accepting referrals to support additional NDIS Participants. On June 30, 2023, I was supporting twenty adults with disabilities which is an increase of four people. Two Participants have Specialised Support Coordination funded in their NDIS Plan due to very high and complex support needs; I provide the support to these Participants.

Demographics are -

Male	Female	Indigenous	Non	Age	Physical	Psychosocial	Neurological	Intellectual
			Indigenous	Ranges	Disability	Disability	Disability	Disability
14	6	7	13	22 - 70	13	2	4	1

The National Disability Insurance Scheme has the potential to make small and great changed to the lives of people with disabilities although some of these opportunities are achieved by intense work by us as Support Coordinators in collaboration with individuals, their families/carers, and other stakeholders by gathering the necessary evidence to meet Reasonable and Necessary criteria. Over this year, a young woman with disability was supported to obtain her own Dept of Housing unity after some years of living in 'group' living. She is living by herself as is her wish, with NDIA support in place, although we have had to submit for a review to increase support in her new situation. As is the nature of the NDIS, processes have changed again and decisions such as these are taking many months to be resolved.

I have been supporting a woman for 20 months; she was referred to me in January 2022 when she was an in-patient of Mackay Base Hospital. Due to her high and

complex disability support needs, it took almost 12 months to engage a Service Provider to support her 24 hours/day in community. On 23rd December 2022, after 15 months in hospital, and many, many hours of difficult negotiations, she was discharged from hospital into an accessible house with a Support Provider to care for her. I was very pleased to have this woman enjoy Christmas out of hospital and is one of the highlights of my professional year; seeing this woman rejoin community. Due to her disability, she is fortunately unaware of the numerous appeals I have made and am continuing to make to the NDIS, for her plan to be more appropriately funded. These people need the most support as these complexities increase their vulnerabilities particularly when there are no families/friends supporting them and government systems are responsible for making decisions about their lives.

We attended all training available, read articles, network with peers locally and nation-wide and link with NDIA, the NDIS Quality and Safeguards Commission and peak bodies including QAIHC to ensure our knowledge is current. This is a vital as the NDIS is an ever-changing scheme which without current knowledge, we would not be able to provide the best services to our Participants which is our passion. We are currently learning as much as we can in the lead-up to another significant change in how we interact with the NDIS system. The PRODA System, which has been in place since the inception of the NDIS will be transitioning to a new system – PACE which will again change the way we work.

We are in very privileged roles as Support Coordinators, having the opportunity to build relationships and trust with people with disabilities and their networks. Doing our job well doesn't come easy and we are usually the first ones at our desks and the last ones to leave, but it is this passion and commitment to the people we serve which gains us the high reputation we hold.

As always, I give my heartfelt thanks to my colleague Vee without whom, I'd be tempted to give up some days when the going is very tough!! Vee brings culture, skills, experience, humor and passion to our team and her dedication to the people with disabilities, their families/carers is second to none. Her social justice compass steers her unwaveringly.

Thank you to Sarah Brown, our Administrative Assistant, who assists us in having our documentation in order and ensures invoices for our services are paid.

The NACCHO funded position of ADLO – Aboriginal Disability Liaison Officer is filled by Wyder Daniel who commenced in this role in October 2022. Wyder's role is to assist Aboriginal and Torres Strait Islander people with disabilities to access NDIS. Although this system and all it requires for success is new to Wyder, his lived experience and cultural connectedness could never be learned, and he is an asset to this role.

As Vee mentions, Leanne (Andy) Bellamy joined us for a few months in learning Support Coordination but left the organisation to pursue other dreams. We enjoyed having Andy, and if her passion for clinical services wanes, she would be a very good Support Coordinator. We continue to receive referrals necessitating the

recruitment of another Support Coordinator. Angela Russell commenced the role in August and brings her experience to our Team.

We look forward to the year ahead, the challenges it brings, and the capacity we support our Participants to build in developing great lives and reaching their goals.

Veronica Bayles – NDIS Support Coordinator

This financial year has seen my NDIS Support Coordinator intake increase, so much, that I had to cease taking new referrals for 2 months. I did this so I could focus on the participants I have and to provide a professional and thorough job.

As of 7th July 2022, I was providing support to 20 participants including 8 adults and 12 children and families.

As of end of financial year 30th June 2023 I provide support to 17 adults and 20 children and families.

I continue to be mentored by Paula Watts in all dealings with NDIS. Without this mentorship I would not be as advanced in my knowledge surrounding NDIS and how often it evolves. The growth of my participant list reflects referrals received through Early Childhood Early Intervention, Feros Care, Mackay Base Hospital and ATSICHS GP's. The ATSICHS NDIS Team have a very good reputation within the community, and it shows with referrals received.

The Challenges this financial year continue to be how much the team must fight with NDIS and Partners in Community for our participants to have access to their requests and recommendations of therapists. This can be time-consuming and can eat into the Support Coordinator hours allocated to the participant. The best outcome of these further reviews, submitted to NDIS, are when the Participant is heard, and their new plan reflects this. After 3 plan reviews finally one of my 11-year-old participants NDIS plan reflect his required needs for all portions of his plan. I am assisting a participant who does not have Support Coordination to be able to have access to more support in her plan. This is an ongoing issue with NDIS as they have not completed their processes and now the participant is put at risk of not having the support to meet her NDIS Goals. I continue to educate Participants and parents on NDIS and how if functions and the review process. There continues to be a waiting list for Speech Therapists within the community.

As this role requires a person with passion and an understanding of NDIS it has been difficult to find the correct person for the role. Leanne Bellamy, ATSI Health Practitioner did start in this role for 3 months but for personal reasons Leanne has relocated. As a Team we did see the benefit of having a 3rd Support Coordinator, so the role was advertised and has now been filled by Angela Russell who started on 21st August.

This past year has seen me assisting the Aboriginal Disability Liaison Officer (ADLO) Wyder Daniel in learning his role and to understand how NDIS functions. Wyder has grown this role into one that is well regarded in our community. Wyder has built his networks by attending a lot of face-to-face meetings and being

available to clients when required. Wyder has strong connections with Partners in the Community with Feros Care.

The Team continues to be proud of the service we provide for our First Nations community.

<u>Wyder Daniel – Aboriginal and Torres Strait Islander Disability Liaison Officer</u> (ADLO)

In my time employed with ATSICHS Mackay Ltd as the Aboriginal Disability Liaison Officer (ADLO) my role is to Assist First Nation people to understand and guide them through the NDIS access process. I link in with many community stakeholders to request to access the evidence and reports that NDIS requires. By linking in with these stakeholders I am also teaching them about NDIS and the processes for meeting access. I currently have 13 adult clients and 5 children and families I am working with to gain access to the NDIS. In my time in the ADLO role I have been successful in having 6 clients gain NDIS access, 4 adults and 2 children. I have 3 clients who are still waiting for an outcome from NDIS. I work closely with Feros Care and Early Childhood Early Intervention (ECEI) our local Partners in the community. This relationship is a valuable one as ultimately this who the client may be working with to develop their NDIS plan.

Sarah Brown – NDIS Administrative Assistant

On the 31st of May 2022 I started back at ATSICHS Mackay after a year off on Maternity Leave. I was given a great opportunity to be a part of the NDIS Team and was positioned as the NDIS Team's Administration Support.

Throughout this year working alongside Paula and Veronica I have learnt an immense amount about the NDIS and how our NDIS participant plans, goals, and funding works. I feel I have gained a lot of knowledge and understanding around how our NDIS Support Coordinators support our NDIS Participants' needs and wants. With new tasks comes new learning and I have learnt how to use software's such as, MYOB and Brevity and these software's have supplied me with the ability to do invoicing and adding in remittances, as well as adding notes and reports where necessary. This year I started my studies in Individual Support Disability with Axiom College Mackay, doing an online based certificate. I have also attended some classes and I am really enjoying my studies as I am learning, understanding, and gaining knowledge to help me in my work position.

Angela Russell – NDIS Support Coordinator

I am Angela and would like to introduce myself as one of the new NDIS Support Coordinators and I am excited to be a part of the wonderful team at ATSICHS Mackay. I have a background in Social Work and have worked in various roles including, Care Coordination of a multidisciplinary team, Mental Health, Disability, Youth Work, out of home Care, Homelessness, Domestic Violence, AOD, and Counselling. I look forward to working with the NDIS Team learning from their expertise and wisdom. I enjoy working alongside Mob to support with NDIS support Coordination and liaising with services towards positive outcomes.

Integrated Team Care Report (ITC)

By Sharni Dorante

The ITC team would like to acknowledge the traditional custodians of the lands, sea, and waters that we live and work on, and thank them for allowing us to enjoy this beautiful region. We would like to recognise the commitment and dedication of our Board members, our Executive Officer, and our colleagues, whom we appreciate for all their hard work over the past year. We are also thankful to, and value the contributions made by our community members, who are an integral part in all that we do.



ITC Team Members

Sharni Dorante – Indigenous Health Project Officer, Thelma Fry – ITC Care Coordinator (ACCHO), Alma Hawdon – ITC Care Coordinator (Mainstream), Atha Power – ITC Outreach Worker.

Program Summary

There have been many changes over the years of the Integrated Team Care (ITC) program. Most recently, following the recommendation of an independent review prepared by KPMG in 2019 (*Integrated Team Care – Assessment, evaluation, and co-design consultation report*), it was advised that the ITC support offered to private practices (mainstream) would best be delivered by Aboriginal Community Controlled Organisations (ACCO/ACCHO). Why? Because they are better equipped to:

- √ Improve access to the program, particularly for rural and remote Indigenous communities.
- ✓ Provide Aboriginal and/or Torres Strait Islanders in North Queensland that have complex chronic conditions, with the best possible support to manage their conditions.

Therefore, as at 1 July 2022, ATSICHS Mackay commenced delivering the ITC program to ATSICHS Mackay and private practice patients within the Mackay & Isaac regions.



Program Aim

- 1. Contribute to improve health outcomes for Aboriginal and Torres Strait Islander people with chronic health conditions.
- → Better access to coordination
- → Better access to multidisciplinary care
- → Support for self-management
 - 2. Improve access to culturally appropriate mainstream primary care services for Aboriginal and Torres Strait Islander people.

Supplementary Services & Medical Aids

Eligible ITC patients can receive Supplementary Services funding to assist with accessing their health services indicated in their care plans within a timely manner. If Medical Aids (allowable medical equipment) is also required to support better health and reaching care plan goals, eligible ITC clients can also receive funding towards these. We have found this is a very necessary highly requested component of our program, bringing many successful outcomes for our clients.

Eligibility criteria

- √ identify as Aboriginal and/or Torres Strait Islander
- ✓ be registered with Medicare.
- √ have a chronic health condition (as per Medicare guidelines)
- √ have a current GP Management Plan
- ✓ be referred by their usual GP.
- ✓ reside in the Mackay/Isaac region.

Partnerships

Partnerships and networking have been made throughout the year with Mackay Hospital & Health Service and Queensland Health programs, Northern Queensland Primary Health Network, James Cook University/GMT (Registrar and medical student training program), Kidney Support Network, General Practices, Allied Health providers, Pharmacies and many more. We look forward to continuing and making new working relationships.

Engagement

The ITC team have participated in, facilitated, and presented at many events throughout the year. Some including GP and Primary Health Care education and network meetings, community morning teas, Mabo Day, NAIDOC Week, Senior Health Expo and Cultural Awareness Training.

ITC Resources

Our team have developed many ITC resources to assist our stakeholders, providers, and community to understand and easily utilise our program. These resources including posters, flyers, brochures, and flow charts have also been utilised and adapted by other ITC networks in other regions.

Upcoming in 2023/2024

ITC are looking forward to participating in the facilitation of the My Health for Life program in the coming year to assist our clients to reach their health goal in a tailored and culturally appropriate environment with group and one-on-one motivational support.

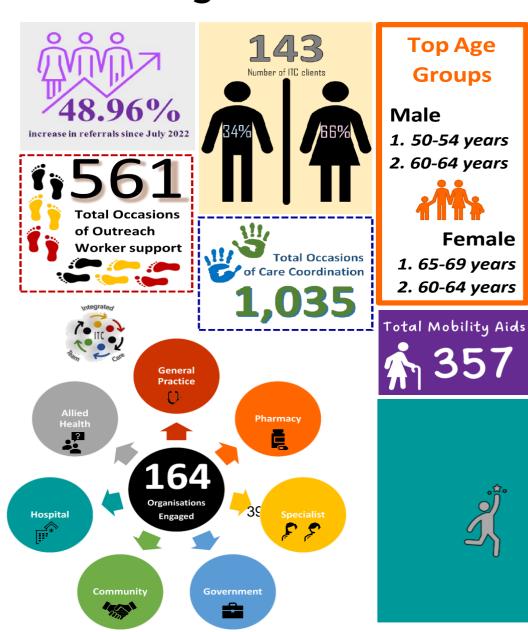
Our team will also be conducting surveys to ensure we are providing the best support and highest quality to our clients.

We look forward to continuing to do our part in creating a holistically healthy and happy community.

By Sharni Dorante

Indigenous Health Project Officer, ITC Program (on behalf of the ITC team)

ITC Program 2022/2023



Senior Medical Officer Report

By Dr Virja Panday

GP STAFFING (Doctors)

Virja Panday (SMO)

Ljiljana Banic

Therese Sheedy

Alex McLaren

Joanna Chu (Registrar)

Ai Fern Gan

Gorata Rampete (Bucasia Practice)

GP WORKFORCE:

Full Time Equivalent of GP staffing: FTEs is now lower due to GP's negotiating changes in contracts and reducing sessions. This has been buffered by having more registrars at the health service.

Our ongoing engagement with James Cook University/ GMT and the registrar training program has encouraged registrars to apply for training at the Health Service. Registrars continue to be an essential park of GP workforce.

The Management Team work closely with GP's to promote retention by providing flexibility and support to Gp's. It encourages registrars to stay on in any capacity after completing their training. The Management team has supported Gp's who have need to work remotely.

The Gp Team works closely with all teams to deliver healthcare services. They continue to deliver a high quality of safe care to the community members most of whom are highly vulnerable or very high risk in relation to health and social issues.

GP's have been able to deliver services successfully by telemedicine and remote work. This has been an important change in how we practice since it enables GP's to continue care and remain funded by Medicare for services.

CLINICS

General clinics: Monday to Friday at the Health Centre

Saturday clinics are on hold due to limited GP staffing.

Bucasia Clinic: GP from Tuesday to Thursday with 5-day support from Nurse Practitioner Justine.

Bucasia practice has commenced some after-hours clinics.

VISITING SERVCIES:

Paediatrician, Dr Roddenby has been conducting monthly visits, but this has recently been temporarily relocated to his rooms.

Mackay Base Hospital Paediatrics team continue regular visits and sessions.

Endocrinologist, Dr Sangla attends 3-6 monthly.

The GP team works closely with the Mackay Base Hospital and other community health services to access specialist and allied health services.

Dietitian, Sherine Elias continues her long standing service.

Diabetes educator- a new diabetes educator has been recruited to commence services.

Podiatrist, Dr Oliver Peel has commenced podiatry services under an agreement negotiated and provides services on site.

Medication Review Pharmacist, Aneesa Davis continues in this role.

Audiology and Optometry services are monthly.

ITC team- works within the health service with invaluable support to patients with chronic disease.

NDIS team now work within the health service however independently. This is an important source of support since the NDIS team can liaise closely with GP's to complete applications.

ATTENDANCES

The health service continues to implement multiple strategies to ensure patient attendances. This has resulted in significant improvement in attendances. Provision of patient transport also supports patients and encourages attendance. Demand for appointments remains high at the health Centre and increased in the Bucasia Clinic Practice.

Service data is available through management team.

PATIENT POPULATION

As per previous annual reports, the burden of chronic disease, mental health and social health issues remain very high. This results in complex interactions requiring longer or multiple consultations and the assistance of extended team to deliver cares.

Scope of work for Gp's and other staff include care of patients at nursing homes and in community at patient's residences. While this may not be an efficient process due to travel time and delays in recording consultations notes, it is an essential service supporting patients and families. This is in line with the health service community model of care.

Telemedicine has no doubt improved patient access to care. Recent changes (spetember23) in Medicare legislation requiring digital consent from patients may impact our ability to do telemedicine or our efficiency if it is a multiple step process to obtain consent since many patients do not have access to emails or internet. We are awaiting feedback from QAIHC for advice and representation of this issue; however, we will need to review our processes to meet Medicare requirements.

COVID 19

It is over 3 years since Covid 19 impacted the world. It had the potential to continue causing high morbidity and mortality. The medical world and scientists amazingly produced effective vaccines and pharmaceutical companies were able to produce and supply these vaccines on a scale never done before in history. This was an amazing feat and we must acknowledge the medical, pharmaceutic and scientific world on this outcome. Complex processes were needed from manufacture, storage, transportation, maintenance of cold chains to ensure vaccine does not get destroyed, Health Centre management of vaccines, administration and monitoring processes. In terms of our vaccination campaign, staff have managed their roles amazingly well considering this was additional to usual cares required.

The community in general has been very receptive to education and uptake of vaccines and recommended booster vaccines. This has been extremely effective to the point most people are no longer concerned about Covid 19. This medical world remains vigilant monitoring Covif 19 and for other potential pandemics. The health service also strongly promotes the Influenza vaccine since influenza carries a significant threat to high-risk populations.

The health service now has experience preparing for pandemics and its is reflected in our policies and procedures developed during Covid 19.

Information Technology (IT)

It is important in this report to acknowledge the work of our IT team – Crystal and Mariah, Modern day medicine cannot work without IT and software. This is a complex area requiring a team with a high level of skill to implement and support IT and software use. We migrated this year to Telstra Health's Communicare Medical Software, which was especially developed for ACCHO's Expectedly, this was a

challenging process which required planning, education of staff and careful migration process to ensure minimal loss of data. The health service continues to work with Telstra Health to improve the software by providing feedback. It is hoped that this will translate into an effective modern day medical software system which can make clinical care efficient and capture all relevant data to support health service funding. Crystal and Mariah provide essential onsite support to all users and make necessary configuration changes.

SUMMARY AND RECCOMENDATIONS:

The health service continues to maintain its patient base at the health Centre with current staffing and has an increasing patient population at the Bucasia practice.

The health service continues to engage and contribute to discussions with multiple stakeholders, to improve health access and health care for the community.

The clinical team works effectively together in the delivery of health care services.

All areas of the health service are critical to delivery of services:

Management and Administrative teams, Reception team, General Practitioners, Health workers and nursing team, program teams, transport, cleaning services, garden and maintenance services and visiting services.

I am currently in my 18th year of continuous service with ATSICHS Mackay, it is a privilege being on this journey with our ATSICHS team and the community.

Finance Manager Report

By Maria Tyler

2023 in a snapshot:

- 1. The organisation made a surplus of \$164,215 for the period to 30 June 2023.
- 2. The organisation is solvent, which means it can pay its debts as at 30 June 2023.

Current Assets \$3,619,525 Current Liabilities \$2,072,069 Short term liquidity = 1.79 times

Total Assets \$5,722,542 Total Liabilities \$2,299,793 Long term solvency= 2.49 times

The Finance Team of ATSICHS Mackay Ltd is committed to the effective and efficient management of financial operations to ensure the future economic sustainability of the organisation. We strive to operate within relevant legislative requirements (such as Corporations Act 2001) and report in accordance with Australian Accounting principles, in addition to the specific principles outlined in all Funding Agreements with the organisation. Our financial statements are externally audited by qualified company auditors appointed by the organisation's members at the Annual General Meeting.

Basis of Accounting

The financial statements are special purposed financial statements that have been prepared in accordance with Australian Accounting Standards (as issued by the Australian Accounting Standards Board) and the Corporations Act 2001. Australian Accounting Standards set out accounting policies that result in financial statements containing relevant and reliable information about operational transactions, events and conditions.

The financial statements cover Aboriginal and Torres Strait Islander Community Health Service Mackay Ltd as an individual entity, incorporated as a company limited by guarantee and domiciled in Australia. The financial statements have been prepared on an accruals basis and are based on historical costs, modified, where applicable, by the measurement at fair value of selected non-current assets, financial assets and financial liabilities.

Income and expenditure figures discussed in this financial report exclude goods and services tax (GST).

Revenue

Grant revenue received by ATSICHS Mackay Ltd is recognised in the Profit and Loss Statement when the entity obtains control of the grant, and it is probable that the economic benefits gained from the grant will flow to the entity and the amount of the grant can be measured reliably. If grant funding is not utilised in the financial year,

approval is sought to expend this in the subsequent financial year otherwise, it is returned to the funding body. Major activities are funded by both Federal and State Governments, including the Department of Health (DOH), Institute for Urban Indigenous Health (IUIH), Northern Aboriginal & Torres Strait Islander Health Alliance (NATSIHA), Mackay Community Foundation, Northern Queensland Primary Health Care Network (PHN), National Indigenous Australians Agency (NIAA), Department of Justice and Attorney General (DJAG), Department of Aboriginal & Torres Strait Islander Partnerships, Queensland Aboriginal and Islander Health Council (QAIHC), National Aboriginal Community Controlled Health Organisation (NACCHO) and Quality Use of Medicines Maximised for Aboriginal & Torres Strait Islander People (Qumax). Additional income is received from self-generated Medicare funds, and several other smaller revenue streams.

In 2023, total revenue increased by \$1,458,201 or 18%. Total revenue for period ended 30th June 2023 was \$9,515,884 in contrast to \$8,057,683 for the previous financial year. The increase in revenue was primarily a result of increase in funding from Department of Health and Northern Queensland Primary Health Care Network.

The main revenue stream for ATSICHS Mackay Ltd is through grant funding from DOH. A total of \$5,088,540 funding was received from DOH. As outlined in the funding agreement, the grant received was used in the following areas:

- operation of clinical services inclusive of transporting clients;
- accreditation expenses;
- running of new directions program (formerly known as Mothers & Babies);
- capital works expenses
- Northern Beaches Clinic
- Connected Beginnings Program
- Major Capital Works: and
- chronic disease program.

Expenditure

Total Expenditure for the financial year ended 30th June 2023 was \$9,351,0669 compared to \$7,989,049 in the 2023 financial year. This is an expected increase in expenses in line with additional grant funding received (discussed above) and was primary due to the following:

- A 300% increase in costs for client support service. In 2023 financial, total cost was \$271,018 compared to \$67,381 in previous financial year. This increase is primarily attributed because of medical support services provided under ITC Funding and
- 2. A 9% increase in costs associated with wages. In the 2023 financial year, the total cost of wages plus superannuation contribution was \$6,153,961 whist in the 2022 financial year it was \$5,651,118. As a predominantly service organisation, wages accounts for our largest expense (please refer to the Human Resources report for more information).

Net Profit

As revenue received was greater than expenses incurred, the organisation had a net profit of \$164,215 for financial year ended 30th June 2023 (in comparison to a surplus of \$68,633 for the previous year ended 30th June 2022).

Balance Sheet

The balance sheet (also referred to as the statement of financial position) presents a company's financial position at the end of a specified date. It shows a snapshot of the company's financial position as at the end of the financial year. The balance sheet displays what assets an entity owns, as well as what it owes to other parties as of the date indicated in the heading. The major components of a Balance Sheet are:

- Assets:
- · Liabilities; and
- Equity.

ATSICHS Mackay Ltd's balance sheet remained relatively stable in the 2023 financial year (FY). The overall current assets increased from \$2,523,567 in 2022 to \$3,619,525 in 2023. There was ant increase in current liabilities, from \$1,189,763 2022 FY to \$2,072,069 in the 2023 FY. The current liability predominantly comprised of employee leave entitlements and Good & Services Tax (GST) payable.

Equity represents the net worth of an organisation. It can be calculated by taking the total amount of assets and subtracting the total amount of liabilities. ATSICHS Mackay Ltd's equity comes from two sources. The first is the Asset Revaluation Reserve, which represents a reassessment of the value of a capital asset as at a particular date. An asset is originally recorded in the accounts at its cost. This cost is spread over the asset's effective useful life to the organisation – this is termed 'depreciation'. Assets are occasionally re-valued in the accounts to reflect a closer approximation to their realistic "worth" (as was done with the main clinic building in the 2020 FY). The main source of equity lies in the organisation's Retained Profits. This represents accumulated profits from each year's profit or loss. For the financial year ending 30th June 2023, the retained profits increased by \$164,215 (the profit from 2023 financial year).

Cash Flow Statement

Cash and cash equivalents includes cash at bank and on hand, cash at call, and short-term money market securities. The cash flow statement indicates that cash flow provided from operating activities increased by \$913,420 due to additional grant funding received. The organisation did not rely on any external loans, so there was no cash generated from financing activates. Therefore, cash and cash equivalents at the end of the 2023 financial year was \$2,245,519 in comparison to \$1,427,537 in the 2022 financial year.

Taxation

ATSICHS Mackay Ltd remains a not-for-profit entity, and as such, is not subject to taxation on profits by the Australian Taxation Office.

Financial ratios are useful indicators of an organisation's performance and financial situation. Most ratios can be calculated for information provided by the financial statements. Financial ratios can be used to analyse trends and to compare the firm's financials to those of other firms. For this report, only two ratios are examined: the Current Ratio, which is a measure of organisational liquidity, and the Debt ratio, which is a measure of organisational gearing. Together, they provide an indication of the overall short-term liquidity and long-term solvency of the organisation.

The current ratio provides information about a firm's ability to meet its short-term financial obligations. This is referred to as 'liquidity', and in general, it is more desirable for a firm to be liquid. The current ratio is usually of particular interest to those extending to short-term credit to an organisation and can often be included as one of the covenants on debt issued to a firm. The current ratio calculation is: Current assets/current liabilities.

For the 2023 FY, the current ratio of ATSICHS Mackay Ltd was 1.75. This indicates that for every \$1 of short-term debt, ATSICHS Mackay Ltd had \$1.75 in current assets with which to pay it. This is deemed to be good liquidity.

An organisation's assets are usually funded by a combination of debt and equity financing. Debt financing can include long-term loan borrowings, and equity funding is the amount that the business owners have contributed. In the case of ATSICHS Mackay Ltd, the equity funding primarily relates to retained profits of the company. The debt ratio indicates what proportion of an organisation's assets is funded by external debt sources (as opposed to equity or owner's sources). The higher the debt funding, the more highly 'geared' or 'leveraged' an organisation is. A highly geared company faces various potential risks in terms of future abilities to repay its debt-load. The debt ratio is calculated by:

Total Liabilities / Total Assets OR
Total Liabilities / [Total Liabilities + Total Equity].

For the financial year ending 30th June 2023, ATSICHS Mackay Ltd had a debt ratio of 0.36. This means that 36% of the organisation's assets are funded through external obligations (predominantly, employee expenses and supplier credit), with the remainder (64%) being funded by equity (predominantly, retained profits). This indicates that ATSICHS Mackay Ltd is minimally geared, and that there is confidence in its future abilities to pay its long-term obligations.

These two ratios indicate that ATSICHS Mackay Ltd is solvent as at 30th June 2023

Forecast for the Financial Year ahead

It is expected that the operations of ATSICHS Mackay Ltd will break even in the 2023 financial year. This is primarily due to the expectation of continuation in revenue streams, including self-generated income which funds any program deficit.

Overall, ATSICHS Mackay Ltd is deemed to be in a sound financial position as at 30^{th} June 2023.

FINANCIAL REPORT

CONTENTS

	Page No.
Directors' Report	2
Auditor's Independence Declaration	7
Profit and Loss Statement	8
Statement of Comprehensive Income	10
Statement of Financial Position	11
Statement of Changes in Equity	12
Statement of Cash Flows	13
Notes to the Financial Statements	14
Directors' Declaration	22
Independent Auditor's Report	23

DIRECTORS' REPORT

Your directors present their report on the company for the financial year ended 30 June 2023.

Directors

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

Andrew Ramsamy
Adam Doull
Merle Barba
Sonetta Fewquandie
Janice Binsiar
Patricia Wright
Lynda Smith
Raymond Bobongie

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

Review of Operations

The profit of the company for the financial year after providing for income tax amounted to \$164,215 (2022: \$68,634).

A review of the operations of the company during the financial year and the results of those operations are as follows:

Significant Changes in the State of Affairs

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

Principal Activities

The principal activities of the company during the financial year were:

operate a culturally appropriate comprehensive primary and medical health service targeting the Mackay Regional Indigenous community, that addresses inequality in health status within and across the population groups.

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

Short-term and Long-term Objectives

The company's short-term objectives are to:

- engage, promote and foster community control as a whole organisation moving forward;
- improve access to sustainable best practice culturally appropriate services across the Mackay Region;
- target chronic health in the regional community using a comprehensive primary health care model;
- build linkages and partnerships to ensure a strong focus remains on improving Indigenous Health across the Mackay Region.

DIRECTORS' REPORT

The company's long-term objectives are to:

- actively recognise and respect community control in the delivery of appropriate primary health care services:
- deliver best practice primary health care to our regional community;
- work in partnership with our regional community to manage chronic disease and improve their quality
 of life:
- build a culturally and technically competent workforce that meets the needs of our regional community;
 and
- be an advocate for, and on behalf of, our regional community's health needs and aspirations.

Strategies

To achieve these objectives, the company has adopted the following strategies:

- development of improved systems of governance for the organisation's members;
- lead the development and delivery of holistic primary health care programs and services to better meet the physical, social, emotional, cultural and spiritual wellbeing of our Mackay Region community;
- foster a continuous learning environment within the organisation to ensure ATSICHS Mackay continues to meet the diverse needs of our community;
- improve the organisation's capacity to focus on prevention, detection and early intervention of chronic disease in our regional community;
- strengthen self management of health in our community to better manage chronic disease and improve quality of life;
- foster a supportive workplace for new and existing staff and volunteers to achieve their potential in the delivery of culturally appropriate health services; and
- expand alliances with other Aboriginal and Torres Strait Islander organisations, private sector, non-government and government bodies in order to raise the agenda for health needs and aspirations of our regional community.

Key Performance Measures

Measuring our overall company performance:

- all funding grant terms and conditions maintained to satisfactory standard as deemed by relevant funder feedback and annual risk audits;
- low level (% complaints against occasions of service) and satisfactory resolution of client complaints;
- low level of permanent staff turnover (% overall FTE);
- demonstrated maintenance of Corporate Regulatory provisions based on minimal and minor ASIC breaches annually;
- maintenance of an unqualified financial audit annually;
- maintenance of AGPAL accreditation; and
- achievement of ISO9001 Accreditation per auditor agreed timeframes.

Information on Directors

Ms Janice Binsiar - Chairperson

Qualifications - Diploma in Community Welfare, Diploma in Community

Case Management

Experience - Board member - Binga Birry Justice Group, board member -

ATSICHS Mackay, board member - Pioneer Murri Court Elders, member of Mackay Hospital & Health Service Advisory Group

Special Responsibilities - Member of board of directors

DIRECTORS' REPORT

Mrs Merle Barba

- Deputy Chairperson

Qualifications

- Community Elder, Community Member

Experience

 Chairperson - Mackay Coloured Cooperative, board member -Aboriginal Legal Service, board member - HACC (10 years),
 Committee Member - All Black Sporting Club, one of the original community

activists and a founding member of ATSICHS (Mackay) Ltd

Special Responsibilities

- Member of board of directors

Mr Andrew Ramsamy

- Treasurer

Qualifications

 Graduate Certificate in Management (QUT), Diploma of Management, Certificate IV in Business, Certificate IV in Transport Operations, General Aviation Commercial Pilot Licence, Commercial Master 4/5 Captain

Experience

 Member of ATSICHS since 1993, CEO and board member - Mackay and District ATSIC Legal Aid Service 1991 - 1997, Manager ATSIASSI Health Unit and Policy Coordination Qld Health 2001 - 2008

Special Responsibilities

- Member of board of directors

Ms Patricia Wright

- Secretary

Qualifications

- Diploma in Primary Health Science (A&TSI Primary Health Care)

Mr Adam Doull

- Director

Qualifications

 Diploma of Management, Certificate IV in Training and Assessment, Certificate IV in Engineering (CAD), Certificate III in Fabrication (Tradesman Boilermaker), Workplace Health and Safety Officer, Certificate IV in Building & Construction.

Experience

Owner Manager of Statewide Sales & Service Pty Ltd,
 Former Chair of Skills Training Mackay, Previous Deputy Chair of the
 Mackay Region Area Consultative Committee (now the RDA), Committee
 member of the Mackay Whitsunday Community Jobs Priority Committee,
 Deputy Chair of Skills Training Mackay, board member of MARABISDA.
 Previously Area Supervisor for SKILLED workforce, Student Support
 Officer/Project Officer ATSISSI unit at the Mackay TAFE.

Special Responsibilities

- Member of board of directors

Mr Raymond Bobongie

- Director

Qualifications

- Certificate II Community Services, Certificate II Disability Work, Certificate Recognition Protection fo Children Mackay.

DIRECTORS' REPORT

Mrs Sonetta Fewquan	die
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- Director

Qualifications

 Bachelor of Community Welfare; Diploma of Business Management; Certificate IV Training and Assessment; Certificate IV Indigenous Primary Health Care; Diploma Children's Services (Community Services)

Experience

 Board of directors Mackay Coloured Cooperative (15 years); board of directors My105 Radio Station (6 years); Past employee ATSICHS 15 years; Manager of Mackay Aboriginal & Islander Justice Alternative Group (MAIJAG) 2009 - 2014; Current Manager Indigenous Family Wellbeing Program/Family Participation Program MARABISDA

Special Responsibilities

- Member of board of directors

Ms Lynda Smith

- Director

Qualifications

 Justice of the Peace - JP (Qual), Bachelor of Applied Health Science, Certificate in Advanced Obstetrics & Gynaecology, Advanced Generalist - Certificate in Aboriginal and Torres Strait Islander Primary Health Science, Hearing Health Skills Certificate -Australian Hearing, Eye Health for Indigenous Health Workers and Place Emergency Care, Senior First Aid, Department of Emergency Services - Counter Disaster & Rescue Services/Introduction to Disaster - Level 1.

Experience

 Management Course, Tropical Public Health - Contribution and and Teamwork Certificate, Director of Mudth Niyleta ATSI Housing / Health - Sarina; Materials Handler / Store Person (8yrs) experience

Special Responsibilities

- Member of board of directors

Meetings of Directors

During the financial year, 6 meetings of directors were held. Attendances by each director were as follows:

	Eligible to attend	Number attended
Janice Binsiar	6	4
Merle Barba	6	4
Andrew Ramsamy	6	6
Patricia Wright	6	5
Adam Doull	6	3
Sonetta Fewquandie	6	5
Lynda Smith	6	3
Raymond Bobongie	6	6

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DIRECTORS' REPORT

The company is incorporated under the *Corporations Act 2001* and is a company limited by guarantee. If the company is wound up, the constitution states that each member is required to contribute a maximum of \$5 each towards meeting any outstanding obligations of the entity. At 30 June 2023, the total amount that members of the company are liable to contribute if the company is wound up is \$125 (2022: \$125).

Auditor's Independence Declaration

The lead auditor's independence declaration for the year ended 30 June 2023 has been received and can be found on page 7 of the financial report.

Signed in accordance with a resolution of the board of directors:

Director	Busin	
Director	_ M Borbe	

Dated: 9-10-23



ABN 59 221 120 758

ABORIGINAL & TORRES STRAIT ISLANDERS COMMUNITY HEALTH SERVICE (MACKAY) LTD

AUDITOR'S INDEPENDENCE DECLARATION UNDER SECTION 307C OF THE CORPORATIONS ACT 2001

TO THE DIRECTORS OF **ABORIGINAL & TORRES STRAIT ISLANDERS COMMUNITY HEALTH SERVICE (MACKAY) LTD**

In accordance with section 307C of the Corporations Act 2001, I am pleased to provide the following declaration of independence to the directors of Aboriginal & Torres Strait Islanders Community Health Service (Mackay) Ltd. As the lead audit partner for the audit of the financial report of Aboriginal & Torres Strait Islanders Community Health Service (Mackay) Ltd for the year ended 30 June 2023, I declare that, to the best of my knowledge and belief, there have been no contraventions of:

- the auditor independence requirements as set out in the Corporations Act 2001 in relation to the audit; and i.
- any applicable code of professional conduct in relation to the audit. ii.

Connole Carlisle Chartered Accountants 12 Gregory Street MACKAY, QLD, 4740



Partner: Brett Quinn

Dated: 6 October 2023











PROFIT AND LOSS STATEMENT FOR THE YEAR ENDED 30 JUNE 2023

	Note	2023 \$	2022 \$
INCOME			
Dividends received		54,457	29,544
Interest received		2,634	1,543
Grants received	2	7,717,378	6,320,207
Medicare, PIP payments and immunisation incentives	_	1,462,649	1,336,004
Registrar		-	138,474
Client record fees		7,338	10,605
NDIS income		187,755	114,052
Sundry income		82,889	105,889
Profit (loss) on disposal of investments		784	1,365
		9,515,884	8,057,683
LESS EXPENDITURE			
Accreditation		17,423	12,331
Activities		372,932	427,795
Advertising		18,623	31,976
Auditor's remuneration	3	17,500	23,747
Bank charges		-	188
Cleaning		57,976	44,452
Client support		271,018	67,381
Clinic supplies		69,146	192,426
Computer expenses		113,308	509,191
Contract medical staff		(214)	48,463
Depreciation		40,144	40,853
Electricity		68,685	51,409
Postage, freight and cartage		5,160	12,888
Change in market value of managed investments		(38,970)	86,827
Insurance		86,098	91,408
Investment expenses		4,477	3,994
Motor vehicle expenses		351,708	308,554
NAIDOC		2,823	5,416
Printing and stationery		60,969	64,624
Rates and taxes		45,291	44,741
Rent		182,038	158,530
Repairs and maintenance		65,516	104,534
Security and safety inspections		5,158	2,556
Staff and board training and welfare		94,485	96,571
Storage fees		9,780	9,029
Subcontractors		18,272	18,085
Subscriptions		56,666	11,169
Superannuation contributions		550,048	503,286
Telephone		50,137	54,868
Travelling expenses		65,821	61,691
Travel allowance		14,579	4,308
Unexpended grant funds		1,071,159	(252,073)
Wages including leave provisions		5,603,913	5,147,832

PROFIT AND LOSS STATEMENT FOR THE YEAR ENDED 30 JUNE 2023

	Note	2023 \$	2022 \$
	_	9,351,669	7,989,049
		164,215	68,633
NET OPERATING PROFIT	_	164,215	68,633
Retained Profits at the beginning of the financial year	_	4,856,453	4,787,820
TOTAL AVAILABLE FOR APPROPRIATION	_	5,020,668	4,856,453
RETAINED PROFITS AT THE END OF THE FINANCIAL YEAR	_	5,020,668	4,856,453

STATEMENT OF COMPREHENSIVE INCOME FOR THE YEAR ENDED 30 JUNE 2023

	Note	2023 \$	2022 \$
Profit for the year		164,215	68,634
Other comprehensive income:			
Total other comprehensive income for the year			<u>-</u>
Total comprehensive income for the year		164,215	68,634
Total comprehensive income attributable to member of the company		164,215	68,634

STATEMENT OF FINANCIAL POSITION

AS AT 30 JUNE 2023

	Note	2023 \$	2022 \$
ASSETS			
CURRENT ASSETS			
Cash and cash equivalents	4	2,245,519	1,427,538
Trade and other receivables	5	194,192	65,071
Financial assets Other assets	6 7	1,108,733 71,081	973,540 57,418
TOTAL CURRENT ASSETS	′ –	3,619,525	2,523,567
TOTAL CURRENT ASSETS	_	3,019,323	2,323,307
NON-CURRENT ASSETS			
Property, plant and equipment	8 _	2,103,017	2,143,161
TOTAL NON-CURRENT ASSETS		2,103,017	2,143,161
TOTAL ASSETS	=	5,722,542	4,666,728
LIABILITIES			
CURRENT LIABILITIES			
Trade and other payables	9	374,745	261,516
Other liabilities	10	1,093,588	242,737
Provisions	11 _	603,736	685,510
TOTAL CURRENT LIABILITIES	_	2,072,069	1,189,763
NON-CURRENT LIABILITIES			
Provisions	11 _	227,724	218,432
TOTAL NON-CURRENT LIABILITIES		227,724	218,432
TOTAL LIABILITIES		2,299,793	1,408,195
NET ASSETS	_	3,422,748	3,258,533
EQUITY			
Reserves	12	(1,597,920)	(1,597,920)
Retained earnings	_	5,020,668	4,856,453
TOTAL EQUITY	=	3,422,748	3,258,533

STATEMENT OF CHANGES IN EQUITY FOR THE YEAR ENDED 30 JUNE 2023

	Retained Earnings \$	Asset revaluation reserve \$	Total \$
Balance at 1 July 2021	4,787,820	(1,597,920)	3,189,900
Comprehensive income Profit for the year	68,633		68,633
Total comprehensive income for the year attributable to the member of the			
company	68,633		68,633
Balance at 30 June 2022	4,856,453	(1,597,920)	3,258,533
Balance at 1 July 2022 Comprehensive income	4,856,453	(1,597,920)	3,258,533
Profit for the year	164,215		164,215
Total comprehensive income for the year attributable to the member of the			
company	164,215		164,215
Balance at 30 June 2023	5,020,668	(1,597,920)	3,422,748

STATEMENT OF CASH FLOWS

	Note	2023 \$	2022 \$
Cash flows from operating activities			
Receipts from grant providers and health insurance commission		9,620,643	8,516,528
Payments to suppliers and employees		(9,036,510)	(8,448,185)
Interest received		2,634	1,542
Other income		277,982	370,386
Dividends received	_	48,671	29,079
Net cash provided by operating activities	14 _	913,420	469,350
Cash flows from investing activities			
Purchase of property, plant and equipment		-	(59,316)
Purchase of managed investments		(104,314)	(681,658)
Sale of managed investments		8,877	119,643
Net cash provided by (used in) investing activities	_	(95,437)	(621,331)
Net increase (decrease) in cash held		817,983	(151,981)
Cash and cash equivalents at beginning of financial year		1,427,537	1,579,518
Cash and cash equivalents at end of financial year	14	2,245,519	1,427,537

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 30 JUNE 2023

The financial statements cover Aboriginal & Torres Strait Islanders Community Health Service (Mackay) Ltd as an individual entity, incorporated and domiciled in Australia. Aboriginal & Torres Strait Islanders Community Health Service (Mackay) Ltd is a company limited by guarantee.

The financial statements were authorised for issue on October 2023 by the directors of the Entity.

1. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Financial Reporting Framework

The directors have prepared the financial statements on the basis that the Entity is a non-reporting entity because there are no users dependent on general purpose financial statements. These financial statements are therfore special purpose financial statements that have been prepared in order to meet the requirements of the *Corporations Act 2001*. The Entity is a not-for-profit entity for financial reporting purposes under Australian Accounting Standards.

The financial statements have been prepared in accordance with the mandatory Australian Accounting Standards applicable to entities reporting under the *Corporations Act 2001* and the significant accounting policies disclosed below, which the directors have determined are appropriate to meet the needs of members. Such accounting policies are consistent with those of previous periods unless stated otherwise.

Statement of Compliance

The financial statements have been prepared in accordance with the mandatory Australian Accounting Standards applicable to entities reporting under the *Corporations Act 2001*, the basis of accounting specified by all Australian Accounting Standards and Interpretations, and the disclosure requirements of Accounting Standards AASB101: Presentation of Financial Statements, AASB107: Cash Flow Statements, AASB108: Accounting Policies, Changes in Accounting Estimates and Errors, AASB1031: Materiality and AASB1054: Australian Additional Disclosures .

The Entity has concluded that the requirements set out in AASB10 and AASB128 are not applicable as the initial assessment on its interests in other entities indicated that it does not have any subsidiaries, associates or joint ventures. Hence, the financial statements comply with all the recognition and measurement requirements in Australian Accounting Standards.

Basis of Preparation

The financial statements, except for the cash flow information, have been prepared on an accrual basis and are based on historical costs unless otherwise stated in the notes. Material accounting policies adopted in the preparation of these financial statements are presented below and have been consistently applied unless stated otherwise. The amounts presented in the financial statements have been rounded to the nearest dollar.

The accounting policies that have been adopted in the preparation of the financial statements are as follows:

(a) Property, Plant and Equipment

Each class of property, plant and equipment is carried at cost or fair value as indicated less, where applicable, any accumulated depreciation and impairment losses.

The carrying amount of plant and equipment is reviewed annually by directors to ensure it is not in excess of the recoverable amount from these assets. The recoverable amount is assessed on the basis of the expected net cash flows that will be received from the asset's employment and subsequent disposal. The expected net cash flows have been discounted to their present values in determining recoverable amounts.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2023

Depreciation

The depreciable amount of all fixed assets, including buildings and capitalised lease assets but excluding freehold land, is depreciated on a diminishing value basis over the asset's useful life to the company commencing from the time the asset is held ready for use.

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

Class of Fixed Asset:

Plant and equipment

Capital works costs

Depreciation Rate
10-80%
2.50%

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

Gains and losses on disposals are determined by comparing proceeds with the carrying amount. These gains or losses are recognised in profit or loss when the item is derecognised. When revalued assets are sold, amounts included in the revaluation reserve relating to that asset are transferred to retained earnings.

(b) Accounts Receivable and Other Debtors

Accounts receivable and other debtors include amounts due from the Health Insurance Commission. Receivables expected to be collected within 12 months of the end of the reporting period are classified as current assets. All other receivables are classified as non-current assets.

(c) Employee Benefits

Provision is made for the company's liability for employee benefits arising from services rendered by employees to the end of the reporting period. Employee benefits have been measured at the nominal amounts expected to be paid when the liability is settled, plus any related on-costs. Both annual leave and long service leave are recognised within the provisions liability.

(d) Government Grants

Government grants are recognised at fair value where there is reasonable assurance that the grant will be received and all grant conditions will be met. Grants relating to expense items are recognised as income over the periods necessary to match the grant to the costs they are compensating. Grants relating to assets are credited to deferred income at fair value and are credited to income over the expected useful life of the asset on a straight-line basis.

(e) Cash and Cash Equivalents

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

(f) Investments

Investments include equity securities (i.e. shares) of listed and unlisted entities. The company recognises and measures these investments at their fair value.

(g) Financial Instruments

Initial recognition and measurement

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

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2023

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

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. Where available, quoted prices in an active market are used to determine fair value. In other circumstances, valuation techniques are adopted.

Trade receivables are initially measured at the transaction price if the trade receivables do not contain a significant financing component or if the practical expedient was applied as specified in paragraph 63 of AASB 15: Revenue from Contracts with Customers.

Classification and subsequent measurement

Financial assets

Financial assets are subsequently measured at:

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

on the basis of the two primary criteria:

- the contractual cash flow characteristics of the financial asset; and
- the business model for managing the financial assets.

A financial asset is subsequently measured at amortised cost if it meets the following conditions:

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

A financial asset is subsequently measured at fair value through other comprehensive income if it meets the following conditions:

- the contractual terms within the financial asset give rise to cash flows that are solely payments of principal and interest on the principal amount outstanding on specified dates; and
- the business model for managing the financial asset comprises both contractual cash flows collection and the selling of the financial asset.

By default, all other financial assets that do not meet the conditions of amortised cost and the fair value through other comprehensive income's measurement condition are subsequently measured at fair value through profit or loss.

The company initially designates a financial instrument as measured at fair value through profit or loss if:

- it eliminates or significantly reduces a measurement or recognition inconsistency (often referred to as "accounting mismatch") that would otherwise arise from measuring assets or liabilities or recognising the gains and losses on them on different bases;
- it is in accordance to the documented risk management or investment strategy and information about the groupings was documented appropriately, so as the performance of the financial liability that was part of a group of financial liabilities or financial assets can be managed and evaluated consistently on a fair value basis; and
- it is a hybrid contract that contains an embedded derivative that significantly modifies the cash flows otherwise required by the contract.

The initial designation of the financial instruments to measure at fair value through profit or loss is a one-time option on initial classification and is irrevocable until the financial asset is derecognised.

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 30 JUNE 2023

(h) Revenue and Other Income

Non-reciprocal grant revenue is recognised in profit or loss when the Entity obtains control of the grant and it is probable that the economic benefits gained from the grant will flow to the Entity and the amount of the grant can be measured reliably.

If conditions are attached to the grant which must be satisfied before the entity is eligible to receive the contribution, the recognition of the grant as revenue will be deferred until those conditions are satisfied.

When the grant revenue is received whereby the Entity incurs an obligation to deliver economic value directly back to the contributor, this is considered a reciprocal transaction and the grant revenue is recognised in the statement of financial position as a liability until the service has been delivered to the contributor; otherwise the grant is recognised as income on receipt.

When Aboriginal & Torres Strait Islanders Community Health Service (Mackay) Ltd receives non-reciprocal contributions of assets from the government and other parties for zero or a nominal value. These assets are recognised at fair value on the date of acquisition in the statement of financial position, with a corresponding amount of income recognised in profit or loss.

Interest revenue is recognised using the effective interest method, which for floating rate financial assets is the rate inherent in the instrument.

Revenue from the rendering of a service is recognised upon the delivery of the service to the customer.

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

(i) Accounts Payable and Other Payables

Accounts payable and other payables represent the liabilities for goods and services received by the company 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.

(j) Economic Dependence

Aboriginal & Torres Strait Islanders Community Health Service (Mackay) Ltd is dependent on the Department of Health for the majority of its revenue used to operate the business. At the date of this report the Board of Directors has no reason to believe the Department will not continue to support Aboriginal & Torres Strait Islanders Community Health Service (Mackay) Ltd.

(k) Goods and Services Tax (GST)

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

Receivables and payables are stated inclusive of the amount of GST receivable or payable. 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.

NOTES TO THE FINANCIAL STATEMENTS

		2023 \$	2022 \$
2.	GRANTS RECEIVED		
	Department of Health - Primary Health Care Department of Prime Minister - Social and Emotional Wellbeing Institute for Urban Indigenous Health - Tackling Indigenous Smoking	2,635,142 240,712 627,500	2,555,058 223,918 627,500
	Northern Aboriginal & Torres Strait Islander Health Alliance	-	212,452
	Department of Health - Connected Beginnings	250,000	,
	Department of Health - Chronic Disease	73,112	73,112
	Department of Health - New Directions	575,208	575,208
	Pharmacy Guild of Australia - QUMAX	13,956	12,227
	Department of Health - Capital Works	874,318	-
	Department of Health - IAHP Service Expansion	600,760	586,108
	Primary Health Network - Mental Health	225,000	225,000
	Primary Health Network - AOD Service Development	283,985	283,985
	Primary Health Network - Male Mental Health	160,000	160,000
	Primary Health Network - Integrated Team Care	627,097	-
	Primary Health Network - COVID Vaccine Program	10,822	
	NACCHO - COVID Vaccine Support	50,000	105,265
	NACCHO - COVID-19 Transitional Planning	72,000	-
	Murri Court Elders	310,549	291,227
	James Cook University	-	14,950
	Qld Aboriginal & Islander Health Council - COVID 19	-	283,650
	Queensland Aboriginal and Islander Health Council - IHWT	15,500	19,840
	NACCHO National Disability Insurance Scheme	35,354	70,707
	Diabetic Association of Qld - My Health for Life	36,364	
		7,717,378	6,320,207
3.	AUDITOR'S REMUNERATION		
	Auditing or reviewing the financial statements	17,500	18,933
4.	CASH AND CASH EQUIVALENTS		
	Petty cash	200	200
	Staff entitlements account	599,457	466,656
	General account	1,438,818	865,970
	Medicare account	170,449	8,631
	DDH cash management account	36,595	86,081
	DDTT Guart management account	2,245,519	1,427,538
E	TRADE AND OTHER RECEIVABLES		
5.	CURRENT		
	Sundry debtors	184,726	61,391
	Franking credits refundable	9,466	3,680
	5 · · · · · · · · · · · · · · · · · · ·		
		194,192	65,071

NOTES TO THE FINANCIAL STATEMENTS

			2023	2022
•	FINANCIAL ACCETO		\$	\$
6.	FINANCIAL ASSETS			
	CURRENT			
	Investments in equity instruments designated as at fair value through other comprehensive income	(2)	1 100 722	073 540
	unough other comprehensive income	(a)	1,108,733	973,540
	(a) Investments in equity instruments designated as at fair value	ie through	other compreh	ensive income
	Managed investments at market value:	Ū	•	
	Shares in listed companies		529,757	487,737
	Australian property		92,876	102,599
	Australian fixed interest		448,619	343,985
	Global fixed interest		37,481	39,219
	Total Investments in equity instruments designated as at fair value through other comprehensive income		1,108,733	973,540
	value alleagh caller completionelve meetic			
7.	OTHER ASSETS			
	CURRENT			
	Prepayments	_	71,081	57,418
0	DDODEDTY DI ANT AND COLLIDMENT			
8.	PROPERTY, PLANT AND EQUIPMENT		0.000.400	0.000.400
	Land and buildings: 31/33 Victoria Street Less accumulated depreciation		2,096,160 (505,971)	2,096,160 (486,438)
	Total land and buildings		1,590,189	1,609,722
	rotal land and buildings	=	1,000,100	1,003,722
	Capital works costs		538,221	538,221
	Less accumulated depreciation		(69,210)	(55,755)
			469,011	482,466
	Plant and equipment		500,303	500,303
	Less accumulated depreciation		(456,486)	(449,330)
	Total plant and equipment		512,828	533,439
		<u></u>		
	Total property, plant and equipment		2,103,017	2,143,161
9.	TRADE AND OTHER PAYABLES			
9.	CURRENT			
	Goods and services tax		247 740	110 520
	Sundry creditors		217,740 81,428	119,520 25,582
	Funds held on behalf of other community groups		2,531	3,435
	Salary sacrifice payments outstanding		7,503	8,343
	Withholding tax payable		20,027	104,734
	Superannuation payable		45,516	(98)
			374,745	261,516

NOTES TO THE FINANCIAL STATEMENTS

		2023 \$	2022 \$
10.	OTHER LIABILITIES		
	CURRENT		
	Unexpended grant funds	1,087,106	15,947
	Grant income in advance	6,483	226,790
		1,093,588	242,737
11.	PROVISIONS		
	CURRENT		
	Provision for holiday pay	371,672	282,166
	Provision for Communicare	232,064	403,344
		603,736	685,510
	NON-CURRENT		
	Provision for long service leave	227,724	218,432
12.	RESERVES		
	Asset Revaluation Reserve The asset revaluation reserve records revaluations of non-current	assets.	
13.	LEASING COMMITMENTS		
	(a) Operating Lease Commitments Non-cancellable operating leases contracted for but not recognised in the financial statements Payable:		
	not later than 12 months	270,529	255,467
	between 12 months and five years	235,119	177,345
		505,648	432,812

NOTES TO THE FINANCIAL STATEMENTS

		2023 \$	2022 \$
14.	CASH FLOW INFORMATION		
	(a) Reconciliation of cash Cash at the end of financial year as included in the statement of cash flows is reconciled to the related items in the statement of financial position as follows:		
	Cash at Bank	2,245,519	1,427,537
		2,245,519	1,427,537
	(b) Reconciliation of cash flow from operations with profit		
	Profit	164,215	68,633
	Non-cash flows in profit: Depreciation Impairment of managed investments Profit on sale of investments	40,144 (38,970) (784)	40,853 86,827 (1,365)
	Changes in assets and liabilities: Movement in receivables Movement in other assets Movement in payables Movement in provisions Movement in other payables	(129,121) (13,664) 55,844 (72,482) 908,238	(40,989) (5,382) (312) 335,776 (14,691)
	Net cash provided by operating activities	913,420	469,350

DIRECTORS' DECLARATION

The directors have determined that the company is not a reporting entity and that this special purpose financial report should be prepared in accordance with the accounting policies outlined in Note 1 to the financial statements.

In accordance with a resolution of the directors of Aboriginal & Torres Strait Islanders Community Health Service (Mackay) Ltd, the directors of the company declare that:

- The financial statements and notes, as set out on pages 8 to 21 are in accordance with the Corporations Act 2001: and
 - a. comply with accounting standards; and
 - b. give a true and fair view of the company's financial position as at 30 June 2023 and of its performance for the year ended on that date in accordance with the accounting policies described in Note 1 to the financial statements.
- 2. In the directors' opinion there are reasonable grounds to believe that the company will be able to pay its debts as and when they become due and payable.

Director

Director

Dated:

9-10-23



ABN 59 221 120 758

ABORIGINAL & TORRES STRAIT ISLANDERS COMMUNITY HEALTH SERVICE (MACKAY) LTD

INDEPENDENT AUDITOR'S REPORT TO THE MEMBER OF **ABORIGINAL & TORRES STRAIT ISLANDERS COMMUNITY HEALTH SERVICE (MACKAY) LTD**

Report on the Audit of the Financial Report

Opinion

We have audited the financial report of Aboriginal & Torres Strait Islanders Community Health Service (Mackay) Ltd (the company), which comprises the statement of financial position as at 30 June 2023, the statement of profit or loss, statement of changes in equity and 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, the accompanying financial report of Aboriginal & Torres Strait Islanders Community Health Service (Mackay) Ltd is in accordance with the Corporations Act 2001, including:

- giving a true and fair view of the company's financial position as at 30 June 2023 and of its financial performance for the year then ended; and
- complying with Australian Accounting Standards to the extent described in Note 1, and the Corporations (ii) Regulations 2001.

Basis for Opinion

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

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

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

Emphasis of Matter - Basis of Accounting

We draw attention to Note 1 of the financial report, which describes the basis of accounting. The financial report has been prepared for the purpose of fulfilling the directors' financial reporting responsibilities under the Corporations Act 2001. As a result, the financial report may not be suitable for another purpose. Our opinion is not modified in respect of this matter.











INDEPENDENT AUDITOR'S REPORT TO THE MEMBER OF ABORIGINAL & TORRES STRAIT ISLANDERS COMMUNITY HEALTH SERVICE (MACKAY) LTD

Information Other than the Financial Report and Auditor's Report Thereon

The directors of the company are responsible for the other information. The other information comprises the information included in the company's annual report for the year ended 30 June 2023, but does not include the financial report and our auditor's report thereon. Our opinion on the financial report does not cover the other information and accordingly we do not express any form of assurance conclusion thereon. In connection with our audit of the financial report, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial report or our knowledge obtained in the audit or otherwise appears to be materially misstated. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Responsibilities of the Directors for the Financial Report

The directors of the company are responsible for the preparation of the financial report that gives a true and fair view and have determined that the basis of preparation described in Note 1 of the financial report is appropriate to meet the requirements of the *Corporations Act 2001* and is appropriate to meet the needs of the member. The directors' responsibility also includes such internal control as the directors determine is necessary to enable the preparation of the financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error.

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

Auditor's Responsibility for the Audit of the Financial Report

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

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

- Identify and assess the risks of material misstatement of the financial report, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the company's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the directors.

INDEPENDENT AUDITOR'S REPORT TO THE MEMBER OF ABORIGINAL & TORRES STRAIT ISLANDERS COMMUNITY HEALTH SERVICE (MACKAY) LTD

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

Connole Carlisle
Chartered Accountants

MACKAY, QLD, 4740

Partner: Brett Quinn

Partner: Brett Quinn

Dated: 10 October 2023

	Note	2023 \$	2022 \$
DEPARTMENT OF HEALTH - PRIMARY HEALTH CARE			
INCOME			
Grants received		2,635,142	2,555,058
Contribution from Self-Generated Income	_	1,289,317	1,172,596
	_	3,924,459	3,727,654
LESS EXPENDITURE			
Accreditation		6,497	8,025
Activities		75,992	64,105
Advertising		(1,762)	_
Auditor's remuneration		2,897	_
Bank charges		· -	188
Cleaning		41,078	33,047
Client support		67,079	-
Clinic supplies		8,925	-
Computer expenses		8,584	413,014
Contract medical staff		(1,473)	5,557
Electricity		53,658	39,090
Postage, freight and cartage		4,374	6,764
Insurance		28,669	20,508
Motor vehicle expenses		92,026	46,640
NAIDOC		2,823	5,025
Printing and stationery		19,679	10,879
Rates and taxes		9,513	16,217
Rent		13,186	13,079
Repairs and maintenance		47,117	44,544
Security and safety inspections		1,526	2,186
Staff and board training and welfare		47,233	56,705
Storage fees		9,780	9,029
Subscriptions		47,121	5,727
Superannuation contributions		278,105	257,217
Telephone		29,345 41,604	26,462
Travelling expenses Travel allowance		41,604 1,750	34,251
Wages including leave provisions		2,989,133	1,407 2,607,988
wages including leave provisions	_	3,924,459	3,727,654
	_	<u> </u>	
NET OPERATING PROFIT (LOSS)	-	-	-
SURPLUS/(DEFICIT)	=		_
Surplus/(Deficit) Balance at 1 July 2022	_		<u> </u>
Surplus/(Deficit) Balance at 30 June 2023	=		

DIVISIONAL PROFIT AND LOSS STATEMENT FOR THE YEAR ENDED 30 JUNE 2023

Note

2023

\$

2022

\$

DEPARTMENT OF PRIME MINISTER AND CABINET - SOCIAL AND EM	NOTIONAL WELLBEING	
INCOME		
Grants received	240,712	223,918
LESS EXPENDITURE		
Activities	15,937	11,478
Auditor's remuneration	8,165	5,500
Cleaning	39	-
Client support	496	-
Computer expenses	659 364	-
Electricity Insurance	18,088	- 11,137
Motor vehicle expenses	17,077	15,235
Printing and stationery	1,912	9,720
Rates and taxes	2,569	-
Rent	9,034	_
Repairs and maintenance	1,367	1,111
Security and safety inspections	703	_
Staff and board training and welfare	2,421	2,256
Subscriptions	-	387
Superannuation contributions	14,457	11,210
Telephone	5,383	7,790
Travelling expenses	869	_
Travel allowance	-	846
Wages including leave provisions	141,172	114,124
	240,712	190,794
	<u> </u>	33,124
NET OPERATING PROFIT		33,124
SURPLUS/(DEFICIT)	-	33,124
Surplus/(Deficit) Balance at 1 July 2022	<u> </u>	(33,124)
Surplus/(Deficit) Balance at 30 June 2023	<u> </u>	

DIVISIONAL PROFIT AND LOSS STATEMENT FOR THE YEAR ENDED 30 JUNE 2023

Note

2023

2022

	NOIC	2023	2022
		\$	\$
INSTITUTE FOR URBAN INDIGENOUS HEALTH - TACKLII	NG INDIGENOUS SN	NOKING	
INCOME			
INCOME			
Grants received		627,500	627,500
LESS EXPENDITURE			
Activities		62,820	48,009
Advertising		19,000	17,976
Auditor's remuneration		2,665	4,800
Cleaning		2,500	5,409
Computer expenses		11,144	1,603
Electricity		3,734	888
Postage, freight and cartage		70	2,168
Insurance		1,653	8,083
Motor vehicle expenses		67,671	71,945
Printing and stationery		6,484	5,795
Rates and taxes		2,569	2,503
Rent		20,267	21,030
Repairs and maintenance		4,523	657
Security and safety inspections		331	-
Staff and board training and welfare		9,544	3,780
Superannuation contributions		37,888	38,057
Telephone		7,140	7,476
Travelling expenses		3,515	833
Travel allowance		3,141	297
Wages including leave provisions	_	360,841	386,191
		627,500	627,500
		<u> </u>	-
NET OPERATING PROFIT	_	<u> </u>	-
SURPLUS/(DEFICIT)		-	-
Surplus/(Deficit) Balance at 1 July 2022		_	<u>-</u> -
	_	<u>-</u>	<u> </u>
Surplus/(Deficit) Balance at 30 June 2023	_		

	Note	2023 \$	2022 \$
NORTHERN ABORIGINAL & TORRES STRAIT ISLANDER HEALT	H ALLIANC	E	
INCOME			
Grants received			212,452
LESS EXPENDITURE			
Client support		-	63,105
Insurance		-	5,096
Motor vehicle expenses		-	16,626
Staff and board training and welfare		-	154
Superannuation contributions		-	11,590
Wages including leave provisions	_		115,881
	_		212,452
	_		
NET OPERATING PROFIT	=	-	
SURPLUS/(DEFICIT)		-	-
Surplus/(Deficit) Balance at 1 July 2022	_		
Surplus/(Deficit) Balance at 30 June 2023	=		

	Note	2023 \$	2022 \$
DEPARTMENT OF HEALTH - CONNECTED BEGINNINGS			
INCOME			
Grants received		250,000	<u>-</u>
LESS EXPENDITURE			
Activities		16,503	-
Clinic supplies		20,000	-
Superannuation contributions		20,217	-
Travel allowance		742	-
Wages including leave provisions		192,538	-
		250,000	-
		-	-
NET OPERATING PROFIT			-
SURPLUS/(DEFICIT)		-	-
Surplus/(Deficit) Balance at 1 July 2022			<u>-</u>
Surplus/(Deficit) Balance at 30 June 2023			-

	Note	2023	2022
		\$	\$
SELF-GENERATED INCOME			
INCOME			
Interest received		428	-
Medicare, PIP payments and immunisation incentives		1,462,649	1,336,005
Registrar		_	138,474
Client record fees		7,338	10,605
Sundry income	_	82,890	104,889
		1,553,305	1,589,973
LESS EXPENDITURE			
Contribution to a different division		1,342,553	1,342,041
		1,342,553	1,342,041
		210,752	247,932
NET OPERATING PROFIT		210,752	247,932
SURPLUS/(DEFICIT)		210,752	247,932
SORF LOS/(DEFICIT)		210,732	241,332
Surplus/(Deficit) Balance at 1 July 2022		1,462,777	1,214,845
Surplus/(Deficit) Balance at 30 June 2023	_	1,673,529	1,462,777

	Note	2023 \$	2022 \$
DEPARTMENT OF HEALTH - CHRONIC DISEASE		•	•
INCOME			
Grants received	_	73,112	73,112
LESS EXPENDITURE			
Activities		2,054	1,003
Clinic supplies		11,016	8,183
Computer expenses		16,825	297
Contract medical staff		33	360
Superannuation contributions		4,103	5,711
Wages including leave provisions	_	39,081	57,558
	_	73,112	73,112
	<u>_</u>		
NET OPERATING PROFIT	=	<u> </u>	-
SURPLUS/(DEFICIT)		-	-
Surplus/(Deficit) Balance at 1 July 2022	_	<u> </u>	
Surplus/(Deficit) Balance at 30 June 2023	=	<u>-</u>	

	Note	2023 \$	2022 \$
DEPARTMENT OF HEALTH - NEW DIRECTIONS			
INCOME			
Grants received	_	575,208	575,208
LESS EXPENDITURE			
Activities		28,178	17,828
Auditor's remuneration		-	1,415
Client support		275	469
Clinic supplies		480	3,962
Computer expenses		17,484	900
Contract medical staff		1,225	-
Postage, freight and cartage		97	2,361
Insurance		2,666	2,987
Motor vehicle expenses		5,272	2,182
NAIDOC		-	391
Printing and stationery		6,064	8,449
Repairs and maintenance		-	574
Staff and board training and welfare		5,351	70
Superannuation contributions		48,040	48,153
Telephone		634	417
Travel allowance		1,915	269
Wages including leave provisions	-	457,527	484,781
	-	575,208	575,208
	_	<u>-</u>	-
NET OPERATING PROFIT	=		-
SURPLUS/(DEFICIT)		-	-
Surplus/(Deficit) Balance at 1 July 2022	_	<u>-</u>	
Surplus/(Deficit) Balance at 30 June 2023	=	<u> </u>	

	Note	2023 \$	2022 \$
PHARMACY GUILD OF AUSTRALIA - QUMAX			
INCOME			
QUMAX income		13,956	12,227
LESS EXPENDITURE			
Activities		4,274	1,284
Clinic supplies Travelling expenses		7,102	4,100
Travelling expenses		2,580	6,843
		13,956	12,227
NET OPERATING PROFIT			
SURPLUS/(DEFICIT)		-	-
Surplus/(Deficit) Balance at 1 July 2022			
Surplus/(Deficit) Balance at 30 June 2023			

No	ote	2023 \$	2022 \$
DEPARTMENT OF HEALTH - CAPITAL WORKS			
INCOME			
Grants received	_	874,318	
LESS EXPENDITURE	_		
		-	
		874,318	
NET OPERATING PROFIT	_	874,318	
SURPLUS/(DEFICIT)		874,318	-
Surplus/(Deficit) Balance at 1 July 2022			
Surplus/(Deficit) Balance at 30 June 2023		874,318	

Note	2023 \$	2022 \$
DEPARTMENT OF HEALTH - IAHP SERVICE EXPANSION		
INCOME		
Grants received Contribution from Self-Generated Income	600,760 53,236	586,108 169,445
	653,996	755,553
LESS EXPENDITURE		
Accreditation	4,625	2,636
Activities	1,964	-
Advertising	-	3,500
Auditors' remuneration Cleaning	755 1,009	1,415
Client support	1,098 29	_
Clinic supplies	10,591	136,355
Computer expenses	17,552	910
Contract medical staff	-	42,545
Electricity	5,974	6,369
Postage, freight and cartage	-	700
Insurance Motor vehicle expenses	-	5,096 32,525
Printing and stationery	4,110	20,019
Rent	96,736	75,767
Repairs and maintenance	6,602	4,292
Security and safety inspections	387	226
Staff and board training and welfare	3,181	27,038
Subscriptions Superproposition contributions	2,431	- 45.040
Superannuation contributions Telephone	45,262 711	45,046 5,440
Travelling expenses	-	7,952
Travel allowance	291	-
Wages including leave provisions	451,697	463,682
	653,996	881,513
	-	(125,960)
NET OPERATING PROFIT (LOSS)	-	(125,960)
SURPLUS/(DEFICIT)	-	(125,960)
Surplus/(Deficit) Balance at 1 July 2022	<u>-</u>	125,960
Surplus/(Deficit) Balance at 30 June 2023		

	Note	2023 \$	2022 \$
DEPARTMENT OF HEALTH - IAHP SERVICE EXPANSION - CAPITA	L		
LESS EXPENDITURE			
Clinic equipment		-	4,711
Computer expenses		-	71,535
Repairs and maintenance	_	-	23,754
		-	100,000
NET OPERATING PROFIT (LOSS)	=	-	(100,000)
SURPLUS/(DEFICIT)		-	(100,000)
Surplus/(Deficit) Balance at 1 July 2022	_	-	100,000
Surplus/(Deficit) Balance at 30 June 2023	=		

	Note	2023 \$	2022 \$
DEPARTMENT OF HEALTH - SERVICE AND MAINTENANCE			
LESS EXPENDITURE			
Repairs and maintenance			22,991
		-	22,991
NET OPERATING PROFIT	:	-	(22,991)
SURPLUS/(DEFICIT)		-	(22,991)
Surplus/(Deficit) Balance at 1 July 2022			22,991
Surplus/(Deficit) Balance at 30 June 2023			

Note	2023 \$	2022 \$
COTA QLD		
INCOME		
Sundry income		1,000
LESS EXPENDITURE		
Activities	1,000	
	1,000	-
	(1,000)	1,000
NET OPERATING PROFIT	(1,000)	1,000
SURPLUS/(DEFICIT)	(1,000)	1,000
Surplus/(Deficit) Balance at 1 July 2022	1,000	<u> </u>
Surplus/(Deficit) Balance at 30 June 2023		1,000

	Note	2023 \$	2022 \$
PRIMARY HEALTH NETWORK - MENTAL HEALTH			
INCOME			
Grants received	_	225,000	225,000
LESS EXPENDITURE			
Activities		23,355	4,677
Finance and audit costs		3,677	2,426
Insurance		7,209	8,083
Motor vehicle expenses		35,762	40,635
Rates and taxes		2,569	2,503
Rent		17,268	20,715
Repairs and maintenance		520	909
Salaries, wages and oncosts		104,497	122,540
Subcontractors		18,272	18,085
Training and development		2,624	178
Utilities, communication and computer expenses	_	9,248	4,249
		225,000	225,000
	_		-
NET OPERATING PROFIT	_	-	-
SURPLUS/(DEFICIT)		-	-
Surplus/(Deficit) Balance at 1 July 2022	_		
Surplus/(Deficit) Balance at 30 June 2023	_		

	Note	2023 \$	2022 \$
PRIMARY HEALTH NETWORK - AOD SERVICE DEVELOPMENT			
INCOME			
Grants received		283,985	283,985
LESS EXPENDITURE			
Activities		8,118	5,985
Finance and audit costs		4,056	3,969
Insurance		7,209	8,083
Motor vehicle expenses		42,114	39,781
Rates and taxes		20,884	17,865
Rent		13,525	16,901
Repairs and maintenance		632	1,292
Salaries, wages and oncosts		152,469	179,397
Training and development		595	1,923
Utilities, communication and computer expenses		7,557	8,789
		257,159	283,985
		26,826	
NET OPERATING PROFIT	:	26,826	
SURPLUS/(DEFICIT)		26,826	-
Surplus/(Deficit) Balance at 1 July 2022			
Surplus/(Deficit) Balance at 30 June 2023	:	26,826	

N	Note	2023 \$	2022 \$
PRIMARY HEALTH NETWORK - MALE MENTAL HEALTH		·	·
INCOME			
Grants received	_	160,000	160,000
LESS EXPENDITURE			
Activities		3,171	15,332
Finance and audit costs		1,255	2,427
Insurance		7,209	8,083
Motor vehicle expenses		42,261	35,220
Rent		11,972	10,990
Repairs and maintenance		381	468
Salaries, wages and oncosts		82,345	82,554
Training and development		2,728	1,177
Utilities, communication and computer expenses	_	5,322	3,749
	_	156,644	160,000
	_	3,356	-
NET OPERATING PROFIT	=	3,356	-
SURPLUS/(DEFICIT)		3,356	-
Surplus/(Deficit) Balance at 1 July 2022	_	<u> </u>	
Surplus/(Deficit) Balance at 30 June 2023	=	3,356	

	Note	2023 \$	2022 \$
PRIMARY HEALTH NETWORK - INTEGRATED TEAM CARE			
INCOME			
Grants received	_	627,097	
LESS EXPENDITURE			
Advertising		1,385	-
Client support		198,048	-
Clinic supplies		533	-
Computer expenses		15,107	-
Motor vehicle expenses		37,106	-
Printing and stationery		8,571	-
Staff and board training and welfare		13,609	-
Superannuation contributions Telephone		27,973	-
Travelling expenses		1,553 258	-
Travel allowance		2,304	-
Wages including leave provisions		266,408	_
	-	572,855	-
	_	54,242	-
NET OPERATING PROFIT	_	54,242	-
SURPLUS/(DEFICIT)	-	54,242	
` '		•	
Surplus/(Deficit) Balance at 1 July 2022	_	<u> </u>	<u>-</u>
Surplus/(Deficit) Balance at 30 June 2023	=	54,242	-

	Note	2023 \$	2022 \$
PRIMARY HEALTH NETWORK - COVID VACCINE PROGRAM			
INCOME			
Grants received		10,822	
LESS EXPENDITURE			
Activities		5,804	-
Motor vehicle expenses		550	-
Superannuation contributions		338	-
Travel allowance		921	-
Wages including leave provisions		3,209	
		10,822	
		-	-
NET OPERATING PROFIT		-	
SURPLUS/(DEFICIT)		-	-
Surplus/(Deficit) Balance at 1 July 2022			
Surplus/(Deficit) Balance at 30 June 2023			

Not	e 202 3	3	2022 \$
NACCHO - COVID-19 VACCINE SUPPORT	·		•
INCOME			
Grants received	5	50,000	105,265
LESS EXPENDITURE			
Activities		5,000	9,000
Clinic supplies		0,500	13,125
Printing and stationery		3,000	-
Superannuation contributions		2,661	2,727
Travelling expenses		3,500	-
Wages including leave provisions		25,339	80,413
	5	50,000	105,265
		<u>-</u>	-
NET OPERATING PROFIT			
SURPLUS/(DEFICIT)		-	-
Surplus/(Deficit) Balance at 1 July 2022		<u> </u>	
Surplus/(Deficit) Balance at 30 June 2023		<u> </u>	

	Note	2023 \$	2022 \$
NACCHO - COVID-19 TRANSITIONAL PLANNING			
INCOME			
Grants received		72,000	
LESS EXPENDITURE			
		72,000	
NET OPERATING PROFIT	:	72,000	
SURPLUS/(DEFICIT)		72,000	-
Surplus/(Deficit) Balance at 1 July 2022			
Surplus/(Deficit) Balance at 30 June 2023	:	72,000	

	Note	2023 \$	2022 \$
MURRI COURT ELDERS			
INCOME			
Grants received	_	310,549	291,227
LESS EXPENDITURE			
Accreditation		2,500	_
Activities		118,274	124,312
Auditor's remuneration		755	3,716
Cleaning		1,621	5,744
Client support		5,091	2,666
Computer expenses		2,500	2,258
Electricity		1,283	1,752
Postage, freight and cartage		-	895
Insurance		8,299	9,155
Motor vehicle expenses		6,901	5,104
Printing and stationery		4,572	2,333
Rates and taxes		7,188	5,652
Rent Repairs and maintenance		50 4,375	50 3,945
Security and safety inspections		4,375 500	3,945 144
Staff and board training and welfare		3,774	835
Subscriptions		5,400	4,800
Superannuation contributions		9,490	10,299
Telephone		1,120	1,548
Travelling expenses		13,202	1,539
Travel allowance		3,268	1,489
Wages including leave provisions		90,386	102,991
	_	290,549	291,227
	<u>-</u>	20,000	-
NET OPERATING PROFIT	<u>-</u>	20,000	-
SURPLUS/(DEFICIT)	_	20,000	-
Surplus/(Deficit) Balance at 1 July 2022	_	<u> </u>	-
Surplus/(Deficit) Balance at 30 June 2023	=	20,000	_

	Note	2023 \$	2022 \$
MACKAY COMMUNITY FOUNDATION			
LESS EXPENDITURE			
Clinic supplies	-		4,275
	_	-	4,275
NET OPERATING PROFIT (LOSS)	=	-	(4,275)
SURPLUS/(DEFICIT)		-	(4,275)
Surplus/(Deficit) Balance at 1 July 2022	-	<u>-</u>	4,275
Surplus/(Deficit) Balance at 30 June 2023	-		

	Note	2023 \$	2022 \$
JAMES COOK UNIVERSITY			
INCOME			
Grants received	_		14,950
LESS EXPENDITURE Activities		488	-
Computer expenses	_	14,462	14,797
		14,950	14,797
		(14,950)	153
NET OPERATING PROFIT	_	(14,950)	153
SURPLUS/(DEFICIT)		(14,950)	153
Surplus/(Deficit) Balance at 1 July 2022	_	14,950	14,797
Surplus/(Deficit) Balance at 30 June 2023	_	-	14,950

	Note	2023 \$	2022 \$
QUEENSLAND ABORIGINAL AND ISLANDER HEALTH COUNCIL INCOME	- COVID-19	·	Ť
Grants received	_	<u>-</u>	283,650
LESS EXPENDITURE Activities Advertising Client support Clinic supplies Superannuation contributions Travelling expenses Wages including leave provisions		- - - - - - - -	124,140 10,500 1,778 17,715 10,799 10,273 108,445 283,650
NET OPERATING PROFIT	_	-	-
SURPLUS/(DEFICIT)		-	-
Surplus/(Deficit) Balance at 1 July 2022	_	<u> </u>	
Surplus/(Deficit) Balance at 30 June 2023	_	<u>-</u>	-

1	Note	2023 \$	2022 \$
MANAGED INVESTMENTS			
INCOME			
Dividends received Franking credits refundable Interest received Profit (loss) on disposal of investments	_	44,991 9,466 2,205 784 57,446	25,864 3,680 1,542 1,365 32,451
LESS EXPENDITURE Change in market value of managed investments Investment expenses	-	(38,970) 4,477 (34,493)	86,827 3,994 90,821
NET OPERATING PROFIT (LOSS)	- -	91,939 91,939	(58,370)
SURPLUS/(DEFICIT)		91,939	(58,370)
Surplus/(Deficit) Balance at 1 July 2022	_	(13,988)	44,382
Surplus/(Deficit) Balance at 30 June 2023	=	77,951	(13,988)

Note	2023 \$	2022 \$
NATIONAL DISABILITY INSURANCE SCHEME		
INCOME		
NDIS income	187,755	114,053
LESS EXPENDITURE Activities Cleaning Client support Computer expenses Insurance Motor vehicle expenses Printing and stationery Staff and board training and welfare Subscriptions Superannuation contributions Telephone Wages including leave provisions	2,117 5,096 4,968 168 1,273 220 24,837 1,406 237,279	641 - (636) 2,060 5,096 2,660 15 2,454 255 19,341 1,488 193,878 227,252
NET OPERATING PROFIT (LOSS)	(98,329)	(113,199)
SURPLUS/(DEFICIT)	(98,329)	(113,199)
Surplus/(Deficit) Balance at 1 July 2022	(133,429)	(20,230)
Surplus/(Deficit) Balance at 30 June 2023	(231,758)	(133,429)

Note	2023 \$	2022 \$
QUEENSLAND ABORIGINAL AND ISLANDER HEALTH COUNCIL - IHWT		
INCOME		
Grants received	15,500	19,840
LESS EXPENDITURE Superannuation contributions Wages including leave provisions	1,473 14,027 15,500	1,804 18,036 19,840
NET OPERATING PROFIT	-	
SURPLUS/(DEFICIT)	-	-
Surplus/(Deficit) Balance at 1 July 2022		
Surplus/(Deficit) Balance at 30 June 2023		

	Note	2023 \$	2022 \$
NACCHO NATIONAL DISABILITY INSURANCE SCHEME			
INCOME			
Grants received		35,354	70,707
LESS EXPENDITURE Staff and board training and welfare Superannuation contributions Wages including leave provisions		773 3,286 31,295 35,354	6,428 64,279 70,707
NET OPERATING PROFIT			
SURPLUS/(DEFICIT)		-	-
Surplus/(Deficit) Balance at 1 July 2022			
Surplus/(Deficit) Balance at 30 June 2023			

	Note	2023 \$	2022 \$
DIABETIC ASSOCIATION OF QLD - MY HEALTH FOR LIFE			
INCOME			
Grants received		36,364	
LESS EXPENDITURE			
		36,364	
NET OPERATING PROFIT	:	36,364	
SURPLUS/(DEFICIT)		36,364	-
Surplus/(Deficit) Balance at 1 July 2022			
Surplus/(Deficit) Balance at 30 June 2023	:	36,364	

