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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 cultures
- 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 has developed out of the desire of local Indigenous people 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 members are elected on a rotation of four new Directors being elected each year to the ATSICHS Mackay Board of Directors. The new Board of Directors is thereafter delegated with the authority to undertake the executive management of ATSICHS Mackay over the following twelve months.

In the course of executing its executive management responsibilities, the Board of Directors are guided by the general Policies and procedures and constitution of ATSICHS Mackay. The Members of the Board of Directors make executive management decisions through the process of interpreting how the general ATSICHS Mackay policies and procedures apply situations under consideration by the Board of Directors. In line with the ATSICHS Mackay's Constitution, while the general control of ATSICHS Mackay is the responsibility of the ATSICHS Mackay membership the executive control of ATSICHS Mackay is the responsibility of the elected Members of the Board of Directors.

ATSICHS Mackay was established in 1978 (incorporated on 2nd 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, Isaac, Whitsunday and Central Highlands.

ATSICHS Mackay is funded primarily by the Department of Health (DOH). 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 provided by the organisation, provided to the Aboriginal and Torres Strait Islander community of the Local Government Areas of Mackay, Isaac, Whitsunday and Central Highlands 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 committed to the community per the constitutions governing nature and the Companies Limitation by 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 on behalf of the organisation's members. Any person supporting ATSICH Mackay's aims and objectives can apply to the Board of Directors to become a financial member of ATSICHS Mackay. The general membership of ATSICHS Mackay elects new Board of Directors members based on the rotational method of member terms as specified in the Constitution at the Annual General Meeting to manage the organisation for the following year.

External Affiliations

ATSICHS Mackay is an affiliated member of Queensland Aboriginal and Islander Health Council (QAIHC), Townsville-Mackay Medicare Local (TMML), National Aboriginal Community Controlled Health Organisation (NACCHO), James Cook University, Tropical Medical Training, Check-Up and Headspace Mackay.

Funding Base

The main source of operating income for ATSICHS Mackay is an annual grant from the Commonwealth Government's Department of Health. The grant is provided on a financial year basis in line with the general Standard Terms and Conditions for funding, as agreed between the AT-SICHS Mackay Board of Directors and DOH.

Core Services

ATSICHS Mackay provides a public primary health care service incorporating a bulk-billing general practice medical clinic, dental service, health screening and health promotion activities, and social emotional and wellbeing support and programs.

CORPORATEGOVERNANCESTATEMENT

ATSICHS Mackay Ltd is committed to achieving the highest standards of corporate governance in order to ensure that the organisation is properly managed to protect and enhance members'/ community interests, and the organisation, its directors, officers 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 developed the Corporate Governance Principles and Recommendations (CGPR).

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.

PRINCIPLE 1: LAY SOLID FOUNDATIONS FOR MANAGEMENT AND OVERSIGHT

Board: Roles and Responsibilities

The Board of Directors (Board) is the principal governing body of ATSICHS Mackay Ltd and is appointed annually by the members in accordance with the constitution. Membership of ATSICHS Mackay Ltd is open to adult Aboriginal and Torres strait Islander people over the age of eighteen years as per Local Government Areas.

The Board is responsible for the overall governance of ATSICHS Mackay Ltd. The Board has delegated authority for the operations and administration of the organisation to the Executive Manager (EM).

The functions of the Board are to:

- 1. Provide effective leadership and collaborate with the management team in:
 - · Articulating the organisation's values, vision, mission and strategies
 - · Developing strategic (direction) plans and ordering strategic priorities
 - Maintaining open lines of communication and promulgating through the organisation and with external stakeholders the values, vision, mission and strategies
 - Developing and maintaining an organisation structure to support the achievement of agreed strategic objectives
- 2. Monitor the performance of the EM against agreed performance indicators
- 3. Review and agree on the action plans and annual budget proposed by the management
- 4. Monitor the achievement of the strategic and business plans and annual budget outcomes
- 5. Establish such committees, policies and procedures as will facilitate the more effective discharge of the Board's roles and responsibilities
- 6. Ensure, through the Board committees and others as appropriate, compliance obligations and functions are effectively discharged
- 7. Initiate a Board induction program and follow-up action to deal with issues arising

- and arrange for directors to attend courses, seminars and participate in development programs as the Board judges appropriate
- 8. Ensure that all significant systems and procedures are in place for the organisation to run effectively, efficiently, and meet all legal and contractual requirements
- 9. Ensure that all significant risks are adequately considered and accounted for by the management team.
- Ensure that organisation has appropriate corporate governance structures in place including standards of ethical behaviour and promoting a culture of corporate and social responsibility.

The Board has no operational involvement in the conduct of organisation's business activities and delivery of services. Its role is confined to setting and reviewing policy. Each individual Director owes to the organisation and its members an obligation to deliver his or her duties in good faith and in a manner, that the individual reasonably believes is in the best interests of the organisation and its members.

Each person who is on the Board:

Has a duty to act in that position with honesty, diligence and reasonable care; and shall not make improper use of information or opportunities received through that position. To this end, expectations of the Board are to:

- · Act honestly and in good faith
- · Act with care and diligence
- · Act loyally and avoid conflicts of interest
- · Act professionally
- Avoid abuse of opportunity and information
- Act in the best interests of the Corporation
- · Exercise powers for their proper use

Board members are expected to be both collectively and individually accountable for all the decisions and actions that are taken/not taken by the Committee. No Director shall have the authority to, or issue any statement (written, oral, or otherwise) to any person or entity with respect to any issue in connection with which the person issuing the statement identifies his or her affiliation with the ATSICHS Mackay Ltd, or claim to speak or act on its behalf of, in the name of, or with the endorsement of the ATSICHS Mackay Ltd, without prior authorisation from the Board.

The Board sets the strategic business directions for ATSICHS Mackay Ltd and decides the pace of implementation. An Annual Implementation Plan drafted initially by the Executive Manger and considered then approved by the Board, will specify outputs to be achieved. ATSICHS Mackay Ltd aims to increase the educational standards and employability of Aboriginal and Torres Strait Islander people in the primary health care disciplines through delivery of high quality and culturally appropriate training initiatives that respond to the needs of Aboriginal and Torres Strait Islander families and communities.

The primary role of the Board is to oversee the operations and activities of ATSICHS Mackay Ltd to ensure it is achieving its business directions. This includes facilitating the smooth operation of the Board itself. The overseeing role of the Board can be broken down into more specific areas, which include:

- Fulfilling constitutional, legal, and funding body requirements
- · Financial management
- Program management
- External relations management
- Forward planning and evaluation
- Policy development
- · Effective business management
- · Physical asset management
- Human resource management, which includes the power to appoint and remove
 or suspend the Executive Manager and the Senior Management Team and agents
 and to determine the powers, duties and payment of employees and agents and to
 approve and manage the Executive Manager performance appraisal system
- Accountability to members, funding agencies, and the community

The ATSICHS Mackay Ltd Board is obliged as a collective group to govern the organisation according to:

- The laws relating to it as a legal entity
- The laws relating to the purpose for which ATSICHS Mackay Ltd was established
- The philosophy, aims, objects, rules and by-laws set down in the Constitution
- The terms and conditions of any service agreements entered in by the Board
- The policies, procedures and practices formally endorsed by the Board.
- The Board is obliged to act in accordance with the provisions contained in a range of documents, including legislated requirements under all relevant Awards and Acts
- The Board must decide which decisions can be made by the Committee or delegated to any of its members such as the Chairperson, or to the Executive Manager

The Board is ultimately responsible for ensuring that ATSICHS Mackay Ltd:

- Meets all legal and statutory requirements
- · Maintain financial viability
- · Provides a just and fair personnel/industrial climate
- · Provides clear strategic directions and business priorities
- Ensures clear communication processes are in place to make certain that the Board and members are kept informed

The Role of the Chairperson

The role of the Chairperson is to provide leadership, support and direction in relation to the strategic direction of ATSICHS Mackay Ltd in collaboration with the Executive Manager.

The Responsibilities of the Chairperson

- To preside as chairperson at each Annual General Meeting, Special Meetings and meetings of the Board
- To represent the Board and be the public spokesperson for the Corporation
- To delegate negotiations with all governments and their ministerial staff, departmental personnel, agencies and non-government organisations relating to the aims and objectives of ATSICHS Mackay Ltd to the Executive Manager, whilst retaining the right to personally attend and participate in any meetings

- To provide advice and guidance on policy matters to the Executive Manager
- To sign the report to be tabled by the Board at each Annual General Meeting

The Role of the Vice Chairperson

The Vice Chairperson is an automatic executive position and has the responsibility of assisting the Chairperson to perform his/her duties both at Board meetings and outside of Board meetings.

The Responsibilities of the Vice Chairperson

The Vice Chairperson needs to acquaint him/herself with the duties and tasks of the Chairperson so they can deputies at short notice for the Chairperson if required to do so at any time.

The Role of the Treasurer

To ensure that all the money due to ATSICHS Mackay Ltd is collected and received and that all payments authorised by the ATSICHS Mackay Ltd are made.

To ensure that correct books and accounts are kept showing the financial affairs of ATSICHS Mackay Ltd, including full details of all receipts and expenditure connected with the activities of ATSICHS Mackay Ltd. This includes activities in connection with Agreements entered in with Departments/Agencies of the Commonwealth and/or Queensland Governments.

To routinely report to the Board at its meetings with appropriate documentation concerning the financial affairs of ATSICHS Mackay Ltd. The Treasurer will establish the standard of reporting documentation to be provided by the Finance and Administration Manager, which include monthly reports showing total income and expenditure year to date; individual program income and expenditure year to date; and a financial compliance report.

To provide at each Annual General Meeting a financial report to the members on behalf of the Committee, outlining a full disclosure of the financial affairs of the Corporation as provided for in the Constitution.

Subject to the provisions of the Act and with the approval of the Board, some of these duties may be delegated to the Finance and Administration Manager.

The Role of the Secretary

To ensure the keeping of minutes and records of all appointments of office-bearers and other Board members; the names of Board members present at meetings of the Board, committee meetings or general meetings; all proceedings at meetings of the Board and meetings of the organisation.

To keep the Registrar of Aboriginal and Torres Strait Islander Corporations informed of all relevant information.

To ensure that minutes of proceedings at a meeting are signed by the chairperson of the meeting.

Executive Manager

The Executive Manager (EM) is appointed by the Board to manage the affairs of the Corporation and is responsible for implementing the policies and general planning set by the Board and conducting the day to day business of the Corporation. This includes responsibility for the management of ATSICHS Mackay Ltd in accordance with approved strategy, policies, performance contract and delegated authority framework.

He/she is responsible for ensuring that the Board is provided with the relevant strategic options,

policy and financial issues on which to deliberate, and with the necessary administrative support to enable the Board to work effectively. The EM attends Board meetings; however, he/she is not a Director and is not entitled to vote.

The Executive Manager is responsible for:

- The day to day management and administration of ATSICHS Mackay Ltd.
- · Putting into operation decisions of the Board.
- Managing the day to day financial resources of the organisation within grant funding guidelines and in accordance with the approved budget and variations.
- Overseeing the staff of the organisation including performance reviews, grievance procedures, appointments and disciplinary procedures.
- Providing advice and assistance to the Board to enable effective decision-making processes for the functions of ATSICHS Mackay Ltd.
- Identifying funding sources and support from the Government and non-Government agencies.
- Ensuring that the Aboriginal and Torres Strait Islander community within the Mackay region are aware of the functions and policy framework of the organisation.
- Ensuring that the operations within the organisation are cohesive and complimentary to the operations of other indigenous organisations within the region.
- Promoting the role of ATSICHS Mackay Ltd at a local, regional, state and national level.
- Developing advocacy positions and submissions on behalf of ATSICHS Mackay
- · Ensuring that senior executives have formal job descriptions.

Performance management

All staff and management including the senior executives of ATSICHS Mackay Ltd are subject to annual performance planning and reviews. The performance of each executive is assessed by the EM, who is their immediate supervisor. They are assessed against achievement of their job specifications and goals, contribution towards specific business and strategic objectives, and adherence to organisational values.

Along with all staff, all executives of ATSICHS Mackay Ltd including the EM are remunerated according to the relevant award for their position responsibilities within the organisation. The Board is not remunerated.

PRINCIPLE 2: STRUCTURE THE BOARD TO ADD VALUE

The Board consists of eight members, non-executive Directors (as defined by the CGPR), who are not employees. A diagram of the governance structure is shown in the organisational chart. A quorum of no less than 50% of Board is required for each Board meeting. Board Members are elected on the system as specified in the Constitution at each Annual General Meeting.

The Board assesses annually the independence of each Director. Directors must disclose to ATSICHS Mackay Ltd any matter which may affect their independence as soon as they become aware of it. All Board members are requested to disclose related party transactions on an annual basis, and this is recorded in the Board meeting minutes of the relevant meeting. A person on the Board who has disclosed an interest cannot vote or be present during deliberations on any

motion relating the contract or arrangement or correspondence.

The office-bearers of the Board are elected by the Board at their first meeting after the annual general meeting;

- Chairperson
- Vice Chairperson
- · Treasurer and Secretary

The Constitution specifies grounds under which a person ceases to be a member of the Board.

ATSICHS Mackay Ltd is committed to ensuring that the good governance of the organisation is supported through appropriate opportunities for skill and knowledge development of Board members. To this end, ATSICHS Mackay Ltd has an induction and education program for all Directors. New Directors receive information about the organisation, outlining their duties and responsibilities, and attend a formal induction meeting. This is evidenced by an Induction Checklist, which includes a component identifying the need for any relevant training. All Directors have access to the Company Secretary who is appointed by the Board. The Company Secretary is accountable to the Board, through the Chair, on governance matters.

Board Sub-Committees

The respective compositions and details of meeting attendance of the committees are set out in the Directors' Report that is included in the Annual Report each year. Minutes of committee meetings are kept for all sub-committees of the Board. Each committee has a Terms of Reference describing its role and composition. The terms of reference are reviewed periodically to ensure that the role and responsibilities of each committee are consistent with ATSICHS Mackay Ltd strategic and operational objectives.

The Board committees are each scheduled to meet as per the terms of reference for each committee. Attendance at Board committee meetings is set out in the Constitution. Senior executives supply the Board and its Sub-Committees with information to allow it to make decisions on an informed basis, and regularly attend meetings.

At each of the meetings the Board receives comprehensive reports from;

- Executive Manager
- · Primary Health Care Manager
- · Senior Medical Officer
- Finance and Administration Manager

Notices of meetings are applied according to the Constitution and Terms of References.

External Representation

As part of its roles and responsibilities for relationship management, the Board of ATSICHS Mackay Ltd may decide to enter into formal, written agreements for partnerships, alliances or other forms of joint undertakings with one or more external organisations (including committees of various types), consistent with the aims and objectives of its Constitution.

The Executive Manager will maintain a register of external organisations, partnerships, alliances or other forms of joint undertakings on which ATSICHS Mackay Ltd has representation. The Board will review its expected outputs from each such representation in the context of approving the ATSICHS Mackay Ltd Annual Implementation Plan.

PRINCIPLE 3: PROMOTE ETHICAL AND RESPONSIBLE DECISION MAKING

Directors, members and employees of ATSICHS Mackay Ltd are required to act in accordance with the highest standards of honesty and integrity. ATSICHS Mackay Ltd promotes diversity across the organisation with regards to age, gender, ethnicity and the cultural background of its Directors, committee members and employees. ATSICHS Mackay Ltd is a member organisation limited by guarantee and does not have securities (shares etc.) so does not report on share trading policies.

PRINCIPLE 4: SAFEGUARD INTEGRITY IN FINANCIAL REPORTING

External Auditors

Connole & Carlisle Chartered Accountants have been the external auditor of ATSICHS Mackay Ltd for over two decades. The performance of the external auditor is reviewed annually by the Board and organisation members with advice from senior management. An analysis of fees paid to the external auditor, including a breakdown of any non-audit fees paid or received by the auditor, is provided in notes to the financial reports. It is the policy of the external auditors to provide an annual declaration of their independence to the organisation.

The senior management of ATSICHS Mackay Ltd undertakes a full review of the terms of engagement of the external auditor and provides recommendations to the Board and the organisation's members before re-appointment of the existing audit firm occurs. Senior management also seek annual tenders on the open market for the audit services. ATSICHS Mackay Ltd external auditors undertake an annual audit, which is usually performed through twice yearly visits on premises.

Finance Department

The Finance Department consists entirely of organisational employees and assists the Board to discharge its responsibility to manage the business planning, budgeting processes and general financial management of ATSICHS Mackay Ltd. The Finance Department is headed by the Finance and Administration Manager (FAM), who holds a minimum qualification of either Certified Practicing Accountant (CPA) or Chartered Accountant (CA). Financial risk management practice is monitored by the FAM who provides regular reports to the EM. Up to date (live) financial data is presented at monthly management meetings and at each Board meeting.

PRINCIPLE 5: MAKE TIMELY AND BALANCED DISCLOSURE

As ATSICHS Mackay Ltd is not a listed company; it is not bound by the requirement for continuous disclosure. Proceedings of all meetings will always have minutes. Minutes of all Board meetings are circulated to directors and approved by the Board at the subsequent meeting. Resolutions are first put to the Board in draft form (as a "Board Paper") and, once passed, are recorded in a Resolutions Register. ATSICHS Mackay Ltd produces an annual report which is available to all stakeholders through its website.

<u>PRINCIPLE 6: RESPECT THE RIGHTS OF SHAREHOLDERS</u> (MEMBERS)

ATSICHS Mackay Ltd provides its members with timely access to information about its activities and changes in legislation that may affect its operation. Its four principal communication channels with members are its quarterly published newsletter, annual report, feedback forms and surveys (available in the reception area) and its website, www.atsichs.org.au

PRINCIPLE 7: RECOGNISE AND MANAGE RISK

ATSICHS Mackay Ltd has a risk management framework, risk policy and risk management program. The principal objectives of the risk management program are to protect the reputation and financial standing of ATSICHS Mackay Ltd and its membership and to optimize service to members. The Board is provided with regular reports on risk through the EM's report. In addition, the Board discusses strategic and major operational risks as part of its regular meeting agenda.

ATSICHS Mackay Ltd risk management framework provides a system of internal controls to minimise risk of fraud and corruption, which includes:

- 1. Regular internal audits
- 2. Web-based compliance training
- 3. Annual quality accreditation audits, as part of the accreditation framework

Risk management and anti-corruption practices are governed by the human resources policy, which prohibits conflicts of interest and requires all employees and volunteers to ensure that behaviour is compliant with all laws and regulations relevant to the legal jurisdictions in which ATSICHS Mackay Ltd operates. All employees are encouraged to report any breaches of the policy and are assessed on their adherence as a part of their performance reviews.

The internal audit function has established and implemented a system for identifying, assessing, monitoring and managing material risks throughout ATSICHS Mackay Ltd and is independent of the external auditor. This is monitored and coordinated by the Quality Coordinator (QC), who is an employee of ATSICHS Mackay Ltd. The strategic risk profile, including identification and treatment of risks and mitigating controls, is regularly reviewed and approved by the Board.

The QC and senior management continuously monitor the risk profile and report any risks to the Board. Operational risk management is implemented through:

- · Regular meetings of senior management
- Internal team meetings
- · Annual overview and forward strategic planning meetings (Board)

ATSICHS Mackay Ltd has a Strategic Plan prepared on a three-yearly rolling basis. Operational action plans and budgets are prepared annually and approved by relevant funding bodies and changes to those plans during each financial year may be made as required. In accordance with the main funding body requirements, ATSICHS Mackay Ltd reports on its performance every six months.

The separation of powers has been incorporated in ATSICHS Mackay Ltd constitution and sets out clearly the delineation of the roles of ATSICHS Mackay Ltd Board and employees. ATSICHS Mackay Ltd has policies covering all operational aspects and is subject to accreditation under quality standards including ISO 9001, AGPAL and NSQHS.

PRINCIPLE 8: REMUNERATE FAIRLY AND RESPONSIBLY

Directors

Directors do not receive remuneration benefits.

Management

The Board approves the salary bands for management and increases in accordance with relevant awards. The Board has the responsibility to approve the terms of the Executive Manager's appointment. The Executive Manager considers other management remuneration. All employee contracts are regulated by relevant human resource awards and legislation and are subject to funding.



2020 CHAIRPERSONS REPORT



By Janice Binsiar

I acknowledge the Traditional Owners of this land where I work and live and pay my respects to Elders past present and future. It is with a heavy heart that I do this report as I also want to acknowledge and pay my respects to one of our directors, Mary Pitt, who has passed this year. The support and knowledge she brought to the board, the health centre as well as her contribution within the community will not be forgotten.

As the current Chairperson it is an honour and pleasure to present to members and relevant bodies of the Aboriginal and Torres Strait Islander Community Health Service Mackay annual report.

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

THE BOARD MEMBERS:

Chairperson: Janice Binsiar

Deputy Chairperson: MerleBarba

Secretary: Patricia Wright

Treasurer: Andrew Ramsamy

Director: Mary Pitt

Director: Sonetta Fewquandie

Director: Linda Smith
Director: Adam Doull

Background:

The Aboriginal and Torres Strait Islander Community Health Service (ATSICHS) Mackay was incorporated on the 2nd Noveber1978 and started 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. We have been successfully delivering 42 years of culturally appropriate primary medical health services to our indigenous community and the wider communities.

Staff:

ATSICHS Mackay has numerous indigenous and non-indigenous staff who are managed by our experienced executive manager Mrs Valerie Pilcher and her competent senior management team. With combined efforts our dedicated staff ensures essential services continue to be delivered to our communities. We are committed to the improvement of people's general health and the ongoing well-being for everyone.

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 aim to 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:

Some of the clinical services offered at ATSICHS Mackay by the multi disciplinary team of Indigenous workers, registered nurses and general practitioners are:

- Aged care assessment
- Adult/child health checks
- Dental service
- General primary health care consultation
- Hearing health screening
- Vaccination: children & travel
- Bulk billing
- Health Education and promotional programs

Due to corona virus some of the programs had been cancelled, however we continued to provide essential services to our clients within the community. 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, and not forgetting all our staff, thank you.



EXECUTIVE MANAGER REPORT



Valerie Pilcher - Executive Manager

First and foremost, I would like to acknowledge the traditional owners 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 our long serving Director, Mrs. Mary Pitt who has served our community for many years. I also would like to acknowledge the dedicated and hardworking staff employed at ATSICHS Mackay Ltd who continue to be committed to provide 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 ancillary services to the community which include a GP service, Social Emotional and Wellbeing service with qualified counsellors, Mental Health, Psychology, Paediatrician, Podiatrist, Dietician, Diabetes Educator, Deadly Choices, Chronic Disease which offers exercise physiology, Integrated Team Care, Child and Maternal Mental Health services and programs, AODS, and healthy lifestyle programs. During the COVID 19, ATSICHS has continued to provide face to face GP consultations along with having available more 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. Although since the COVID 19, the Men's Program and the Women's Group has been suspended until further notice.

ATSICHS has had a good retention of staff during the last 12 months. In the ATSICHS clinic we have 5 GP's, Dr Virja Panday (Senior Medical O ffi cer), Dr Therese Sheedy, Dr Ljiljana Banic, Dr Sanjida Akhter (Registrar), Dr Alex McLaren, nurses, health practitioners, health workers and administration staff. Our SEWB Unit is home to our counsellors, alcohol and drugs counsellors, suicide prevention trainee, male mental health trainee, sexual 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), Latoya Latimer (Coordinator) and their team of Program Officers of David Cummins, Jia Quakawoot, Sharna Motlap and Mika Nant.

ATSICHS Mackay Ltd has an off site office situated at 45 Victoria Street, which supports our Deadly Choices Team, our Administration team. Our Social Emotional and Wellbeing Unit is located at 10 Carlyle Street and the Pioneer Murri Court Elders is located at 9 River Street.

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

Our Social Emotional and Wellbeing Unit which supports our SEWB Team, AODS, Mental Health Unit, Sexual health and the United Women's Cultural Group is now situated at 10 Carlyle Street. ATSICHS Mackay was successful in obtaining funding from the Primary Health Network North Queensland for the Child and Maternal Mental Health Program for a further 12 months. ATSICHS has been successful in obtaining some funding to build a Child and Maternal Health room which can be located towards the back of the Joan Seden building. ATSICHS was also fortunate enough to have a company called Canstruct International to donate a medical shipping container which is set up as an isolation/fever room.

On behalf of ATSICHS I would like to acknowledge and thank the following agencies for the support and contributions they provided to our success in the 2019/2020 year.

- Department of Health (DoH)
- Department of Prime Minister and Cabinet (PM&C)
- Queensland Aboriginal and Islander Health Council (QAIHC)
- National Aboriginal Community Controlled Health Organisation (NACCHO)
- Northern Aboriginal & Torres Strait Islander Health Alliance (NATSIHA)
- Institute for Urban Indigenous Health (IUIH)
- Department of Justice and Attorney General (DJAG)
- Headspace Mackay
- Primary Health Network Northern Queensland (PHN)
- James Cook University (JCU)
- Mackay Health and Hospital Service
- Queensland Health
- Yuibera Aboriginal Corporation
- Wiri Community Limited
- Yuwibara Aboriginal Corporation
- MARABISDA
- Mudth Niyleta Aboriginal Corporation
- Girudala Aboriginal Corporation
- Lives Lived Well
- SP CAP (Suicide Prevention Community Action Plan)
- Mackay Regional Mental Health Network
- NAPHL

ATSICHS has applied to be a National Disability Insurance Scheme, Service Provider and currently waiting to hear back from the Commission on our application. ATSICHS Mackay has continued to maintain successful accreditation of Australian General Practice Accreditation Limited (AGPAL), the International Standards 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 Primary Health Care Manager

What a year it has been for 2019/20. The last 6months prior to the COVID 19 Pandemic ATSICHS Mackay continued to deliver services through our programs and clinical services.

Our NAIDOC celebration was held in July and as usual we celebrated with the community in holding NAIDOC activities and events. ATSICHS Mackay proudly received the trophy for NAIDOC 2019 Best Group. After the NAIDOC celebrations it was then back to business in preparing for our BSI Audit. Thank you

to our Quality Co-ordinator Nadine Bellear as always does an amazing job every year in preparing staff for the Audit.

Again, we welcome back the James Cook University Cultural Workshop. This was held at the Yuwi Yumba Cultural Hub. It was great to catch up with Neil Henry (Cultural Educator - JCU GP Training) and his colleagues and to meet the new GP Registrars.

I would like to thank Dr Virja Panday and our Chronic Disease Team Leader - Selbena Mallie and the late Aunty Mary Pitt for sitting on the panel. I would like to acknowledge the late Aunty Mary Pitt for her dedication and contribution over the years in attending the workshops sharing her vast cultural knowledge, she will be sadly missed.

Regarding staff performance Senior Management had met with individual staff to review their current roles. The outcomes of these discussions were exchange of roles and aligning staff in areas that we feel they can contribute more in relation to their skill set and knowledge.

ATSICHS Mackay welcomed the Breast Screen Queensland van back again for 2019. Over the four days we had a total of 70 ladies screened. I would like to acknowledge our Chronic Disease Team - Selbena and Mona for working alongside Breast Screen Queensland in coordinating this yearly event. The ladies that attended were given an incentive a Deadly Choice Shirt and light refreshments were provided while waiting for their appointment.

During the year of 2020 ATSICHS Mackay farewelled the following staff:

- Dr Mahadeva Prasad
- Dr Jan Hanson
- Delton Clark Sexual Health Worker
- Pratiksha Gopal Maternal and Child Social Worker
- Paul Pitt Trainee Male Mental Health Worker
- Rebecca McColm SEWBU Social Worker
- Dean Turner Male Health Practitioner
- Sari Fisher Senior Medical Receptionist

It was sad to see their departure, however ATSICHS Mackay would like to acknowledge their dedication and commitment to the organisation and wish them all the best.

We welcome our new staff members GP Registrar - Dr Alex McLaren, Sexual Health Worker - Ms Latoya Craigie and NDIS Support Co-ordinator – Ms Paula Watts.

In the month of March 2020, we had seen the impact of the Corona Virus / Covid 19 Pandemic within our own community. ATSICHS Mackay being identified as an essential service continue to provide service to the community. However, we had to take the necessary precautions for the safety of the community and our staff. All ATSICHS programs, activities and events were postpone until further notice. Our Men's and Women's group were the most vulnerable with many of the participants over the age of 50 with a chronic disease.

Strict procedures were put in place such as:

- Front Entrance Screening of all patients, visitors, contract workers and suppliers entering the main building
- ATSICHS Staff advised if they were unwell and had flu like symptoms not to attend work and follow Covid 19 triage process
- Only essential staff attended work
- All home visits cancelled unless emergency
- Transporting of patients only buses were used and limited number of patients.
- Patients screened over the phone prior to booking a face to face appointment
- Telehealth consultations with the Doctors

To accommodate for potential cases an isolation room was set up in our Chronic Disease Area. This area was completely sealed of and only rostered staff (GP, Registered Nurse) entered this area. In the general clinic area, all staff were required to wear a mask and limited access to other staff. Our waiting area had been set up due to the social distancing requirements and limited the number of seats. There was a lot of education and promotion through our ATSICHS Face book page, flyers distributed throughout the organisation and a radio interview with both our Executive Manager Valerie Pilcher, and Senior Medical Officer Dr Virja Panday. With any Pandemic infection control is so important ensuring we have taken the necessary measures in containing the virus, not only within the workplace but also within the home environment.

Clinic

The clinic team continues to strive and ensure the health needs of the community are met by providing continuity of care. I commend and acknowledge the commitment and dedication of our clinical team. The clinical team all play a pivotal role within the organisation. Amid the Covid 19 Pandemic I would like to acknowledge both Dr Virja Panday in taking the lead in implementing the ATSICHS pandemic plan with the assistance of Dr Therese Sheedy.

The Doctors, Nursing staff and Health Workers continue to work closely in reviewing our clinical processes whether it be improving the flow of the clinical screening, triage process and recalls system. The last few weeks there has been some infrastructure happening on site with the new Maternal and Child health room being built, door installed in the clinic corridor between the main clinic and Chronic disease area and built in cupboards in the back area near the ambulance area.

A special thank you to Jodi Stockham for overseeing the infrastructure and ensuring that medical standards were met.

We have currently opened our books in accepting new clients, the process will continue to stay the same with all new patient forms being approved by Primary Health Care Manager prior to patient booking an appointment.

Within the last few months there has been restructuring of positions within the organisation. The following positions were advertised internally, and the successful applicants were:

- •Clinical Supervisor Tekee Malcolm (Registered Nurse)
- •Clinic Administration Officer Veronica Bayles (Health Practitioner)

The previous clinic team leader role no longer exists. The purpose in implementing these new roles was to share the workload and responsibility amongst staff.

Internal and Debriefing meetings are held regularly within the various clinical departments, from these meetings the information is provided back to Senior Management for further actions if required.

Our current clinical team consist of the following staff:

3 x General Practitioners: Dr Virja Panday (Senior Medical Officer)

Dr Ljiljana Banic Dr Therese Sheedy

2 x GP Registrar: Dr Sanjida Akhter

Dr Alex McClaren

3 x Registered Nurses: Tekee Malcolm (Clinical Supervisor)

Teiraen Toarei (Senior Registered Nurse) Kayla Donovan (Registered Nurse)

5 x Health Practitioners: Ruth Mallie (Outreach Team Leader)

Seba Bourne (Maternal & Child Health) Thelma Fry (ITC Outreach Worker) Latoya Craigie (Sexual Health Worker)

Leanne Bellamy (Outreach)

4 x Health Workers: Selbena Mallie (Chronic Disease)

Brancis Taylor (Chronic Disease) Sari Jeffcoat (Maternal & Child Health)

Renae Mitchell (Outreach)

2 x Trainee Health Workers: Palai Mabo

Nikkita Bayles

1 x Clinic Administration Officer/ Health Worker: Veronica Bayles

2 x Receptionist: Tamar Baggow

Sarah Brown

1 x Trainee Receptionist: Rakaiya Fallon

Aboriginal and Torres Strait Islander Health Practitioners / Health Workers

The Health Practitioners / Health Workers whether it be screening the patient when they present to clinic, going on home visits / transporting patients to their specialist appointments, follow up recalls our Health Practitioners / Health workers are dedicated to their roles and responsibilities.

This was evident during the Covid 19 Pandemic our Health Practitioner / Health workers were classed as essential workers and continue to provide a service to our indigenous community. I would like to congratulate Sari Jeffcoat in completing her Certificate III in Primary Health Care. Our other Trainees are in the process in completing their modules. Prior to Covid 19 staff attended training relevant to their roles this included both internal and external training.

A weekly roster is distributed at the start of each week to maintain efficiency within the clinic and being able to delegate staff within the roles that is aligned to their skill set.

Chronic Disease Team

The Chronic Disease Team continues to provide and implement programs and activities aimed at reducing the lifestyle risk factors for our indigenous community. Over the last twelve months prior to Covid 19 all programs and activities coordinated by the Chronic Disease Team were up and running with good attendance by the community.

The following programs and activities included:

- Bingo Betes
- Pink Ribbon
- Breast Screen Queensland
- Biggest Morning Tea
- Walking Group
- Water Aerobics

With the Covid 19 Pandemic unfortunately the programs and activities were put on hold until further notice. When Covid 19 was declared a pandemic ATSICHS emergency response was to designate an area onsite for patients that presented to the service with flu like symptoms. Due to limited space it was decided that the Chronic Disease area was to be closed off and became the Respiratory Clinic. The Chronic Disease Team relocated and move to the general clinical area.

The Allied Health team continued providing a service. Dietitian and Diabetes Educator was done via telehealth. Podiatrist appointments patients were referred to Pioneer Podiatry. Our Visiting Endocrinologist – Dr Sangla consultations were done via telehealth.

Our Allied Health Team are integral part of ATSICHS Mackay health care team.

Our Chronic Disease Team – Selbena Mallie and Mona Taylor do an amazing job in managing and overseeing the Chronic Disease area. The team works collaboratively with the Doctors, Allied Health Professionals, and both the Nursing and Health Worker Team in assisting with effective co-ordination of screening, performing health checks, home visits and patient health care planning.

The Allied Health Team consist of the following Allied Health Professionals:

- Dietitian Sherine Elias
- Diabetes Educator Jacqueline Holster
- Podiatrist Pioneer Podiatry Rachael Sheedy
- Pharmacist Annesa Davies
- Visiting Endocrinologist Dr Sangla
- Ideas Van
- Active Physio
- Pediatrician Dr Peter Roddenby

Outreach Team

Our Outreach Team is supervised by Health Practitioner - Ruth Mallie.

The team continues to provide a culturally appropriate service to the community always providing a high quality of care, when working with the patients whether it be attending home visits, distributing medications, attending follow up / or specialist appointments, with the patient.

The team works closely in collaboration with other indigenous and non-indigenous organisations in providing a holistic approach ensuring the patient health needs are met. We welcome Health Practitioner – Thelma Fry to the team. Thelma has now stepped into the role as the Care Coordination and Supplementary Services Co-Ordinator.

Thelma is also a part of the Outreach team, contributing to improving better health outcomes for Aboriginal and Torres Strait Islander people with a chronic health condition though better access to coordinated and multidisciplinary care.

NDIS - National Disability Insurance Scheme - Support Co-Ordinator

Since starting in the role as the NDIS Support Co-Ordinator – Paula Watts has been working closely with health practice staff (GP's , Nursing Team , Allied Health, Health Practitioners & Health Workers ,Social and Emotional Wellbeing Team , Outreach) in delivering a high quality NDIS service to our indigenous community. I must commend Paula on the great job she is doing ensuring our NDIS patients are having access and equity to the appropriate services. ATSICHS Mackay is currenty in the process of becoming a registered NDIS Provider.

Maternal and Child Health Team

Maternal and Child Health continues to provide the following programs: immunisation, hearing health screening, outreach services for our antenatal mum's and bub's.

Last year NAIDOC celebrations the team held a Kids Fun Day at the Jubilee Park near Mackay City Council. The day included information stalls and a lot of fun activities for the kids with lunch provided.

The hearing health school screening program is still ongoing with the local schools. In the last twelve months a total of twenty-one schools have been screened.

At the start of the year Maternal and Child Health met with Australian Hearing Services Senior Community Engagement Officer – Selma Kumsing to discuss the HAP -EE (Hearing Assessment Program – Early Ears) Program.

The objective of the program is to improve ear and hearing health of Aboriginal and Torres Strait Islander children by:

- Providing diagnostic hearing assessments and recommendations for follow up treatment for children in the years prior to primary school
- Contributing to strengthening ear health surveillance in primary health care services
- Increasing community awareness about the importance of ear and hearing health

Australian Hearing Services will provide an Audiologist to work onsite every 3 months at ATSICHS Mackay to perform the diagnostic testing. With the current situation with the Covid 19 Pandemic we had to put the program on hold. In the future we are looking forward working with Australian Hearing Services and being able to provide the hearing assessment program to our indigenous community.

Registered Nursing Team

The nursing team plays a key role in providing a high standard of quality of nursing care through efficient, effective, safe and timely service to the patients.

Their vast clinical knowledge and skills are shared with the Health Practitioners and Health Workers through inhouse training sessions and one on one learning.

The Nursing team also co-ordinates patient care through networking with other service providers, planning and managing of care, providing information and feedback between services, patient and General Practitioners.

Our nurses work closely with our Quality Co-ordinator Nadine Bellear demonstrating commitment to quality improvement, risk management and the accreditation process.

Men's Group

I would like to acknowledge Men's Group Co-Ordinator - Paul Pitt and Albert Lingwoodock for the great work they have been doing with our Men's Group. The participants who attend the group come from very diff erent backgrounds and walks of life. In attending the group, they felt at ease as well as a sense of belonging.

Activities are focused around building self-esteem, socializing with other men in the community and being able to participate in activities and feel comfortable in attending the education sessions. Although the program was placed on hold due to Covid 19 both Paul and Butch continue to keep in contact with the Men attending home visits and distributing emergency and activity packs as well as checking on their wellbeing during this time of isolation.

Over the last few months, the activities included:

- Fishing
- Barbecue outings
- Painting / Wall Hangings

Information sessions:

- AODS Alcohol and Other Drugs
- Deadly Choice Team Healthy Eating/ Exercise
- Sexual Health
- Suicide Prevention
- Queensland Health

United Women's Group

Every Monday morning the ladies look forward to their weekly gathering, being able to catch up and have a chat. For some of our ladies this may be the only time they get to sit with other ladies over a cuppa whilst doing their craft activities. We are very privilege to have as an organisation the wealth of cultural knowledge and life experiences in the one place at the one time. Every participant attending the group has an amazing story to tell whether they be indigenous or non-indigenous.

The group as mention before having always been self-sufficient in raising monies that goes towards attending events through out the year and end of year celebrations. With the Covid 19 Pandemic the ladies came under the high-risk category, therefore as a precaution and duty of care ATSCIHS Mackay had to postpone the group until further notice. The last few months have been very difficult for the ladies are not able to meet on a regularly basis. Home visits and telephone calls are made regularly by staff to maintain the ongoing contact with each participant and most importantly checking on their wellbeing during these trying times.

A special thank you to Aunty Lesly Sabbo and the late Aunty Mary Pitt for the tremendous work they have done over the years in coordinating the group.



OVERVIEW OF THE FINANCE DEPARTMENT By Maria Tyler



The Finance Team of ATSICHS Mackay Ltd is committed to the effective and efficient management of financial operations in order to ensure the future economic sustainability of the organisation. It is our responsibility to ensure compliance with relevant legislative requirements (such as Corporations Act 2001) and reporting in accordance with Australian Accounting principles, in addition to the specific principles outlined in all Funding Agreements with the organisation. To maintain financial data integrity, the department observes specific internal procedures, which are documented in the organisation's Finance Policy and Procedure Manual (part of our Quality Management System). This includes:

- 1. Use of specialised accounting software to record transactions and produce reports;
- 2. Use of sequentially numbered business forms to provide an audit trail;
- 3. Built in validation checks for processes to ensure correctness (such as bank reconciliations);
- 4. Having a hierarchy of spending level approval authority;
- 5. Regular budget and cash flow projection and evaluation reports for Senior Management and the Board of Directors;
- 6. Separation of duties performed by all staff; and
- 7. Maintaining books and records up-to-date, balanced and externally audited.

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.

Detailed Financial Analysis

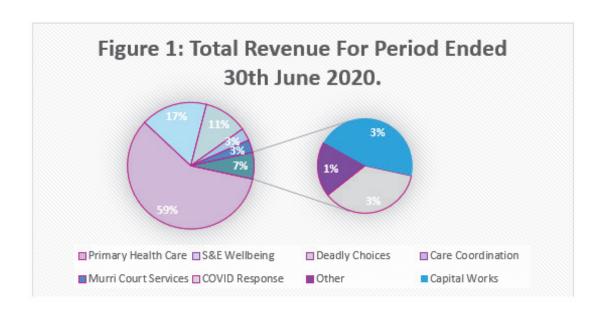
The financial statement illustrates the key areas from which ATSICHS Mackay Ltd generates revenue and incurs expenses. The Profit & Loss Statement summarises the revenues, costs and expenses incurred during the financial year. For the financial year ending 30th June 2020 reflected a strong operating performance across the organisation delivering an operating surplus of \$87,372. This was underpinned by increases in grant funding and Medicare income.

Revenue

All revenue discussed in this financial report excludes goods and services tax (GST). 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. All major activities are funded by the Federal and State Governments, including the Department of Health (DOH), Institute for Urban Indigenous Health (IUIH), Northern Aboriginal & Torres Strait Islander Health Alliance, Mackay Community Foundation, Northern Queensland Primary Health Care Network Department of Prime Minister & Cabinet – now known as National Indigenous Australians Agency (NIAA), Department of Justice and Attorney General, Department of Aboriginal & Torres Strait Islander Partnerships and Quality Use of Medicines Maximised for Aboriginal & Torres Strait Islander People (Qumax). Additional income is received from self-generated Medicare funds, and a number of other smaller revenue streams. Revenue is illustrated graphically in Figure 1 below.

Total revenue increased by \$1,072,791 or 18.22% for financial year ended 30th June 2020. Total revenue for period ended 30th June 2020 was \$6,960,521 in contrast to \$5,887,730 for the previous financial year. The increase in revenue was primarily due was a result of the following:

- Increase in allocation of Department of Justice & Attorney General and Northern Queensland Primary Health Network;
- New funding received from National Aboriginal Community Controlled Health
 Organisation (NACCHO), Queensland Aboriginal & Islander Health Council (QAHIC),
 James Cook University, Boosting the Local Care Workforce, Northern Queensland
 Primary Health Network, Mackay Community Foundation and Gambling Community
 Benefit Fund; and
- Increase in Self-Generated income Medicare billings.



The main revenue stream for ATSICHS Mackay Ltd is through grant funding from DOH. A total of \$3,285,322 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; and
- · chronic disease program.

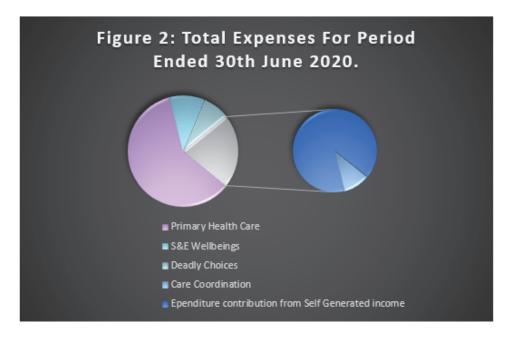
ATSICHS Mackay Ltd also offers other programs and activities other than those listed above. For more information about these, please refer to the Primary Health Care Manager's report.

Expenditure

Total Expenditure for the financial year ended 30th June 2020 was \$6,873,149 compared to \$5,961,379 in the 2019 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:

- 1. An increase in client support activities by 22%. In 2020 financial year, total cost was \$152,092 compared to \$118,684 in previous financial year;
- A 11% increase in costs associated with wages. In 2020 financial year, total cost of wages plus superannuation contribution was \$5,023,693 whist in the 2019 financial year it was \$4,518,497;
- 3. A 24% increase in costs associated with rental expenses. For financial year ended 30th June 2020 the total cost of rent was \$121,056. This contrasts with \$92,466 incurred in the previous financial year. This increase is primary a result of ATSICHS Mackay Ltd entering into a new lease agreement for premises located at 10 Carlyle Street, Mackay, Queensland 4740, in line with new grant funding received;
- 4. Motor vehicle expenses increased to \$221,445 in 2020 financial year in comparison to \$189,155. This is an increase of 14.58% and is a direct result of grant funding increasing the requirement for extra vehicles to be available for programs and activities and an increase in the price of renewal leases for existing motor vehicles.
- A 113% increase in computer expenses. A total of \$161,557 was spent in 2020 financial year in comparison to 2019 financial year, where \$76,106 was spent. The increase in this category of expense is a direct result of COVID-19 where we had to upgrade clinic computer and telephone systems to adapt to a COVID-19 safe environment. Our new phone system now connects all four premises under one umbrella system using extensions (rather than having previous separate landline systems and not being able to transfer client calls through to different premises). Grant funding predominantly covered this expenditure.

Figure 2 below graphically illustrates the areas in which ATSICHS Mackay Ltd incurred expenses in the 2020 financial year. The majority of expense is incurred in the running of the clinic, followed by the operational costs of running social emotional well-being programs.



Net Operating Profit

As revenue received was greater than expenses incurred, the organisation had a net profit of \$87,372 for financial year ended 30th June 2020 (in comparison to a loss of \$73,649 for the previous year ended 30th June 2019).

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 2020 financial year (FY). The overall current assets increased from \$1,798,509 in 2019 to \$1,822,761 in 2020. There was a slight decrease in current liabilities, from \$625,642 in 2019 FY to \$576,829 in the 2020 FY. The current liability predominantly comprised of employee leave entitlements and Good & Services Tax (GST) payable. The largest asset on the balance sheet represents the organisation's clinic at 31-33 Victoria Street. Overall, net assets increased in the 2020FY to \$3,015,897 (from \$2,670,916 in the 2019 FY).

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 in order to reflect a more close approximation to their realistic "worth". For the financial year ended 30th June 2020, this reserve increased in value by \$257,609 due to an updated valuation of organisational assets. 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 2020, the retained profits increased by \$87,372 (the profit from 2020 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 decreased by \$53,575, due to payments to suppliers and employees. The organisation also spent cash on improvements to the clinic (capital works) and purchase of managed investments for higher long term yields (\$670,519). You can see these investments reflected in the increase in assets on the Balance Sheet (discussed above). The organisation did not rely on any external loans, so there was no cash generated from financing activities. Therefore, cash and cash equivalents at the end of the 2020 financial year was \$948,313 in comparison to \$1,672,407 in the 2019 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.

Liquidity, Solvency and Gearing

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 the purpose of 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 2020 FY, the current ratio of ATSICHS Mackay Ltd was 3.16. This indicates that for every \$1 of short-term debt, ATSICHS Mackay Ltd had \$3.16 in current assets with which to pay it. This is deemed to be good liquidity.

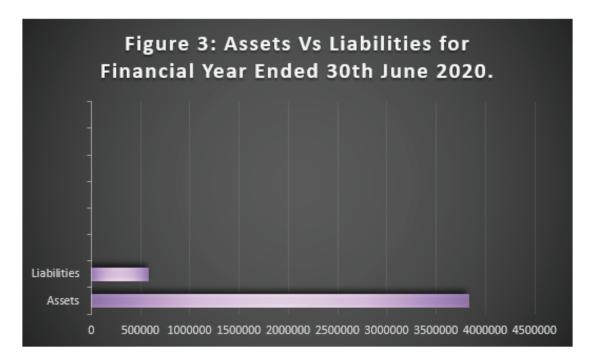
An organisation's assets are usually funded by a combination of debt and equity financing. Debt financing can include long-term loan borrowings, and equity funding is the amount that the business owners have contributed. In the case of ATSICHS Mackay Ltd, the equity funding

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 considered to be. 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 2020, ATSICHS Mackay Ltd had a debt ratio of 0.21. This means that 21% of the organisation's assets are funded through external obligations (predominantly, employee expenses and supplier credit), with the remainder (79%) 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. Figure 4 illustrates the asset versus liability composition of ATSICHS Mackay Ltd.

These two ratios indicate that ATSICHS Mackay Ltd is solvent as at 30th June 2020.



Forecast for the Financial Year ahead

It is expected that the operations of ATSICHS Mackay Ltd will break even in the 2021 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 30thJune 2020.

SENIOR MEDICAL OFFICER REPORT



By Dr Virja Panday

As Senior Medical Officer, I provide this report which relates to clinical services. I acknowledge the recent passing of Mrs Mary Pitt, a respected community Elder and BOD member. I was privileged to work with Mrs Pitt in her role as a cultural mentor for doctors in training.

In terms of clinical services, we have had changes in GP staffing. Our service delivery model had to adjust for the Covid19 pandemic crisis and concern for local breakouts. Delivery of services has been sustained while remaining vigilant of possible Covid19 infections. Until an effective vaccination becomes available, this infection remains a

serious risk to the community. The health service will continue monitoring the pandemic and necessary actions needed. It will review it's model of care so that essential services can safely continue. I acknowledge all staff for their teamwork and especially the Executive manager, Mrs Valerie Pilcher for her leadership during this crisis.

CLINICAL SERVICES SUMMARY

GP STAFFING (Total Full Time Equivalent of 4.28 GPs)

Virja Panday (SMO/GP) Ljiljana Banic (GP) Therese Sheedy (GP) Sanjida Akhtar (GP Registrar) Alex McLaren (GP)

Staff movements:

Dr Jan Hanson and Dr Prasad ceased employment in November and December 2019 respectively after several years of valued service. Both have moved interstate due to family commitments. Dr Alex McLaren joined the health service on 10th February 2020.

Future staffing:

The health service continues to work towards increasing GP services in order to expand access for the community.

Team performance:

The GP team works effectively together and across the organisation. The team is highly motivated and committed to a comprehensive community and primary health care model. Team communications and quality improvements occur through the health services meetings and organisations processes. The GP team has resumed in house educational training to keep the team up to date with current practice. Quality and safety of care meets expected standards as assessed through audit processes.

Clinics:

- · General clinics run from Monday to Friday.
- Saturday clinics were on alternating weeks but have been temporarily stopped since Covid19
 pandemic (related to staffing). Dr Roddenby as Paediatrician usually consulted monthly.
- Dr Sangla as visiting endocrinologist consults 3-6 monthly now by telemedicine due to Covid19 limitations.
- The GP team also works closely with Mackay Base Hospital outpatient specialist services and with some telehealth consultations to access specialist services.
- Dietitian Ms Sherine Elias and Diabetes Educator Ms Jacqui Holster continue with allied health services.
- · Pioneer Podiatry continues their services but this is now at their consulting rooms.
- · Ms Aneesa Davis has continued as contracted medication review pharmacist.
- ATSICHS IT team have supported and enabled the GP team to perform telemedicine which has been a significant change in our model of care.

Attendances:

Generally attendances are much improved. Telemedicine seems to have also promoted patient willingness to engage in consultations. This may also be the result of reception team actively managing appointment book and confirmations. Service data is available through the management.

Patient Population:

The active population of patients has been relatively stable with a slight increase in new clients. Due to current health service GP capacity, the health service is not actively promoting an increase in it's new clients. The procedures for new clients is by application and approval by the Primary Health Care Manager taking into account ability of GP team to be able to provide services long term.

The health service continues to see a wide range of patients including: a large population of complex chronic disease patients especially diabetes, mental health patients, palliative care patients, aged population, home based and residential aged care patients, infectious diseases, patients with skin cancers, children with developmental disorders with increasing diagnosis of Autism Spectrum disorder and ADHD, significant social factors (alcohol and drug abuse, domestic violence, schooling issues, youth with suicide risk, legal capacity issues, disability and impairment, unemployment, housing issues). This list is not comprehensive but just provided to give an idea of the range of complexity in consultations. GPs have to liaise with many providers in order to progress the care of patients. Unfortunately, this does not reflect in the appointment book which only has the appointment time when the patient is physically seen. GPs are attentive to legitimately billing for Medicare related services in order to support this community service model of care.

Clinical service delivery continues to be GP services linked to a community based model with a team of staff supporting the care of individuals, families and the community.

COVID 19 Pandemic:

The world has experienced probably it's first true pandemic with Covid19 infections first diagnosed in China and spreading worldwide within a few months. It has resulted in countries and governments making strategic decisions to limit spread which has stalled economies and

reduced services in general. There has been a significant mortality rate and the highest risk groups are the aged and those with chronic medical conditions. Australia's Indigenous population is considered to be in a high risk group.

The health service has worked hard at preparing for this pandemic. This is reflected in policies and procedures developed since March this year.

The pandemic and knowledge about this new virus continues to evolve. The health service remains vigilant in order to respond appropriately. While this is a strong focus it has been important to resume essential clinical care of patients which would otherwise negatively impact the health outcomes of the community.

Summary:

Clinical service delivery is being sustained with a high standard of care.

Covid19 pandemic remains a threat to the community and is a concern for health service delivery. The health service continues to prepare for and respond to local cases if they occur. As a team, the health service continues to work together to effectively deliver primary health care services.



MANAGEMENT OF HUMAN RESOURCES



By Amanda Prewett MAHRI

Our Approach:

Welcome to the new look 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:

For period ending 30th June 2020, we have employed 9 new staff members. Changes to the Organisational Chart have seen some structural rearrangements occurr. The Social and Emotional Wellbeing unit has been restructured to incorporate a SEWBU Manager. Our Social Worker for the Child and Maternal Health Unit left to relocate. The Clinic Team leader position has been nullified and replaced internally with the new Clinic Administration Officer. Also appointed internally within the clinic setting is a Clinic Supervisor. We have two new Deadly Choices Officers that filled the positions of departing staff. The Murri Court Coordinator has a new assistant. A new position of NDIS Support Coordinator was created and filled. Dr Hanson and Dr Prasad left to relocate, and we have one new full time Male Doctor and one full time GP Registrar. ATSICHS welcomes all new staff members to our team.

Employee Turnover:

Employee turnover refers to the number of employees that have departed from our organisation, in last financial year. 16 of the employees departed from the organisation in last financial year. Staff departed from our organisation due to relocation, pursuing other career paths and full-time studies. We hired 10 replacement staff.

The Dashboard reflects employ movements to 30th June 2020 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 61 current employees,

three positions are in the new financial year and will be reflected in the next Annual Report.

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 five trainees: four in Primary Health and one in Mental Health.



HUMAN RESOURCES NEWS

New Blue Card Laws

There are important changes with 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.
- CRN and TMR (Department of Transport) Photo Required I.E. Driver's License.
- Increase in Fees.
- Restricted person and restricted employment.

Speak to Blue Card direct 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

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 forflexibleworkingarrangements – 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 months 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.
- 5 days unpaid 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 – a transitional entitlement for employees as outlined in an applicable premodernised award, pending the development of a uniform national long service leave standard.

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 2020

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



QUALITY, GOVERNANCE AND RISK_



By Nadine Bellear

ATSICHS Mackay is the representative of the Aboriginal and Torres Strait Islander community of the Local Government Areas on matters relating to Aboriginal and Torres Strait Islander health. It is vital to our organisation; we meet the required international and national health care standards as part of our commitment to the community. This is completed by ensuring we achieve and deliver the highest level of holistic health care. Maintaining certification of quality management systems are imperative to our service delivery of primary health care.

We can achieve this by meeting our quality objectives derived from our quality policy. Having clear goals and aims are how we address and build on quality improvements throughout our systems, govern but not limited by our software system LOGIC.

Our key Quality, Governance and Risk service areas are:

Clinical Safety and Quality:

- Primary Quality Health Care:
 - -Patient-focused care
 - -Stakeholder involvement of health and wellbeing model of service
 - -Clinical Systems effectiveness
 - -Patient Feedback
 - -Patient Safety
- Workplace Safety
- · Audit Risk and Compliance

1. Primary Quality Health Care

Successes:

The Quality Review Committee developed and increased patient feedback data which includes patient activities and events, patient care and patient experiences. This data is for planning, assurance and improvement purposes.

Outputs included:

Due to the COVID19 Pandemic, the risk for these measures has been rated as a very high risk for the community. All patient activities and events, patient care and patient experiences will be scheduled for a later date; measured by the nature of the pandemic as per the decision of the COVID team and management.

- Strengthening our clinical pathways governance, reporting and monitoring processes
- Strengthening the implementation of the Clinical Governance Framework

Outlook 2020 - 2021:

The Quality Review Committee in conjunction with the Senior Management Team will embed the second edition NSQSH standards, including and recognition and commitment to individual and collective patient safety and quality responsibilities.

This will involve but not limited to:

- amending procedures, as appropriate, to align ATSICHS processes with the second edition of the NSQHS Standards, RACGP, ISO 9001:2015 and NDIS standards
- supporting and strengthening our consent governance and monitoring processes
- supporting and strengthening our clinical pathways governance, reporting and monitoring processes
- supporting and strengthening the implementation of the Clinical Governance Framework

2. Workplace Health and Safety

Successes

The Workplace Health and Safety (WHS) Committee:

- Upskilled our WHS team as per the regulation and the organisations continual commitment to Risk Analysis and Safety across all workplaces.
- Complying with key performance Indicators (embed by regulations and organisations requirements) to strengthen the WHS systems overall
- Reviewed Acts, Regulations and Codes of Practices to ensure compliance with legislation
- Continuously worked in collaboration with internal departments and stakeholders to improve return to work outcomes.

Outlook 2020 - 2021

In 2020-2021 WHS committee will:

- update of the ATSICHS Health Work Health and Safety Management System
- reviewed and updated the risk management policy, framework and guidelines to align risk escalation processes

3. Audit Risk and Compliance

Successes

The Audit team:

- Reviewed and strengthened a robust audit schedule to monitor the organisations QMS
- Reviewed the exiting compliance management processes and systems across the organisation
- Piloted a new reporting system and documentation to support the current robust audit schedule

Outlook 2020 - 2021

In 2020-2021 Audit Team will:

- improve implementation, recording, reporting tools and systems to improve awareness and oversight of active and emerging risks and risk management initiatives
- update the risk awareness, training and mentoring program and implement information sessions as required across the organisation
- review the existing compliance management monitoring processes and systems

- across the organisation
- continue the internal audit program of work and consider opportunities to progress new

4. External Reviews & Accreditation

Accreditation is recognised as an important driver for safety and quality improvement and Australia's health accreditation processes 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 applies to 3 standards: National Safety and Quality Health Services Standards (NSQHS), RACGP Standards and ISO 9001:2015 Quality Management System: Requirements and has been continuously accredited since 2013. ATSICHS is also in the process of registration and accreditation against the National Disability Insurance Scheme (NDIS) standards with the accrediting body and the National Disability Insurance Agency (NDIA).

Through these systems, we can achieve and excel in the deliverance of primary quality health care holistically.

- 2010 Awarded: Quality Improvement and Accreditation certificate awarded from the Qld Aboriginal and islander Health council (QAICHC)
- **2014** Met with Merit award from The Australian Safety and Quality Commission in Healthcare 2012 for The National Standards for Safety and Quality in Healthcare, standard 1.1.2.

ATSICHS Mackay is committed to quality and safety within the organisation for the community.

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

2020 - NDIS status pending.



ATSICHS MACKAY & THE NDIS



By Paula Watts

Introduction:

I would like to commence my report with introducing myself and telling you a little about me.

I have lived in Mackay since 1972 and completed my schooling here. I'm from a small Irish family which is very different from the extended families I meet at ATSICHS; you Mob have it right. My mother had cancer for 10 years of my childhood and passed when I was 14. I believe this is where my passion for supporting people was conceived.

I finished school at Grade 10 and went out to the world undertaking office administration, bar attendant, waitressing and so on. At age 20, I undertook Senior English at TAFE and from there applied to James Cook

University in the Bachelor of Community Welfare Degree. I commenced my studies externally (by correspondence) which was no easy feat back in the days before computers; and continued to work locally. When I was able to choose my elective subjects, my choices were disability and indigenous studies. I graduated in 1998.

In 1994 I was offered a position of Disability Support Worker by a nurse who saw something in me; this was what led me to where I am today. One of my first clients were an adult married couple, both with significant disabilities and whose support relied on the few hours a day the man was allocated by the then State Government. This started me thinking, why can one person with disability get support and not another? This state system was inadequate, unjust and inequitable, which the National Disability Insurance Scheme (NDIS) was introduced in 2013 to resolve. I realised back then that I need to understand the 'rules' of Government systems and supports to be able to advocate with people with disabilities for their best lives, particularly those who are most vulnerable.

From Support Worker until now I have held many positions from Coordinator of a respite service, and a service for people with spinal injuries and physical disabilities, Facilitator of Flexible Family Support Program to my current role of NDIS Support Coordinator. I have been working within the NDIS system since its' introduction to Mackay on November 1, 2016.

Every Australian with disability is now able to apply to be a Participant of the NDIS but is not as easy as it sounds. NDIS is an insurance model and the supports and services allocated to people with disability are apportioned according to the NDIS Act (2013), particularly Section 34 – Reasonable and Necessary. That being the case, Participants need to provide reports and evidence to justify their requested supports and services; which is part of my role, to assist them to provide this evidence.

NDIS is a huge, complex system but I know from experience that with the right supports, it can change the lives of people with disabilities in a profound, positive way.

ATSICHS Mackay and NDIS:

I commenced with ATSICHS Mackay on October 28, 2019 and within this time, have supported the organisation to pass provisional quality audit and be recommended to the NDIS Quality and Safeguards Commission to be a registered NDIS provider. At this time of writing, we continue to wait (not so patiently) for this certification but as with much of life this year, COVID-19 has created challenges for the Commission also, with prioritising the continuity and quality of services to people with disabilities in compromised locations such as Victoria.

I am fortunate to have been welcomed into the professional and skilled team at ATSICHS Mackay. As a long-established Aboriginal and Torres Strait Islander community controlled health organisation, we learn from each other. I see Aboriginal and Torres Strait Islander culture in practice every day and learn the importance of respecting and acknowledging culture, and I am able to offer my knowledge and experience of the NDIS and supports and services for people with disability.

One of my goals is to foster the understanding I have of the NDIS in indigenous people with disabilities, their families/carers, my peers at ATSICHS Mackay and other support networks; With knowledge comes power.

I believe many of the staff of ATSICHS Mackay now have a greater understanding of the NDIS which can only mean we provide increased support to clients who may be eligible and those who are already Participants of NDIS.

It is acknowledged that Indigenous Australians are under-represented as Participants of the NDIS and ATSICHS Mackay has a significant role in addressing this shortfall.

Working in consultation with individuals with disabilities, my peers and other relevant services, we have been successful in assisting some Aboriginal and Torres Strait Islander people to access the NDIS, some of whom have applied numerous times previously. At this stage though, ATSICHS Mackay are not able to open up NDIS services until we are registered which is frustrating.

One of my observations since commencing with ATSICHS Mackay is the point of difference this service can offer – the ability to provide culturally appropriate services. There are service providers in the Mackay community who are ready to refer Participants to ATSICHS Mackay for that reason.

In closing, I would like to acknowledge the Traditional Owners of this land where I work and live, the Yuwi people, and pay my respects to Elders past, present and emerging.

Thank you all for enriching my life.



SOCIAL EMOTIONAL WELLBEING ANNUAL REPORT



Steven Colbran Social Emotional Wellbeing (SEWB) Manager

Steven recently completed a Bachelor of Social Sciences (Psychology) (Honours) from the University of the Sunshine Coast and relocated to Mackay for the opportunity to manage the SEWB Team at ATSICHS. Having previous exposure to indigenous communities and a passion for helping provide social support and help people in their everyday wellbeing there was a desire to relocate to a regional community. Steven has extensive human resources and management practice in various locations and with many cultures in the Asia Pacific region and brings this wealth of knowledge, education and expertise to manage the SEWB team whilst supporting the community.

The opportunity to build and maintain strong relationships

with other organisations, government agencies and key stakeholders is powerful for connecting with and supporting the individuals in the community.

Over the past financial year I have not had much client based tasks. There have been four clients that I have worked with, all aged 50 and over and three of them identify as Aboriginal. The support I provided to these clients was transporting them to appointments within our SEWB unit or to outside services such as Transport Department, Centrelink, Relationships Australia, Housing and CASA.

At the beginning of the year I helped plan a Mob's Got Talent community event to celebrate Youth Week 2020. I arranged weekly planning meetings, design flyers, registration forms, invitations and judging criteria's. The event was suppose to take place on the 9th of April at Beaconsfield State School Hall but was unfortunately cancelled due to COVID-19.

On the 6 February 2020 SEWB began the first Sister Sessions program with our previous social worker. Sister Sessions was an 8 week program created due to some of the concerns identified with most clients around lack of skill and knowledge around everyday living. Our program was aimed at young women (aged 17 to 30) and focused on upskilling them on basic everyday living skills such as housekeeping, budgeting, housing and grooming. We also included information sessions around social emotional wellbeing and healthy living. We had five participants that attended each week, ranging from ages 18 to 30 and all identified as Aboriginal. Due to COVID-19 we unfortunately had to end Sister Sessions after the sixth week of the program.

In April 2020, I worked with the previous social worker and prepared 5 week online Sister Sessions program during the period COVID restrictions were in place. The program focused on similar topics as the first Sister Sessions such as healthy living, positive mental health, budgeting etc.



Carolina Mazza - Child and Maternal Social Worker

My name is Carolina, I was born in Rio de Janeiro – Brazil. I hold a master's degree in Social Work and a bachelor's degree in law. I have a significant experience in early interventions scenarios and working with children and families at risk of homelessness and/or family and domestic violence. I also have experience in the community services setting and working with young people and elderly community members. I am committed to building and maintaining strong relationships with clients and health services in delivering timely, accurate and impactful support. Working with the Aboriginal and Torres Strait Islander community in the Mackay region is a rewarding and unique opportunity to make a positive impact in the community.



Latoya Craigie - Sexual Health Worker

<u>Deadly Choices Community Day:</u> 35 participants completed survey at sexual health stall. Visual resources, incentives, localised information for sexual health services within mackay region for community member to access

International Womens Day: Elders day - Caryle Street 60 participants. Visual resources, incentives, localised information for sexual health services within mackay region for community member to access and this was a great way to meet elders from mackay community.

Men's Group: Introduction to men's group and provided the men with goodie bags

KMG Session: Doin' It Right Program 1200 Condoms provided. I did the first 4 session but was unable to

complete due to COVID. Attendance: 13/2/20- 31 students, 20/2/20- 26 students, 27/2/20- 20 students, 5/3/20- 27 students.

- Provided female clients with emergency contraception and provided support for pt while
 accessing GP service. Gave both pt's information on Contraceptive choices, discussed
 importance of engaging in safe sex, awareness about STIs and risky behaviours and knowing
 your rights consent.
- Sarina Youth Shelter:1200 condoms & condom dispenser provided
- 2x monthly visits 2-3:30pm (ages 14+ days @ youth shelter) 10-20 Young people would be accessing the shelter on the days I would visit before Covid Restrictions
- 1x Education & condom demo for first time youth planning to have sex
- Spoke about STI's and importance in regular testing while promoting 715's

- 1x pregnancy test & Safe sex education for 18 yr old Female
- Provided shelter with condoms & ATSICHS pamphlets
- Gonorrhoea & syphilis outbreak in Mackay region: 550 condoms
- Organisations: KMG, YIRS, Kaylan House, Mental Health Hub, Aboriginal Hostel, Youth Justice, Child Safety, Mackay Children family Centre, Sarina Youth shelter, Mackay women's centre, CASA
- QLD government Sexual health ALERT info sheets have been printed along with 50+ condoms
 and handed to each organisation I visited with ATSICHS pamphlets & SEWB pamphlets also
 swapping contact details if they would have any clients wanting a 715 health checks.
- Oz Care 600 condoms & dispenser
- Provided condoms and a condom dispenser and ATSICHS pamphlets. I will get monthly updates on condoms



Logan Fatnowna - Suicide Prevention Schools:

This year the social, emotional wellbeing unit have had a strong focus on youth. Particularly in my role as suicide prevention trainee we have had a strong presence in local high schools and primary schools in Mackay these include; Northern Beaches SHS, Mackay SHS, North Mackay SHS and Mackay Central Primary School. Our presence in the high schools in the district covered emotional regulation, harm minimisation, general and overall wellbeing. These programs came after one on one appointments carried out with Rebecca McColm, which has been highly beneficial to the students allowing for them to participate in one on one counselling or skill building sessions where in most cases has not been possible due to transport and

distance. At Central State School I ran harm minimisation sessions for a program where identified at risk children attended.

Community Events and Programs:

During Mental Health Week of last year ATSICHS SEWBU held a day of awareness where we teamed up with external organisations such as YIRS, Marabisda, Child Safety, Community Mental Health, Relationships Australia etc.

Holding a wellbeing stall at the community NAIDOC kids and family fun day giving a broad overview of the services the Social Emotional Wellbeing unit offers in terms of care.

Participated in the Mackay Mental Health fair where we made great connections with external organisations for specific care surrounding referral pathways for the benefit of our clientele.

Training:

Attended insight training surrounding trauma informed care and had the opportunity to build on my cultural knowledge and appropriate measures of care for our Aboriginal and Torres Strait Islander community of Mackay through Maramali over a two-day course.

Attended Black Dog Institute Training around Males Mental Health and Trauma Informed care. Clients:

I currently have 14 clients that I assist regarding department of housing, department of health, centerlink, department of transport.

ALCOHOL AND OTHER DRUGS (AODS)

Schools:

This financial year the AOD's Unit has had a strong focus towards youth counselling, education and awareness around Drug & Alcohol. Our attendance at Milton Street High, Pioneer High, North Mackay High, KMG, Northern Beaches and Sarina High Schools has been highly beneficial to not only the schools but students as well. Our attendance has allowed for students to participate in on going and regular counselling sessions when it was otherwise not a possibility due to many factors including transport and distance. This provided an opportunity for access to counselling to some of the most vulnerable teens in the Mackay area.

The SEWB Unit as a whole designed and delivered a new program for Year 7-12 students. This is running weekly for one month. Topic included Anxiety, Depression and Mental Health, Conflict Resolution & Healthy Relationships, Stress Management and Healthy Lifestyle.

IRIS Tool:

Insight training attended Mackay, and our AOD Unit were able to attend the IRIS training. IRIS is a culturally appropriate screening and brief intervention tool. The IRIS tool is an evidence based and validated tool to assist and strengthen treatment outcomes for Aboriginal and/or Torres Strait Islander people that: -provides an Aboriginal and/or Torres Strait Islander focus – has been developed by Aboriginal and/or Torres Strait Islander people for Aboriginal and/or Torres Strait Islander – has been validated as a culturally secure screening tool – is a screening instrument for both; Alcohol & Other Drugs and Mental Health & Emotional Wellbeing.

Community Groups:

This year we continued with our AOD Woman's Group - a facilitated support group for woman who have had or are still struggling with substance abuse issues. Last year we joined with Marabisda to support clients from both services. This is proving highly beneficial for the woman in community with breaking free from stigma and isolation, it is also helping with their emotional, spiritual, and mental well-being. We are now finding woman coming to the group who have had no issues with substance abuse yet have experienced Domestic Violence, and once again proving beneficial for everyone. Unfortunately, due to the Covid 19 crisis we had to stop face to face contact and run the group via Zoom. This was not as successful as face to face because some of our woman had limited data. Other woman had lost phones, which is a regular difficulty for many of our woman due to the nature of addiction and the chaos that can be surrounding their lives as a result.

We had several of our woman leave the group due to leaving Mackay for Domestic Violence reasons and moving interstate, yet they join in the group via Zoom.

Alcohol and Other Drugs Annual Report 2019-2020 **CLIENTS** Females Males Number of clients 77 47 30 COUNSELLING/SUPPORT Number of contact sessions 405 Women's Group 21 women Hours taken to complete administration requirements - case noting - emailing - Photocopying 15 hours per week - phone calls - planning And other required duties. PRESENTING PROBLEMS Health issues Drug & Alcohol Issues Stress Child safety issues Family problems Depression/anxiety Homelessness Support Domestic Violence Stolen generations Dept Housing Behaviour issues Multiple Problems (children) Mental Health issues Grief and Loss Parenting Issues Clients will many times present with up to 4-5 issues at once. **REFERRALS TO** ATSICHS Ltd Mental Health - Nelson Street Lives Lived Well External out of town Rehabilitation Centres Sarina Hospital Detoxification Unit Marabisda Churches for food vouchers Anglicare Relationships Australia Department of Housing . Centrelink **Doctors** Aboriginal Hostel ATSIĽS Legal Aid Job seeking Centres Public Trustees Base Hospital and out of town hospitals Mackay Woman's DV Centre Accommodation facilities in Mackay **TAIHS** KMG Alternative Learning School Binga Birry Justice Group Sisters Inside

	1
REFERRALS FROM	
ATSICHS Mackay	
Max Employment	
Community Solutions	
Ideal Placements	
Neato	
Murri Watch	
Marabisda	
Mudth Niyleta	
Binga Birry Elders	
Drug Arm	
KMG	
Selectability	
Sisters Inside	
Youth Justice	
Lives Lived Well	
Murri Court	
Mackay Base Hospital	
Probation and Parole	
School	
Doctors	
Dept Child Safety/Family	
Self-Referral	
Nelson Street Mental Health	
AGENCY UPSKILLING	
ATSICHS Mackay Ltd	
Marabisda	
Mudth Niyleta	
Girrudala	
Youth Justice	
Sarina Youth Centre	
Drug Arm Mackay	
Schools	
NETWORKING/CASE MANAGEMENT/LIAISON	
North Mackay High School	
Milton Street High School	
Youth Justice	
Probation & Parole	
Sarina High School	
Holy Spirit High School	
Department of Child Safety	
Nelson Street Mental Health	
Mackay Base Hospital Sarina Youth Centre	
Lives Lived Well	
Marabisda ATSICUS Magkay	
ATSICHS Mackay	
Mudth Niyleta	
Mackay Vinnies Residential Rehab PHN	
	Corino
OUTREACH	Sarina
	Bowen
	North Mackay High School for grief support
IN HOUSE TRAINING/DROCRAM DEVELOPMENT	Sarina High School for grief support -ATSICHS AOD's Woman's Group
IN HOUSE TRAINING/PROGRAM DEVELOPMENT	-ATSICHS AOD's Woman's Group -ATSICHS AOD's Family Ice Support Group
	-ATSICHS AOD'S Family Ice Support Group -ATSICHS AOD'S Free Monday Morning
	BBQ

-Sarina High School- Year 11-12 girls Community Health Day -UPSKILLING – ATSICHS SEWBU -Parents at Mackay Chi & Family Centre -Mudth Nyleta -Sarina Youth Centre -Girudala Bowen -Guest speakers at ATSICHS Mackay	
Men's Group	
COMMUNITY EVENTS/MEETINGS	
Deadly Choices North Mackay High School	
Deadly Choices Pioneer High School	
Sarina High School – year 11-12 girls	
Malaki Cup Sarina	
Mabo Day	
NAIDOC	
ATSICHS lawn bowls day	
ATSICHS Big Breakfast	
My 105 FM Radio	
Réd Rose Rally	
ATSICHS Woman's Elders Meeting	
Binbi Tok Olgeta Meeting	
Deadly Choices Mackay Base Hospital	
Binga Birry Elders	
ATSICHS	
AOD Regional Forum – every quarter	
Mackay Interagency Meeting	
Opening Marabisda's new Domestic Violence Service	
CONFEDENCES MODIZATIONS TRAINING	
CONFERENCES/WORKSHOPS/TRAINING – PROFESSIONAL TRAINING	
Cracks in the ICE	
SMART Recovery Training	
INSIGHT – AOD Harm Reduction (Base Hospital)	
First Aid & CPR Training	
Best Practice Media – Reporting on Methamphetamine	

CONFERENCES/WORKSHOPS/TRAINING – PROFESSIONAL TRAINING	
Cracks in the ICE	
SMART Recovery Training	
INSIGHT – AOD Harm Reduction (Base Hospital)	
First Aid & CPR Training	
Best Practice Media – Reporting on Methamphetamine	
Australian Anti Ice Campaign	
Domestic Violence Tenancy Training	
Regional Planning for Mental Health, Suicide & AOD	
DOVETAIL – Inhalant use in QLD	
Insight Young people and drugs.	
Suicide Awareness Program	
Redicase Training	



Regards, the AODs Team.







Partners:

John Murphy FCA
CA (Singapore)
Brett Quinn FCA
Jenny Story CA
Luke Worth CA
Lionel Madden CA

Kaye Lawson Affiliate CA ANZ

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

FINANCIAL REPORT

FOR THE YEAR ENDED 30 JUNE 2020

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DIRECTORS' REPORT

Your directors present their report on the company for the financial year ended 30 June 2020.

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 (appointed 22 October 2019)
Annabella Corowa (retired 22 October 2019)
Mary Pitt (deceased 23 July 2020)

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 amounted to \$87,372 (2019: loss of \$73,649).

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 Region 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

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)

Ms Mary Pitt - Director

Qualifications - Bachelor of Indigenous Community Management & Development,

Justice of the Peace

Experience - Board member - ATSICHS Mackay, Member of Women's Group

Special Responsibilities - Chairperson, Member of board of directors

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

DIRECTORS' REPORT

- 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

Number attended

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	5
Merle Barba	6	5
Andrew Ramsamy	6	5
Patricia Wright	6	4
Mary Pitt	6	6
Annabella Corowa	2	0
Adam Doull	6	3
Sonetta Fewquandie	6	6
Lynda Smith	5	2

Eligible to attend

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 2020, the total amount that members of the company are liable to contribute if the company is wound up is \$210 (2019: \$180).

Auditor's Independence Declaration

The lead auditor's independence declaration for the year ended 30 June 2020 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

Janice Binsiar

Director

Morle Barba

Dated:

30 September 2020

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 2020, 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;
- ii. any applicable code of professional conduct in relation to the audit.

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

Partner: Brett Quinn

Dated: 29 September 2020

PROFIT AND LOSS STATEMENT FOR THE YEAR ENDED 30 JUNE 2020

	Note	2020 \$	2019 \$
INCOME			
Dividends received		14,180	_
Interest received		12,932	26,394
Cash flow boost		62,500	20,334
Grants received	2	5,326,436	4,597,374
Medicare, PIP payments and immunisation incentives	_	1,265,854	1,020,670
Registrar		139,874	167,575
Client record fees		4,566	2,524
QUMAX income		22,220	523
Sundry income		111,959	72,670
	_		•
	_	6,960,521	5,887,730
LESS EXPENDITURE			
Accreditation		28,576	5,222
Activities		210,152	240,751
Advertising		13,867	12,716
Auditor's remuneration	3	17,863	17,325
Bank charges		541	621
Cleaning		39,729	27,461
Client support		152,092	118,684
Clinic supplies		60,516	60,424
Computer expenses		161,557	76,106
Contract medical staff		44,935	43,445
Depreciation		36,770	34,675
Electricity		61,553	53,608
Postage, freight and cartage		6,569	6,941
Impairment of managed investments		50,900	-
Insurance		63,221	59,326
Investment expenses		1,899	-
Motor vehicle expenses		221,445	189,155
NAIDOC		20,598	11,289
Printing and stationery		52,368	42,349
Rates and taxes		46,794	48,511
Rent		121,056	92,466
Repairs and maintenance		70,635	68,205
Security and safety inspections		12,190	980
Staff and board training and welfare		98,982	139,681
Storage fees		8,191	8,169
Subscriptions		4,689	7,226
Superannuation contributions		415,206	382,080
Telephone		72,517	50,108
Travelling expenses		16,209	14,483
Travel allowance		4,548	12,955
Unexpended grant funds		148,494	-
Wages including leave provisions		4,608,487	4,136,417

PROFIT AND LOSS STATEMENT FOR THE YEAR ENDED 30 JUNE 2020

	Note	2020 \$	2019 \$
		6,873,149	5,961,379
	_	87,372	(73,649)
NET OPERATING PROFIT (LOSS)		87,372	(73,649)
Retained Profits at the beginning of the financial year	_	4,526,445	4,600,095
TOTAL AVAILABLE FOR APPROPRIATION		4,613,817	4,526,445
RETAINED PROFITS AT THE END OF THE FINANCIAL YEAR		4,613,817	4,526,445

STATEMENT OF COMPREHENSIVE INCOME FOR THE YEAR ENDED 30 JUNE 2020

	Note	2020	2019
		\$	\$
Profit (loss) for the year		87,372	(73,649)
Other comprehensive income:			
·			
Items that will not be reclassified subsequently to profit or loss:			
Profit/(loss) on revaluation of land and buildings	13	257,609	
Total other comprehensive income for the year		257,609	
Total other comprehensive income for the year		237,009	
Total comprehensive income (expense) for the year		344,981	(73,649)
Total comprehensive income (expense) attributable to member of the		044.004	(70.040)
company		344,981	(73,649)

STATEMENT OF FINANCIAL POSITION

AS AT 30 JUNE 2020

	Note	2020 \$	2019 \$
ASSETS			
CURRENT ASSETS			
Cash and cash equivalents	4	948,311	1,672,407
Trade and other receivables	5	310,552	90,588
Financial assets Other assets	6 7	528,791 35,107	- 35,514
TOTAL CURRENT ASSETS	•	1,822,761	1,798,509
TOTAL CURRENT ASSETS	-	1,022,701	1,790,509
Property, plant and equipment	8	2,005,383	1,693,716
TOTAL ASSETS		3,828,144	3,492,225
	=		
LIABILITIES			
CURRENT LIABILITIES			
Trade and other payables Other liabilities	9	232,309	211,638
Other liabilities Provisions	10 11	148,494 196,026	- 138,409
Other	12	190,020	275,595
TOTAL CURRENT LIABILITIES	-	576,829	625,642
NON CURRENT LIABILITIES	_	_	_
NON-CURRENT LIABILITIES Provisions	11	235,418	195,667
TOTAL NON-CURRENT LIABILITIES	-	235,418	195,667
TOTAL LIABILITIES	- -	812,247	821,309
NET ASSETS	- -	3,015,897	2,670,916
EQUITY	-		
Reserves	13	(1,597,920)	(1,855,529)
Retained earnings	13	4,613,817	4,526,445
TOTAL EQUITY	-	3,015,897	2,670,916

STATEMENT OF CHANGES IN EQUITY FOR THE YEAR ENDED 30 JUNE 2020

		Retained Earnings \$	Asset revaluation reserve \$	Total
Balance at 1 July 2018		4,600,095	(1,855,529)	2,744,566
Comprehensive income				
Profit (loss) for the year	_	(73,650)	<u> </u>	(73,650)
Total comprehensive income for the				
year attributable to the member of the				
company	=	(73,650)		(73,650)
Balance at 30 June 2019		4,526,445	(1,855,529)	2,670,916
Balance at 1 July 2019 Comprehensive income	=	4,526,445	(1,855,529)	2,670,916
Profit for the year		87,372	-	87,372
Other comprehensive income for the year	13		257,609	257,609
Total comprehensive income for the year attributable to the member of the				_
company	_	87,372	257,609	344,981
Balance at 30 June 2020	=	4,613,817	(1,597,920)	3,015,897

STATEMENT OF CASH FLOWS

	Note	2020 \$	2019 \$
Cash flows from operating activities			
Receipts from grant providers and health insurance commission		6,637,343	6,332,770
Payments to suppliers and employees		(7,044,504)	(6,380,627)
Interest received		12,932	26,394
Other income		278,679	243,292
Dividends received		11,975	-
COVID19 Cash flow boost		50,000	
Net cash provided by operating activities	15	(53,575)	221,829
Cash flows from investing activities			
Purchase of property, plant and equipment		(90,828)	-
Purchase of managed investments		(579,691)	
Net cash provided by (used in) investing activities		(670,519)	
Net increase (decrease) in cash held		(724,094)	221,829
Cash and cash equivalents at beginning of financial year		1,672,407	1,450,578
Cash and cash equivalents at end of financial year	15	948,313	1,672,407

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 30 JUNE 2020

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 30 September 2020 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 belowand have been consistently applied unless stated otherwise. The amounts presented in the financial statements have been rounded to the nearest dollar.

(a) Property, Plant and Equipment

All property, plant and equipment except for freehold land and buildings are initially measured at cost and are depreciated over their useful lives to the company.

The carrying amount of plant and equipment is reviewed annually by the directors to ensure it is not in excess of the recoverable amount. The recoverable amount is assessed on the basis of 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 present values in determining recoverable amounts.

Freehold land and buildings are carried at their recoverable amounts, based on periodic, but at least triennial, valuations by the directors.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2020

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:Depreciation RatePlant and equpment10-80%Capital works costs2.50%

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.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2020

(f) 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 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.

(g) 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.

(h) 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.

(i) 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.

(j) Financial Instruments

Financial assets and financial liabilities are recognised when the Entity becomes a party to the contractual provisions of the instrument. For financial assets, this is equivalent to the date that the Entity commits itself to either the purchase or the sale of the asset (ie 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 activemarket are used to determine fair value. In other circumstances, valuation techniques are adopted.

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 30 JUNE 2020

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 AASB15: Revenue from Contracts with Customers.

Financial assets

Financial assets are subsequently measured at:

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

Measurement is on the basis of two primary criteria:

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

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

- 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 that meets the following conditions is subsequently measured at fair value through other comprehensive income:

- 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 measurement conditions of amortised cost and fair value through other comprehensive income are subsequently measured at fair value through profit or loss.

The Entity 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 an "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 with the documented risk management or investment strategy and information about the groupings is documented appropriately, so the performance of the financial liability that is 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 measurement of financial instruments 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

		2020 \$	2019 \$
2.	GRANTS RECEIVED		
	Department of Health - Primary Health Care	2,473,366	2,427,233
	Department of Prime Minister - Social and Emotional Wellbeing	223,918	223,918
	Institute for Urban Indigenous Health - Tackling Indigenous Smoking	594,444	595,085
	Northern Aboriginal & Torres Strait Islander Health Alliance	171,697	196,225
	Mackay Community Foundation	10,000	-
	Department of Health - Chronic Disease	73,112	73,112
	Department of Health - New Directions	575,208	575,208
	Dept of A&TSIP - Indigenous Languages	2,500	-
	Department of Health - Capital Works Murri Court Elders	163,636	400 400
		171,867 23,204	102,400
	Dept Justice & Attorney-General - Gambling Community Fund Primary Health Network - Mental Health	25,204 252,000	180,000
	Primary Health Network - AOD Service Development	301,007	125,420
	Primary Health Network - Male Mental Health	128,571	120,420
	Haypoint Trust	-	7,273
	Department of Prime Minister and Cabinet - NAIDOC Week	_	1,500
	Queensland Aboriginal and Islander Health Council - Sexual Health	-	90,000
	National Aboriginal Community Controlled Health Organisation	80,000	-
	James Cook University	11,905	-
	Dept of Social Services - Boosting the Local Care Workforce	20,000	-
	Qld Aboriginal & Islander Health Council - COVID 19	50,000	
		5,326,436	4,597,374
3.	AUDITOR'S REMUNERATION		
•	Auditing or reviewing the financial statements	17,863	17,325
4.	CASH AND CASH EQUIVALENTS		
	Petty cash	200	200
	General account	373,775	1,356,258
	Dental account	33,185	65,948
	Term deposit	508,282	250,000
	Welfare account	-	1
	DDH cash management account	32,869	
		948,311	1,672,407
5.	TRADE AND OTHER RECEIVABLES		
	CURRENT		
	Sundry debtors	295,846	90,588
	Franking credits refundable	2,204	90,300
	Cash flow boost receivable	12,501	_
		310,552	90,588
		310,332	90,300

NOTES TO THE FINANCIAL STATEMENTS

			2020 \$	2019 \$
6.	FINANCIAL ASSETS			
	CURRENT			
	Investments in equity instruments designated as at fair value			
	through other comprehensive income	(a)	528,791	
	(a) Investments in equity instruments designated as at fair value	ue through	n profit and loss	statement
	Managed investments:		101000	
	Shares in listed companies		124,938	-
	Australian property Australian fixed interest		128,507 272,649	-
	Global fixed interest		53,598	_
			579,692	_
	Less impairment provision		(50,901)	_
	Total Investments in equity instruments designated as at fair			
	value through other comprehensive income		528,791	
7.	OTHER ASSETS			
	CURRENT			
	Prepayments		35,107	35,514
8.	PROPERTY, PLANT AND EQUIPMENT			
.	Land and buildings: 31/33 Victoria Street		2,096,160	1,838,551
	Less accumulated depreciation		(447,024)	(427,082)
	Total land and buildings		1,649,136	1,411,469
	Capital works costs		318,384	286,449
	Less accumulated depreciation		(37,520)	(30,326)
			280,864	256,123
	Plant and equipment		500,303	441,410
	Less accumulated depreciation		(424,920)	(415,286)
	Total plant and equipment		75,383	26,124
	Total property, plant and equipment		2,005,383	1,693,716
	. c.a. p. oporty, plant and equipment			.,000,1.10
9.	TRADE AND OTHER PAYABLES			
	CURRENT			
	Goods and services tax		81,694	113,703
	Sundry creditors		12,088	12,695
	Funds held on behalf of other community groups Salary sacrifice payments outstanding		3,552 6,937	4,296 10,893
	Withholding tax payable		90,550	70,076
	Superannuation payable		37,488	(25)
	· ·		232,309	211,638

NOTES TO THE FINANCIAL STATEMENTS

		2020 \$	2019 \$
10.	OTHER LIABILITIES		
	CURRENT		
	Unexpended grant funds	148,494	
11.	PROVISIONS		
	CURRENT		
	Provision for holiday pay	196,026	138,409
	NON-CURRENT		
	Provision for long service leave	235,418	195,667
12.	OTHER LIABILITIES		
	CURRENT		
	Grant income in advance		275,595
13.	RESERVES		
	(a) Asset Revaluation Reserve		
	The asset revaluation reserve records revaluations of non-current as	ssets.	
	(b) Analysis of Items of Other Comprehensive Income by Each Class of Reserve: Asset revaluation reserve		
	Profit/(loss) on revaluation of land and buildings	257,609	<u>-</u>
	Movement in asset revaluation reserve	257,609	-
	Total other comprehensive income for the year	257,609	
14.	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	282,959	206,869
	between 12 months and five years	219,457	217,383
		502,416	424,252

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 30 JUNE 2020

	2020 \$	2019 \$
15. 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	948,311	1,672,407
	948,311	1,672,407
(b) Reconciliation of cash flow from operations with profit Profit Non-cash flows in profit: Depreciation Impairment of managed investments	85,167 36,770 50,900	(73,649) 34,675 -
Changes in assets and liabilities: Movement in receivables Movement in other assets Movement in payables Movement in provisions Movement in other payables	(217,758) 407 (607) 97,369 (105,823)	(69,583) 268 7,882 10,069 312,167
Net cash provided by (used in) operating activities	(53,576)	221,828

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:

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

Janica Binsian

Director

Merle Barba

Dated:

30 September 2020

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 2020, the statement of profit or loss and statement of changes in equity for the year then ended, and notes to the financial statements, including a summary of significant accounting policies, and the directors' declaration.

Basis for 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 to satisfy the requirements of the company's constitution and meet the needs of member. As a result, the financial report may not be suitable for another purpose. Our opinion is not modified in respect of this matter.

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 constitution and 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.

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

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the company's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the directors.
- Conclude on the appropriateness of the directors' use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the company's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our 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.

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

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

Partner: Brett Quinn

Dated: 1 October 2020

Carants received		Note	2020 \$	2019 \$
Grants received 2,473,366 2,427,233 Contribution from Self-Generated Income 1,481,525 1,284,868 3,954,891 3,712,101 LESS EXPENDITURE Activities 35,967 48,047 Advertising 35,967 48,047 Advertising 3,891 2,572 Auditor's remuneration - 7,052 Bank charges 541 621 Cleaning 30,244 24,763 Client support 31,612 6,822 Clinic supplies 26,396 19,545 Computer expenses 83,366 71,154 Computer expenses 52,800 47,507	DEPARTMENT OF HEALTH - PRIMARY HEALTH CARE			
Contribution from Self-Generated Income 1,481,525 1,284,868 3,954,891 3,712,101 LESS EXPENDITURE 2218 5,222 Acctivities 35,967 48,047 Advertising 3,891 2,572 Auditor's remuneration - 7,052 Bank charges 541 621 Cleaning 30,244 24,763 Client support 31,612 6,822 Clinic supplies 26,396 19,545 Computer expenses 83,366 71,154 Contract medical staff 24,927 39,480 Electricity 52,180 48,377 Postage, freight and cartage 4,521 6,119 Insurance 47,797 23,767 Motor vehicle expenses 58,953 47,160 NAIDOC 6,779 - Printing and stationery 18,968 16,033 Rates and taxes 32,012 48,511 Repairs and maintenance 62,056 65,799 Security and safety inspections	INCOME			
Accreditation 2,218 5,222 Activities 35,967 48,047 Advertising 3,891 2,572 Bank charges 541 621 Cleaning 30,244 24,763 Client support 31,612 6,822 Clinic supplies 26,396 19,545 Computer expenses 83,366 71,154 Contract medical staff 24,927 39,480 Electricity 52,180 48,377 Postage, freight and cartage 4,521 6,119 Insurance 47,797 23,767 Motor vehicle expenses 58,953 47,160 NAIDOC 6,779 - Printing and stationery 18,968 16,033 Rates and taxes 32,012 48,511 Rent 47,914 46,816 Repairs and maintenance 62,056 65,799 Security and safety inspections 12,190 980 Staff and board training and welfare 33,805 34,486 Storage fees 4,757 8,169 Subscriptions 261,475 255,371 Travel allowance 2,948 6,474 Travel allowance 2,948 3,012 Wages including leave provisions 2,990,255 2,778,967 NET OPERATING PROFIT (LOSS) NET OPERATING PROFIT (LOSS)			2,473,366	2,427,233
LESS EXPENDITURE Accreditation 2.218 5.222 Activities 35,967 48,047 Advertising 3,891 2,572 Auditor's remuneration - 7,052 Bank charges 541 621 Cleaning 30,244 24,763 4,621 31,612 6,822 Clint supprise 43,366 71,542 Insurance 4,521 6,119 Insurance	Contribution from Self-Generated Income	_	1,481,525	1,284,868
Actreditation 2,218 5,222 Activitities 35,967 48,047 Advertising 3,891 2,572 Auditor's remuneration - 7,052 Bank charges 541 621 Cleaning 30,244 24,763 Client support 31,612 6,822 Clinic supplies 26,396 19,545 Computer expenses 83,366 71,154 Computer expenses 83,366 71,154 Contract medical staff 24,927 39,480 Electricity 52,180 48,377 Postage, freight and cartage 4,521 6,119 Insurance 47,797 23,767 Motor vehicle expenses 59,953 47,160 NAIDOC 6,779 - Printing and stationery 18,968 16,033 Rates and taxes 32,012 48,511 Rent 47,914 46,816 Repairs and maintenance 62,056 65,799 Security and safety inspections		<u>-</u>	3,954,891	3,712,101
Activities 35,967 48,047 Advertising 3,891 2,572 Auditor's remuneration - 7,052 Bank charges 541 621 Cleaning 30,244 24,763 Client support 31,612 6,822 Clinic supplies 26,396 19,545 Computer expenses 83,366 71,154 Contract medical staff 24,927 39,480 Electricity 52,180 48,377 Postage, freight and cartage 4,521 6,119 Insurance 47,797 23,767 Motor vehicle expenses 58,953 47,160 NAIDOC 6,779 - Printing and stationery 18,968 16,033 Rates and taxes 32,012 48,511 Rent 47,914 46,816 Repairs and maintenance 62,056 65,799 Security and safety inspections 12,190 980 Staff and board training and welfare 73,805 98,488 Storage fe	LESS EXPENDITURE			
Activities 35,967 48,047 Advertising 3,891 2,572 Auditor's remuneration - 7,052 Bank charges 541 621 Cleaning 30,244 24,763 Client support 31,612 6,822 Clinic supplies 26,396 19,545 Computer expenses 83,366 71,154 Contract medical staff 24,927 39,480 Electricity 52,180 48,377 Postage, freight and cartage 4,521 6,119 Insurance 47,797 23,767 Motor vehicle expenses 58,953 47,160 NAIDOC 6,779 - Printing and stationery 18,968 16,033 Rates and taxes 32,012 48,511 Rent 47,914 46,816 Repairs and maintenance 62,056 65,799 Security and safety inspections 12,190 980 Staff and board training and welfare 73,805 93,488 Superannua	Accreditation		2,218	5,222
Auditor's remuneration 7,052 Bank charges 541 621 Cleaning 30,244 24,763 Client support 31,612 6,822 Clinic supplies 26,396 19,545 Computer expenses 83,366 71,154 Contract medical staff 24,927 39,480 Electricity 52,180 48,377 Postage, freight and cartage 4,521 6,119 Insurance 47,797 23,767 Motor vehicle expenses 58,953 47,160 NAIDOC 6,779 - Printing and stationery 18,968 16,033 Rates and taxes 32,012 48,511 Rent 47,914 46,816 Repairs and maintenance 62,056 65,799 Security and safety inspections 12,190 980 Staff and board training and welfare 73,805 93,488 Storage fees 4,757 8,169 Subscriptions 4,689 7,226 Superannuation contribution	Activities		· ·	· ·
Bank charges 541 621 Cleaning 30,244 24,763 Client support 31,612 6,822 Clinic supplies 26,396 19,545 Computer expenses 83,366 71,154 Comtract medical staff 24,927 39,480 Electricity 52,180 48,377 Postage, freight and cartage 4,521 6,119 Insurance 4,7,797 23,767 Motor vehicle expenses 58,953 47,160 NAIDOC 6,779 - Printing and stationery 18,968 16,033 Rates and taxes 32,012 48,511 Rent 47,914 46,816 Repairs and maintenance 62,056 65,799 Security and safety inspections 12,190 980 Staff and board training and welfare 73,805 93,488 Storage fees 4,757 8,169 Subscriptions 4,689 7,226 Superantuation contributions 261,475 253,371	Advertising		3,891	2,572
Cleaning 30,244 24,763 Cleint support 31,612 6,822 Clinic supplies 26,396 19,545 Computer expenses 83,366 71,154 Contract medical staff 24,927 39,480 Electricity 52,180 48,377 Postage, freight and cartage 4,521 6,119 Insurance 47,797 23,767 Motor vehicle expenses 58,953 47,160 NAIDOC 6,779 - Printing and stationery 18,968 16,033 Rates and taxes 32,012 48,511 Repairs and maintenance 62,056 65,799 Security and safety inspections 12,190 980 Staff and board training and welfare 73,805 93,488 Storage fees 4,757 8,169 Suberannuation contributions 261,475 253,371 Telephone 32,282 32,554 Travel allowance 2,148 3,012 Wages including leave provisions 2,990,255	Auditor's remuneration		-	7,052
Client support 31,612 6,822 Clinic supplies 26,396 19,545 Computer expenses 83,366 71,154 Contract medical staff 24,927 39,480 Electricity 52,180 48,377 Postage, freight and cartage 47,797 23,767 Motor vehicle expenses 58,953 47,160 NAIDOC 6,779 - Printing and stationery 18,968 16,033 Rates and taxes 32,012 48,511 Rent 47,914 46,816 Repairs and maintenance 62,056 65,799 Security and safety inspections 12,190 980 Staff and board training and welfare 73,805 93,488 Storage fees 4,757 8,169 Subscriptions 4,689 7,226 Superanuation contributions 261,475 253,371 Telephone 32,282 32,554 Travel allowance 2,148 6,474 Wages including leave provisions 2,990,255 2	Bank charges		541	621
Clinic supplies 26,396 19,545 Computer expenses 83,366 71,154 Contract medical staff 24,927 39,480 Electricity 52,180 48,377 Postage, freight and cartage 4,521 6,119 Insurance 47,797 23,767 Motor vehicle expenses 58,953 47,160 NAIDOC 6,779 - Printing and stationery 18,968 16,033 Rates and taxes 32,012 48,511 Rent 47,914 46,816 Repairs and maintenance 62,056 65,799 Security and safety inspections 12,190 980 Staff and board training and welfare 73,805 93,488 Storage fees 4,757 8,169 Suberannuation contributions 261,475 253,371 Telephone 32,282 32,554 Travel allowance 2,948 6,474 Wages including leave provisions 2,990,255 2,778,967 NET OPERATING PROFIT (LOSS) -	Cleaning		30,244	24,763
Computer expenses 83,366 71,154 Contract medical staff 24,927 39,480 Electricity 52,180 48,377 Postage, freight and cartage 4,521 6,119 Insurance 47,797 23,767 Motor vehicle expenses 58,953 47,160 NAIDOC 6,779 - Printing and stationery 18,968 16,033 Rates and taxes 32,012 48,511 Rent 47,914 46,816 Repairs and maintenance 62,056 65,799 Security and safety inspections 12,190 980 Staff and board training and welfare 73,805 93,488 Storage fees 4,757 8,169 Subscriptions 4,689 7,226 Superannuation contributions 261,475 253,371 Telephone 32,282 32,554 Travel allowance 2,148 3,012 Wages including leave provisions 2,990,255 2,778,967 NET OPERATING PROFIT (LOSS) -	Client support		31,612	6,822
Contract medical staff 24,927 39,480 Electricity 52,180 48,377 Postage, freight and cartage 4,521 6,119 Insurance 47,797 23,767 Motor vehicle expenses 58,953 47,160 NAIDOC 6,779 - Printing and stationery 18,968 16,033 Rates and taxes 32,012 48,511 Rent 47,914 46,816 Repairs and maintenance 62,056 65,799 Security and safety inspections 12,190 980 Staff and board training and welfare 73,805 93,488 Storage fees 4,757 8,169 Subscriptions 4,689 7,226 Superannuation contributions 261,475 253,371 Telephone 32,282 32,554 Travelling expenses 2,948 6,474 Travel allowance 2,148 3,012 Wages including leave provisions 2,990,255 2,778,967 NET OPERATING PROFIT (LOSS) -	Clinic supplies		26,396	19,545
Selectricity	Computer expenses		83,366	71,154
Postage, freight and cartage 4,521 6,119 Insurance 47,797 23,767 Motor vehicle expenses 58,953 47,160 NAIDOC 6,779 - Printing and stationery 18,968 16,033 Rates and taxes 32,012 48,511 Rent 47,914 46,816 Repairs and maintenance 62,056 65,799 Security and safety inspections 12,190 980 Staff and board training and welfare 73,805 93,488 Storage fees 4,757 8,169 Subscriptions 261,475 253,371 Telephone 32,282 32,554 Travelling expenses 2,948 6,474 Travel allowance 2,148 3,012 Wages including leave provisions 2,990,255 2,778,967 NET OPERATING PROFIT (LOSS) - - Surplus/(DEFICIT) - - Surplus/(Deficit) Balance at 1 July 2019 - - -	Contract medical staff		24,927	39,480
Insurance 47,797 23,767 Motor vehicle expenses 58,953 47,160 NAIDOC 6,779	Electricity		52,180	48,377
Motor vehicle expenses 58,953 47,160 NAIDOC 6,779 - Printing and stationery 18,968 16,033 Rates and taxes 32,012 48,511 Rent 47,914 46,816 Repairs and maintenance 62,056 65,799 Security and safety inspections 12,190 980 Staff and board training and welfare 73,805 93,488 Storage fees 4,757 8,169 Subscriptions 4,689 7,226 Superannuation contributions 261,475 253,371 Telephone 32,282 32,554 Travelling expenses 2,948 6,474 Travel allowance 2,148 3,012 Wages including leave provisions 2,990,255 2,778,967 NET OPERATING PROFIT (LOSS) - - SURPLUS/(DEFICIT) - - Surplus/(Deficit) Balance at 1 July 2019 - -	Postage, freight and cartage			
NAIDOC 6,779 - Printing and stationery 18,968 16,033 Rates and taxes 32,012 48,511 Rent 47,914 46,816 Repairs and maintenance 62,056 65,799 Security and safety inspections 12,190 980 Staff and board training and welfare 73,805 93,488 Storage fees 4,757 8,169 Subscriptions 4,689 7,226 Superannuation contributions 261,475 253,371 Telephone 32,282 32,554 Travelling expenses 2,948 6,474 Travel allowance 2,148 3,012 Wages including leave provisions 2,990,255 2,778,967 NET OPERATING PROFIT (LOSS) - - SURPLUS/(DEFICIT) - - Surplus/(Deficit) Balance at 1 July 2019 - -				
Printing and stationery 18,968 16,033 Rates and taxes 32,012 48,511 Rent 47,914 46,816 Repairs and maintenance 62,056 65,799 Security and safety inspections 12,190 980 Staff and board training and welfare 73,805 93,488 Storage fees 4,757 8,169 Subscriptions 4,689 7,226 Superannuation contributions 261,475 253,371 Telephone 32,282 32,554 Travelling expenses 2,948 6,474 Travel allowance 2,148 3,012 Wages including leave provisions 2,990,255 2,778,967 NET OPERATING PROFIT (LOSS) - - SURPLUS/(DEFICIT) - - Surplus/(Deficit) Balance at 1 July 2019 - -				47,160
Rates and taxes 32,012 48,511 Rent 47,914 46,816 Repairs and maintenance 62,056 65,799 Security and safety inspections 12,190 980 Staff and board training and welfare 73,805 93,488 Storage fees 4,757 8,169 Subscriptions 4,689 7,226 Superannuation contributions 261,475 253,371 Telephone 32,282 32,554 Travelling expenses 2,948 6,474 Travel allowance 2,148 3,012 Wages including leave provisions 2,990,255 2,778,967 NET OPERATING PROFIT (LOSS) - - SURPLUS/(DEFICIT) - - Surplus/(Deficit) Balance at 1 July 2019 - -			·	-
Rent 47,914 46,816 Repairs and maintenance 62,056 65,799 Security and safety inspections 12,190 980 Staff and board training and welfare 73,805 93,488 Storage fees 4,757 8,169 Subscriptions 4,689 7,226 Superannuation contributions 261,475 253,371 Telephone 32,282 32,554 Travel ling expenses 2,948 6,474 Travel allowance 2,148 3,012 Wages including leave provisions 2,990,255 2,778,967 NET OPERATING PROFIT (LOSS) - - SURPLUS/(DEFICIT) - - Surplus/(Deficit) Balance at 1 July 2019 - -			· ·	•
Repairs and maintenance 62,056 65,799 Security and safety inspections 12,190 980 Staff and board training and welfare 73,805 93,488 Storage fees 4,757 8,169 Subscriptions 4,689 7,226 Superannuation contributions 261,475 253,371 Telephone 32,282 32,554 Travelling expenses 2,948 6,474 Travel allowance 2,148 3,012 Wages including leave provisions 2,990,255 2,778,967 NET OPERATING PROFIT (LOSS) - - SURPLUS/(DEFICIT) - - Surplus/(Deficit) Balance at 1 July 2019 - -			·	•
Security and safety inspections 12,190 980 Staff and board training and welfare 73,805 93,488 Storage fees 4,757 8,169 Subscriptions 4,689 7,226 Superannuation contributions 261,475 253,371 Telephone 32,282 32,554 Travelling expenses 2,948 6,474 Travel allowance 2,148 3,012 Wages including leave provisions 2,990,255 2,778,967 NET OPERATING PROFIT (LOSS) - - SURPLUS/(DEFICIT) - - Surplus/(Deficit) Balance at 1 July 2019 - -			·	•
Staff and board training and welfare 73,805 93,488 Storage fees 4,757 8,169 Subscriptions 4,689 7,226 Superannuation contributions 261,475 253,371 Telephone 32,282 32,554 Travelling expenses 2,948 6,474 Travel allowance 2,148 3,012 Wages including leave provisions 2,990,255 2,778,967 NET OPERATING PROFIT (LOSS) - - SURPLUS/(DEFICIT) - - Surplus/(Deficit) Balance at 1 July 2019 - -			·	•
Storage fees 4,757 8,169 Subscriptions 4,689 7,226 Superannuation contributions 261,475 253,371 Telephone 32,282 32,554 Travelling expenses 2,948 6,474 Travel allowance 2,148 3,012 Wages including leave provisions 2,990,255 2,778,967 NET OPERATING PROFIT (LOSS) - - SURPLUS/(DEFICIT) - - Surplus/(Deficit) Balance at 1 July 2019 - -				
Subscriptions 4,689 7,226 Superannuation contributions 261,475 253,371 Telephone 32,282 32,554 Travelling expenses 2,948 6,474 Travel allowance 2,148 3,012 Wages including leave provisions 2,990,255 2,778,967 NET OPERATING PROFIT (LOSS) - - SURPLUS/(DEFICIT) - - Surplus/(Deficit) Balance at 1 July 2019 - -				
Superannuation contributions 261,475 253,371 Telephone 32,282 32,554 Travelling expenses 2,948 6,474 Travel allowance 2,148 3,012 Wages including leave provisions 2,990,255 2,778,967 NET OPERATING PROFIT (LOSS) - - SURPLUS/(DEFICIT) - - Surplus/(Deficit) Balance at 1 July 2019 - -			·	
Telephone 32,282 32,554 Travelling expenses 2,948 6,474 Travel allowance 2,148 3,012 Wages including leave provisions 2,990,255 2,778,967 NET OPERATING PROFIT (LOSS) - - SURPLUS/(DEFICIT) - - Surplus/(Deficit) Balance at 1 July 2019 - -	·		·	
Travelling expenses 2,948 6,474 Travel allowance 2,148 3,012 Wages including leave provisions 2,990,255 2,778,967 NET OPERATING PROFIT (LOSS) - - SURPLUS/(DEFICIT) - - Surplus/(Deficit) Balance at 1 July 2019 - -	·		,	
Travel allowance Wages including leave provisions 2,148 2,990,255 2,778,967 3,012 2,778,967 NET OPERATING PROFIT (LOSS) - - - SURPLUS/(DEFICIT) - - - Surplus/(Deficit) Balance at 1 July 2019 - - -				
Wages including leave provisions 2,990,255 2,778,967 3,954,891 3,712,101 NET OPERATING PROFIT (LOSS) - - SURPLUS/(DEFICIT) - - Surplus/(Deficit) Balance at 1 July 2019 - -			· ·	· ·
3,954,891 3,712,101			·	
NET OPERATING PROFIT (LOSS) - - SURPLUS/(DEFICIT) - - Surplus/(Deficit) Balance at 1 July 2019 - -	vvages including leave provisions	_		•
SURPLUS/(DEFICIT) Surplus/(Deficit) Balance at 1 July 2019		_	-	-
SURPLUS/(DEFICIT) Surplus/(Deficit) Balance at 1 July 2019		_		
Surplus/(Deficit) Balance at 1 July 2019	NET OPERATING PROFIT (LOSS)	=	- -	-
	SURPLUS/(DEFICIT)		-	-
Surplus/(Deficit) Balance at 30 June 2020	Surplus/(Deficit) Balance at 1 July 2019	_	<u>-</u>	
	Surplus/(Deficit) Balance at 30 June 2020	=		-

DIVISIONAL PROFIT AND LOSS STATEMENT FOR THE YEAR ENDED 30 JUNE 2020

Note

2020

2019

	11010	\$	\$
DEPARTMENT OF PRIME MINISTER AND CABINET - 9	SOCIAL AND EMOTION	AL WELLBEING	
INCOME			
Grants received		223,918	223,918
LESS EXPENDITURE			
Activities		5,495	8,511
Auditor's remuneration		3,457	3,663
Client support		170	-
Electricity		1,207	-
Insurance		15,422	15,422
Motor vehicle expenses		15,897	16,841
Printing and stationery		4,350	2,887
Rates and taxes		1,000	-
Rent		2,039	-
Repairs and maintenance		59	-
Staff and board training and welfare		1,994	45.040
Superannuation contributions		14,501	15,012
Telephone Wages including leave provisions		5,680 152,647	3,570 158,012
wages including leave provisions			
		223,918	223,918
	<u> </u>		-
NET OPERATING PROFIT	_	<u> </u>	-
SURPLUS/(DEFICIT)		-	-
Surplus/(Deficit) Balance at 1 July 2019	_		
Surplus/(Deficit) Balance at 30 June 2020		-	-

DIVISIONAL PROFIT AND LOSS STATEMENT FOR THE YEAR ENDED 30 JUNE 2020

Note

2020

2019

	\$	\$
INSTITUTE FOR URBAN INDIGENOUS HEALTH - TACKLING INDIGEN	OUS SMOKING	
INCOME		
Grants received	594,444	595,085
LESS EXPENDITURE		
Activities	52,301	93,537
Advertising	9,977	10,144
Auditor's remuneration	6,002	3,500
Cleaning	1,312	136
Computer expenses	-	3,337
Electricity	2,034	3,648
Postage, freight and cartage	61	823
Insurance	-	15,422
Motor vehicle expenses	52,181	52,824
NAIDOC	-	100
Printing and stationery	6,336	5,736
Rent	26,557	29,657
Repairs and maintenance	2,030	2,406
Staff and board training and welfare	7,959	27,480
Superannuation contributions	36,133	28,974
Telephone	5,740	7,728
Travelling expenses	4,527	1,612
Travel allowance	948	2,627
Wages including leave provisions	380,346	305,394
	594,444	595,085
	<u> </u>	-
NET OPERATING PROFIT	-	-
SURPLUS/(DEFICIT)	-	-
Surplus/(Deficit) Balance at 1 July 2019	<u>-</u>	
Surplus/(Deficit) Balance at 30 June 2020	<u> </u>	

	Note	2020 \$	2019 \$
NORTHERN ABORIGINAL & TORRES STRAIT ISLANDER HEALTH	ALLIANCE	≣	
INCOME			
Grants received	_	171,698	196,225
LESS EXPENDITURE Client support Superannuation contributions Wages including leave provisions	_ _	65,859 9,182 96,657 171,698	79,729 10,107 106,389 196,225
NET OPERATING PROFIT	_ =	- -	- -
SURPLUS/(DEFICIT)		-	-
Surplus/(Deficit) Balance at 1 July 2019	_	<u>-</u>	<u>-</u>
Surplus/(Deficit) Balance at 30 June 2020		<u> </u>	

No	ote	2020 \$	2019 \$
MACKAY COMMUNITY FOUNDATION			
INCOME			
Grants received	_	10,000	
LESS EXPENDITURE	_		
		-	
		10,000	
NET OPERATING PROFIT	_	10,000	
SURPLUS/(DEFICIT)		10,000	-
Surplus/(Deficit) Balance at 1 July 2019	_		
Surplus/(Deficit) Balance at 30 June 2020	_	10,000	

	Note	2020 \$	2019 \$
SELF-GENERATED INCOME			
INCOME			
Cash flow boost Medicare, PIP payments and immunisation incentives Registrar Client record fees Sundry income	_	62,500 1,265,854 139,874 4,566 111,959	1,020,670 167,574 2,524 67,670
		1,584,753	1,258,438
LESS EXPENDITURE			
Contribution to a different division	_	1,481,525	1,258,474
		1,481,525	1,258,474
		103,228	(36)
NET OPERATING PROFIT (LOSS)	_	103,228	(36)
SURPLUS/(DEFICIT)		103,228	(36)
Surplus/(Deficit) Balance at 1 July 2019	_	1,044,826	1,044,862
Surplus/(Deficit) Balance at 30 June 2020	=	1,148,054	1,044,826

No	ote	2020 \$	2019 \$
DEPARTMENT OF HEALTH - CHRONIC DISEASE - CLOSING THE GA	P		
INCOME			
Grants received	_	73,112	73,112
LESS EXPENDITURE			
Activities		371	-
Client support		1,860	-
Clinic supplies		5,211	-
Contract medical staff		12,820	-
Motor vehicle expenses		11,333	10,177
Superannuation contributions		3,602	5,460
Wages including leave provisions	_	37,915	57,475
		73,112	73,112
		<u>-</u>	-
NET OPERATING PROFIT	_	<u> </u>	-
SURPLUS/(DEFICIT)		-	-
Surplus/(Deficit) Balance at 1 July 2019	_		
Surplus/(Deficit) Balance at 30 June 2020	_	<u> </u>	

DIVISIONAL PROFIT AND LOSS STATEMENT FOR THE YEAR ENDED 30 JUNE 2020

Note

2020

2019

	11010	\$	\$
DEPARTMENT OF HEALTH - NEW DIRECTIONS (FORMERLY M	OTHERS & B	ABIES)	
INCOME			
Grants received		575,208	575,208
LESS EXPENDITURE			
Activities		33,920	44,281
Client support		25,731	26,917
Clinic supplies		22,927	40,879
Contract medical staff		2,980	3,965
Postage, freight and cartage		440	-
Motor vehicle expenses		22,111	26,800
NAIDOC		2,080	11,089
Printing and stationery		8,609	7,139
Repairs and maintenance		579	-
Staff and board training and welfare		2,269	6,021
Superannuation contributions		39,296	35,407
Telephone		626	-
Wages including leave provisions	_	413,640	372,710
	_	575,208	575,208
	_		-
NET OPERATING PROFIT	_	<u>-</u> <u>-</u>	-
SURPLUS/(DEFICIT)		-	-
Surplus/(Deficit) Balance at 1 July 2019	_	<u>-</u>	
Surplus/(Deficit) Balance at 30 June 2020	=	<u>-</u> <u>-</u>	

	Note	2020 \$	2019 \$
PHARMACY GUILD OF AUSTRALIA - QUMAX			
INCOME			
QUMAX income		22,220	523
LESS EXPENDITURE			
Activities		228	-
Client support Clinic supplies		21,190 802	523
Cirrie supplies		22,220	523
			523
NET OPERATING PROFIT			-
SURPLUS/(DEFICIT)		-	-
Surplus/(Deficit) Balance at 1 July 2019			
Surplus/(Deficit) Balance at 30 June 2020			

	Note	2020 \$	2019 \$
DEPARTMENT OF ABORIGINAL & TORRES STRAIT ISLANDER PA	ARTNERSH	IIPS - INDIGENO	US LANGUAGES
INCOME			
Grants received	_	2,500	
LESS EXPENDITURE			
	_		-
		2,500	-
NET OPERATING PROFIT	=	2,500	-
SURPLUS/(DEFICIT)		2,500	-
Surplus/(Deficit) Balance at 1 July 2019	_		
Surplus/(Deficit) Balance at 30 June 2020	_	2,500	

	Note	2020 \$	2019 \$
DEPARTMENT OF HEALTH - CAPITAL WORKS			
INCOME			
Grants received		163,636	
LESS EXPENDITURE			
Capital expenditure		31,935	
		31,935	
		131,701	-
NET OPERATING PROFIT		131,701	
SURPLUS/(DEFICIT)		131,701	-
Surplus/(Deficit) Balance at 1 July 2019			
Surplus/(Deficit) Balance at 30 June 2020		131,701	

	Note	2020 \$	2019 \$
MURRI COURT ELDERS		·	·
INCOME			
INCOME			
Grants received		171,867	102,400
LESS EXPENDITURE			
Accreditation		605	-
Activities		24,029	9,203
Auspicing fee - Murri Court		9,907	9,715
Auditor's remuneration		1,201	-
Capital expenditure		26,652	-
Cleaning		511	-
Client support		1,339	2,280
Computer expenses		11,083	1,615
Electricity		3,616	1,583
Motor vehicle expenses		6,029	4,378
NAIDOC		7,243	100
Printing and stationery		2,014	3,363
Rates and taxes		130	-
Repairs and maintenance		1,535 928	1 660
Staff and board training and welfare Superannuation contributions		926 6,097	1,668 5,634
Telephone		2,090	1,725
Travelling expenses		1,230	848
Travel allowance		1,452	985
Wages including leave provisions		64,176	59,303
The same of the same provided in		171,867	102,400
		-	-
NET OPERATING PROFIT	_		
NET OPERATING PROFIT	=	- -	
SURPLUS/(DEFICIT)		-	-
Surplus/(Deficit) Balance at 1 July 2019	_		
Surplus/(Deficit) Balance at 30 June 2020	=	<u> </u>	_

	Note	2020 \$	2019 \$
DEPARTMENT OF JUSTICE AND ATTORNEY-GENERAL - GAMBL	ING COM	MUNITY BENEFIT	FUND
INCOME			
Grants received	_	23,204	
LESS EXPENDITURE			
Capital expenditure		20,477	-
Repairs and maintenance	_	2,727	
	_	23,204	
	_	23,204	-
NET OPERATING PROFIT	_	-	-
SURPLUS/(DEFICIT)		-	-
Surplus/(Deficit) Balance at 1 July 2019	_		
Surplus/(Deficit) Balance at 30 June 2020	=	-	

	Note	2020 \$	2019 \$
PRIMARY HEALTH NETWORK - MENTAL HEALTH			
INCOME			
Grants received	-	252,000	180,000
LESS EXPENDITURE			
Accreditation		490	-
Activities		19,688	7,286
Auspicing fee - MCHMH		10,000	10,000
Auditor's remuneration		6,201	3,110
Cleaning		3,136	2,562
Client support		815	2,095
Computer expenses Contract medical staff		3,017	-
Electricity		4,208 1,209	-
Postage, freight and cartage		577	-
Insurance		-	4,713
Motor vehicle expenses		16,511	20,433
NAIDOC		500	-
Printing and stationery		3,906	3,689
Rent		23,472	15,994
Repairs and maintenance		824	-
Staff and board training and welfare		3,433	1,581
Storage fees		1,373	-
Superannuation contributions		13,018	9,281
Telephone		1,049	1,000
Travelling expenses		1,544	125
Travel allowance		407.000	441
Wages including leave provisions	-	137,029	97,690
	-	252,000	180,000
	_	- -	-
NET OPERATING PROFIT	=	<u> </u>	-
SURPLUS/(DEFICIT)		-	-
Surplus/(Deficit) Balance at 1 July 2019	-		
Surplus/(Deficit) Balance at 30 June 2020	=	<u> </u>	-

	Note	2020 \$	2019 \$
PRIMARY HEALTH NETWORK - AOD SERVICE DEVELOPMENT			
INCOME			
Grants received	-	301,007	125,420
LESS EXPENDITURE			
Accreditation		1,447	_
Activities		6,450	1,502
Auditor's remuneration		6,201	-
Cleaning		3,522	-
Client support		3,124	318
Electricity		1,086	-
Postage, freight and cartage		970	-
Motor vehicle expenses		20,938	10,541
Printing and stationery Rates and taxes		5,539	1,757
Rates and taxes Rent		13,652 14,914	-
Repairs and maintenance		14,914 824	-
Staff and board training and welfare		5,993	8,395
Superannuation contributions		18,544	14,207
Telephone		2,602	2,667
Travelling expenses		-	2,305
Travel allowance		-	3,359
Wages including leave provisions		195,201	151,770
	-	301,007	196,821
	_	-	(71,401)
NET OPERATING PROFIT (LOSS)	=	-	(71,401)
SURPLUS/(DEFICIT)		-	(71,401)
Surplus/(Deficit) Balance at 1 July 2019	<u>-</u>	<u> </u>	71,401
Surplus/(Deficit) Balance at 30 June 2020	=	<u> </u>	

	Note	2020 \$	2019 \$
PRIMARY HEALTH NETWORK - MALE MENTAL HEALTH			
INCOME			
Grants received		128,571	
LESS EXPENDITURE			
Activities		8,489	-
Auditor's remuneration		5,000	-
Cleaning		1,004	-
Client support		331	-
Computer expenses		2,730	-
Electricity		220	-
Motor vehicle expenses		10,228	-
Printing and stationery		2,175	-
Rent		6,162	-
Staff and board training and welfare		1,581	-
Storage fees		2,060	-
Superannuation contributions		7,600	-
Telephone Wages including leave provisions		987 80,004	-
vvages including leave provisions	_		<u>-</u> _
		128,571	-
	_	-	-
NET OPERATING PROFIT	_	-	-
SURPLUS/(DEFICIT)		-	-
Surplus/(Deficit) Balance at 1 July 2019	_	<u> </u>	-
Surplus/(Deficit) Balance at 30 June 2020	=	<u> </u>	

	Note	2020 \$	2019 \$
HAYPOINT TRUST			
INCOME			
Grants received			7,273
LESS EXPENDITURE			
Activities		1,799	2,979
NAIDOC		2,495	
		4,294	2,979
		(4,294)	4,294
NET OPERATING PROFIT (LOSS)		(4,294)	4,294
SURPLUS/(DEFICIT)		(4,294)	4,294
Surplus/(Deficit) Balance at 1 July 2019		4,294	
Surplus/(Deficit) Balance at 30 June 2020			4,294

	Note	2020 \$	2019 \$
DEPARTMENT OF PRIME MINISTER AND CABINET - NAIDOC WEE	K GRANT		
INCOME			
Grants received			1,500
LESS EXPENDITURE			
NAIDOC	_	1,500	
		1,500	-
		(1,500)	1,500
NET OPERATING PROFIT (LOSS)	_	(1,500)	1,500
SURPLUS/(DEFICIT)		(1,500)	1,500
Surplus/(Deficit) Balance at 1 July 2019		1,500	<u>-</u>
Surplus/(Deficit) Balance at 30 June 2020	_	<u>-</u>	1,500

No	ote	2020 \$	2019 \$
QUEENSLAND ABORIGINAL AND ISLANDER HEALTH COUNCIL - SEX	KUAL H	EALTH	
INCOME			
Grants received		<u> </u>	90,000
LESS EXPENDITURE			
Activities		1,508	1,192
Client support		62	-
Printing and stationery		472	1,245
Staff and board training and welfare		-	1,046
Superannuation contributions		2,040	4,627
Telephone		1,112	864
Travelling expenses		-	3,121
Travel allowance		-	2,532
Wages including leave provisions		21,473	48,706
		26,667	63,333
		(26,667)	26,667
NET OPERATING PROFIT (LOSS)		(26,667)	26,667
SURPLUS/(DEFICIT)		(26,667)	26,667
Surplus/(Deficit) Balance at 1 July 2019		26,667	
Surplus/(Deficit) Balance at 30 June 2020		<u> </u>	26,667

	Note	2020 \$	2019 \$
ONE DISEASE - HEALTHY SKIN			
INCOME			
Sundry income			5,000
LESS EXPENDITURE			
Activities Printing and stationery		-	4,500 500
Filling and Stationery			
			5,000
NET OPERATING PROFIT			-
SURPLUS/(DEFICIT)		-	-
Surplus/(Deficit) Balance at 1 July 2019			
Surplus/(Deficit) Balance at 30 June 2020			

	Note	2020 \$	2019 \$
NATIONAL ABORIGINAL COMMUNITY CONTROLLED HEALT	H ORGANISAT	ION - COVID-19	
INCOME			
Grants received	_	80,000	
LESS EXPENDITURE			
Clinic supplies		5,180	-
Computer expenses		18,735	-
Motor vehicle expenses		7,262	-
Superannuation contributions		3,719	-
Travelling expenses		5,960	-
Wages including leave provisions	_	39,144	
		80,000	-
		-	-
NET OPERATING PROFIT	_		-
SURPLUS/(DEFICIT)		-	-
Surplus/(Deficit) Balance at 1 July 2019	_		
Surplus/(Deficit) Balance at 30 June 2020	_	<u> </u>	

	Note	2020 \$	2019 \$
JAMES COOK UNIVERSITY			
INCOME			
Grants received		11,905	
LESS EXPENDITURE			
Computer expenses		11,905	
		11,905	
		-	-
NET OPERATING PROFIT		-	
SURPLUS/(DEFICIT)		-	-
Surplus/(Deficit) Balance at 1 July 2019			<u>-</u>
Surplus/(Deficit) Balance at 30 June 2020			

	Note	2020 \$	2019 \$
DEPARTMENT OF SOCIAL SERVICES - BOOSTING THE LOCAL O	CARE WOR	KFORCE PROGRA	М
INCOME			
Grants received	_	20,000	
LESS EXPENDITURE Accreditation Auditor's remuneration Computer expenses Staff and board training and welfare	_	3,419 10,198 1,070 1,020 15,707	- - - -
NET ODER ATING PROFIT	_	4,293	
NET OPERATING PROFIT	=	4,293	<u>-</u>
SURPLUS/(DEFICIT)		4,293	-
Surplus/(Deficit) Balance at 1 July 2019	_	<u> </u>	
Surplus/(Deficit) Balance at 30 June 2020		4,293	-

	Note	2020 \$	2019 \$			
QUEENSLAND ABORIGINAL AND ISLANDER HEALTH COUNCIL - COVID-19						
INCOME						
Grants received	_	50,000				
LESS EXPENDITURE						
Computer expenses Telephone		29,651 20,349	-			
relephone	_	50,000				
	_	-				
NET OPERATING PROFIT	_ _	-				
SURPLUS/(DEFICIT)		-	-			
Surplus/(Deficit) Balance at 1 July 2019	_					
Surplus/(Deficit) Balance at 30 June 2020	_					

	Note	2020 \$	2019 \$
MANAGED INVESTMENTS			
INCOME			
Dividends received Interest received		14,180 12,931 27,111	26,394 26,394
LESS EXPENDITURE Impairment of managed investments Investment expenses Contribution to a different division		50,900 1,899 - 52,799	- - 26,394 26,394
	•	(25,688)	26,394
NET OPERATING PROFIT (LOSS)	•	(25,688)	
SURPLUS/(DEFICIT)	•	(25,688)	-
Surplus/(Deficit) Balance at 1 July 2019		<u>-</u>	
Surplus/(Deficit) Balance at 30 June 2020	:	(25,688)	

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