

Live Longer Stronger

2022–2023 Annual Report



AH&MRC
Aboriginal Health & Medical
Research Council of NSW

Acknowledgement of Country

The Aboriginal Health & Medical Research Council (AH&MRC) offices are located in Sydney CBD and Little Bay New South Wales (NSW). We acknowledge the Bidjigal and Gadigal Clans who traditionally occupy the lands along Sydney CBD and Sydney Coast, and pay our respects to Elders past, present and emerging.

Dedications

This report is dedicated to the staff working in our Aboriginal Community Controlled Health Organisations (ACCHOs) across NSW. Your commitment to improving the health and wellness of First Nations people is unrivalled. Thank you for working on the frontlines of the COVID-19 pandemic, and for keeping our communities safe.

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Acronyms

ACCHC	Aboriginal Community Controlled Health Committee
ACCHO	Aboriginal Community Controlled Health Organisation
ACCHRS	Aboriginal Community Controlled Health Related Service
ACDAN	Aboriginal Corporations Drug and Alcohol Networks
ADARRN	Aboriginal Drug and Alcohol Residential Rehab Network
AES	Aboriginal Employment Strategy
ACI	Agency of Clinical Innovation
AH&MRC	Aboriginal Health and Medical Research Council
AHPRA	Australian Health Practitioner Regulatory Authority
AHRC	Aboriginal Health Resource Co-operative
AHS	Aboriginal Health Service
AHW	Aboriginal Healthcare Worker
AMS	Aboriginal Medical Service
AOD	Alcohol and Other Drugs
APRA	Australian Prudential Regulation Authority
ATSILS	Aboriginal and Torres Strait Islander Legal Service
BACR	Building on Aboriginal Communities Resilience
BBV	Blood Borne Viruses
CAPO	Coalition of Aboriginal Peak Organisations
CCC	Culture Care Connect
CEO	Chief Executive Officer
CQI	Continuous Quality Improvement
CTG	Close The Gap
ENTs	Ear, Nose and Throat
ESTER	Excellence in Smoking Cessation Training, Education and Resources
FARM	Finance, Audit & Risk Management
GP	General Practitioner
HDK	Healthy Deadly Kids

HETI	Health Education and Training Institute
HREC	Human Research Ethics Committee
IAHA	Indigenous Allied Health Australia
IHWT	Indigenous Health Workforce Traineeship
LiLAC	Listen and Learning in Aboriginal Children
LHD	Local Health District
MBS	Medical Benefits Scheme
MH&AOD	Mental Health and Alcohol & Other Drugs
MHR	My Health Record
NAATSIHWP	National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners
NACCHO	National Aboriginal Community Controlled Health Organisation
NADA	Network of Alcohol and other Drugs Agencies
NAIDOC	National Aborigines and Islanders Day Observance Committee
NDIS	National Disability Insurance Scheme
NEGATSIEH	National Expert Group in Aboriginal and Torres Strait Islander Eye Health
NGO's	Non-Government Organisation
NH&MRC	National Health and Medical Research Council
NIAA	National Indigenous Australians Agency
NSW	New South Wales
NSWALC	New South Wales Aboriginal Land Council
OM	Otitis Media
PHN	Primary Health Network
PIMS	Patient Information Management System
PPE	Personal Protective Equipment
RACGP	Royal Australian College of General Practitioners
RDN	Rural Doctors Network
RTO	Registered Training Organisation
SEWB	Social and Emotional Wellbeing
STI	Sexually Transmitted Infections
VPD	Vaccine Preventable Diseases

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Section 1

Our Organisation

About this report

This Annual Report provides detailed information on who we are, how we have supported our Member Services to deliver high quality health care, and how we have improved health outcomes of Aboriginal people in NSW.

While the impacts of the COVID-19 pandemic peaked in 2021 in Australia, this report celebrates our achievements across each of the AH&MRC's business divisions and illustrates how we've been able to continue our important work despite such a disruptive and challenging year.

Our audience

The Annual Report is a useful publication for the following groups:

- ✦ Our Member Services who continue to work and improve the health and wellbeing of Aboriginal people in NSW.
- ✦ Our funding bodies including National Aboriginal Community Controlled Health Organisation (NACCHO), and State and Federal governments who provided funding and grants this year.
- ✦ Our industry partners who collaborate to develop and implement evidence-based health programs and promotions.
- ✦ AH&MRC staff who are committed to strengthening the Aboriginal Community Controlled Health Sector.
- ✦ Members of the general public who want to know who we are and learn about the social impact of the work we do.
- ✦ Policy makers who want to learn more about Closing the Gap (CTG) and our policy priority areas.



Theme of this year's report

The theme for this year is 'Live, Longer, Stronger,' symbolising the path laid out in AH&MRC's direction for the future in all areas of health and education. This theme encapsulates AH&MRC's commitment to maintaining excellence in its practices and staying attuned to the evolving landscape, by tackling a comprehensive array of health concerns and enhancing the wellbeing of Aboriginal people over extended lifespans. AH&MRC will persist in setting a precedent by upholding a standard that mandates all our health collaborations, personnel, and governmental entities to acknowledge and honor the abundant cultural legacy and variations within our Aboriginal communities in NSW.

About AH&MRC

The AH&MRC is the voice on Aboriginal Health and peak body representing ACCHOs in NSW that play a vital role in addressing the needs of Aboriginal people and improving Aboriginal health outcomes.

We support 49 ACCHOs to deliver culturally safe, high-quality primary health care services to Aboriginal communities across NSW.

In partnership with Aboriginal and non-Aboriginal health organisations at a local, state and national level, we address the social determinants of health and wellbeing for Aboriginal people. We work to strengthen the ACCHO workforce and ensure Aboriginal people are involved in the decision-making and delivery of health services.



Left: First Aboriginal Medical Service Redfern 1971

Our history

The AH&MRC, formerly the Aboriginal Health Resource Co-op (AHRC), was established in 1985 following a recommendation of the Brereton Report by the NSW Aboriginal Task Force on Aboriginal Health in 1982-83.

The Report recognised Aboriginal Community control as a crucial element in laying the foundation for a better standard of health care for Aboriginal people. The role of the AH&MRC is to advocate, advise and support ACCHOs in administering and improving holistic health outcomes for Aboriginal Communities in NSW.

Since the first ACCHO was established in Redfern in 1971, there are now more than 140 ACCHOs across Australia.



Our purpose

The AH&MRC works for its Member Services across NSW to ensure access to an adequately resourced and skilled workforce who can provide high quality, comprehensive primary health care services for Aboriginal Communities.



Our vision

That ACCHOs are sustainable, driving holistic and culturally strong approaches to addressing health inequities for Aboriginal people in NSW.



Our values

Our fundamental values are unity, loyalty, inclusion, and respect. We provide professional development opportunities for staff through career planning sessions and encourage a supportive work culture. These values reflect our commitment to strengthen Indigenous employment opportunities and extend further professional support to our Member Services.

Our Member Services

Member services

 49

2022 **Members**

 48

2021 **Members**

Member service regions

15

Northern
NSW

8

Metro
NSW

11

Southern
NSW

15

Western
NSW

ACCHOs are leading the way to deliver high quality, culturally safe services to Aboriginal communities.

The Constitution and Regional Model was endorsed at the 2019 Annual General Meeting and remains the same. This consolidated twelve Membership regions to four regions. Two Directors for each region were elected to represent Member Services as part of the new Regional Model.

The four Membership regions in NSW are:

- + Metropolitan region
- + Northern region
- + Southern region
- + Western region

Full membership (ACCHOs)

Our 49 Member Services are guided by Aboriginal communities to deliver comprehensive health care services. ACCHOs are non-profit organisations that:

- + Provide holistic and culturally appropriate primary health care and Aboriginal health related services to their communities.
- + Are governed by an Aboriginal board of management elected by their local Aboriginal community.

Associate membership

Associate Members are Aboriginal Community Controlled Health Committees (ACCHC) or Aboriginal Community Controlled Health Related Services (ACCHRS) who are led by Aboriginal communities to deliver comprehensive and culturally appropriate health related services.

- + **ACCHC:** A non-profit incorporated Aboriginal Community Controlled Organisation operating in the state which is elected and governed by a local Aboriginal community with the aim to establish an ACCHO. *There are currently no ACCHC Associate Members.*
- + **ACCHRS:** A non-profit incorporated Aboriginal Community Controlled Organisation that specialises in Aboriginal health related services and is:
 - Committed to the definition of Aboriginal holistic health.
 - Is elected and governed by a local Aboriginal community.
 - Operates an Aboriginal community multi-purpose centre, health post or clinic in association with, or receives satellite services through, an ACCHO such as Link-Up or Ngaimpe Aboriginal Corporation – The Glen Centre.

Membership benefits

The AH&MRC provides support, training and services to ensure Member Services are able to deliver comprehensive health care to their communities. The AH&MRC offers support in the following areas:

Governance and management

The AH&MRC provides regular governance training to its Member Services. We provide support for Member Services in understanding the Acts, the Rule Books and Constitutions, the sequence of a board meeting, financial report reading and interpretation.

Strategic advice and support

The AH&MRC assists our Member Services with their strategic plans and provides business support. The AH&MRC identifies grant and funding opportunities and assists in applications. We also assist in writing policy submissions and advocating for our Member Services to key ministers and stakeholders.

CQI

The AH&MRC has a dedicated Service Performance and Quality Team to assist with a Member Service's clinical governance and Medicare claims. We can also assist in data cleansing of the Patient Information Management Systems (PIMS).

Education and workforce

AH&MRC's Registered Training Organisation (RTO) provides culturally competent training to increase the skills of our Member Services workforce. Our RTO courses are Nationally Accredited and AHPRA Accredited.

Communication and engagement

The AH&MRC assists with communications and marketing activities including advertising Member Services job opportunities, programs and services, as well as creating culturally competent resources and communications assets that are relevant and engaging for Aboriginal communities.

Health and Public Health programs

The AH&MRC have dedicated Health and Public Health departments who assist Member Services with health and education resources. The AH&MRC Health and Public Health departments have regular meetings with the NSW Ministry of Health and have regular communications with our Member Services through fortnightly teleconferences, webinars and on-site visits in conjunction with NSW Ministry of Health and the Centre for Aboriginal Health.

Networking opportunities

In partnership with the Royal Australian College of General Practitioners (RACGP), the AH&MRC convenes a General Practitioner (GP) Advisory Committee. The GP Advisory Committee brings together GPs and practitioners to network and share knowledge. The AH&MRC also hosts an Executive Assistant (EA) network for EAs from across the sector to share skills and experience.

New logo

The artwork for the new AH&MRC logo was created by Kamilaroi woman Rhonda Sampson.

After careful deliberation, the current logo needed to be amended due to the change in regions and sub-regions that the members approved at the 2019 AGM. The current logo does not mention or have a connection to four regions.

The new logo centres around AH&MRC as the middle unit and we represent a notion of gathering or meeting place. As the regions have all been divided into four, the logo shows that the eight sub-regions are now converted into four via the outer circle.



Strategic plan for 2022 – 2025

The Strategic Plan is being developed by the Board of AH&MRC of NSW in collaboration with the AH&MRC staff, Members, and key stakeholders.

The new vision and modelling will enable **Our People to Live Stronger and Longer.**

AH&MRC's Work

AH&MRC's work will be informed by research and best practices and remain relevant.

Our People

Refers to AH&MRC staff, our Aboriginal Members, Associate Members, their staff, and the communities they serve.

Live Stronger

Refers to having the social determinants of health addressed and Aboriginal culture respected.

Live Longer

The quality and length of life continues to grow.



Membership list

Metropolitan region

- 1 Aboriginal Medical Service Co-Operative Ltd Redfern
- 2 Awabakal Newcastle Aboriginal Co-Operative Ltd
- 3 Link-Up NSW
- 4 Marrin Weejali Aboriginal Corporation
- 5 The Glen Centre (Ngaimpe Aboriginal Corporation)
- 6 Tharawal Aboriginal Corporation
- 7 Ungooroo Aboriginal Corporation
- 8 Yerin Eleanor Duncan Aboriginal Health Centre

Southern region

- 9 Albury Wodonga Aboriginal Health Service Inc.
- 10 Brungle Aboriginal Health Service
- 11 Cummeragunja Housing & Development Aboriginal Corporation – Viney Morgan Clinic
- 12 Griffith Aboriginal Medical Service Inc.
- 13 Illawarra Aboriginal Medical Service Aboriginal Corporation
- 14 Katungul Aboriginal Corporation Regional Health & Community Services
- 15 Murrin Bridge Aboriginal Health Service Inc.
- 16 Riverina Medical & Dental Aboriginal Corporation
- 17 South Coast Medical Service Aboriginal Corporation
- 18 The Oolong Aboriginal Corporation
- 19 Waminda – South Coast Women’s Health & Welfare Aboriginal Corporation

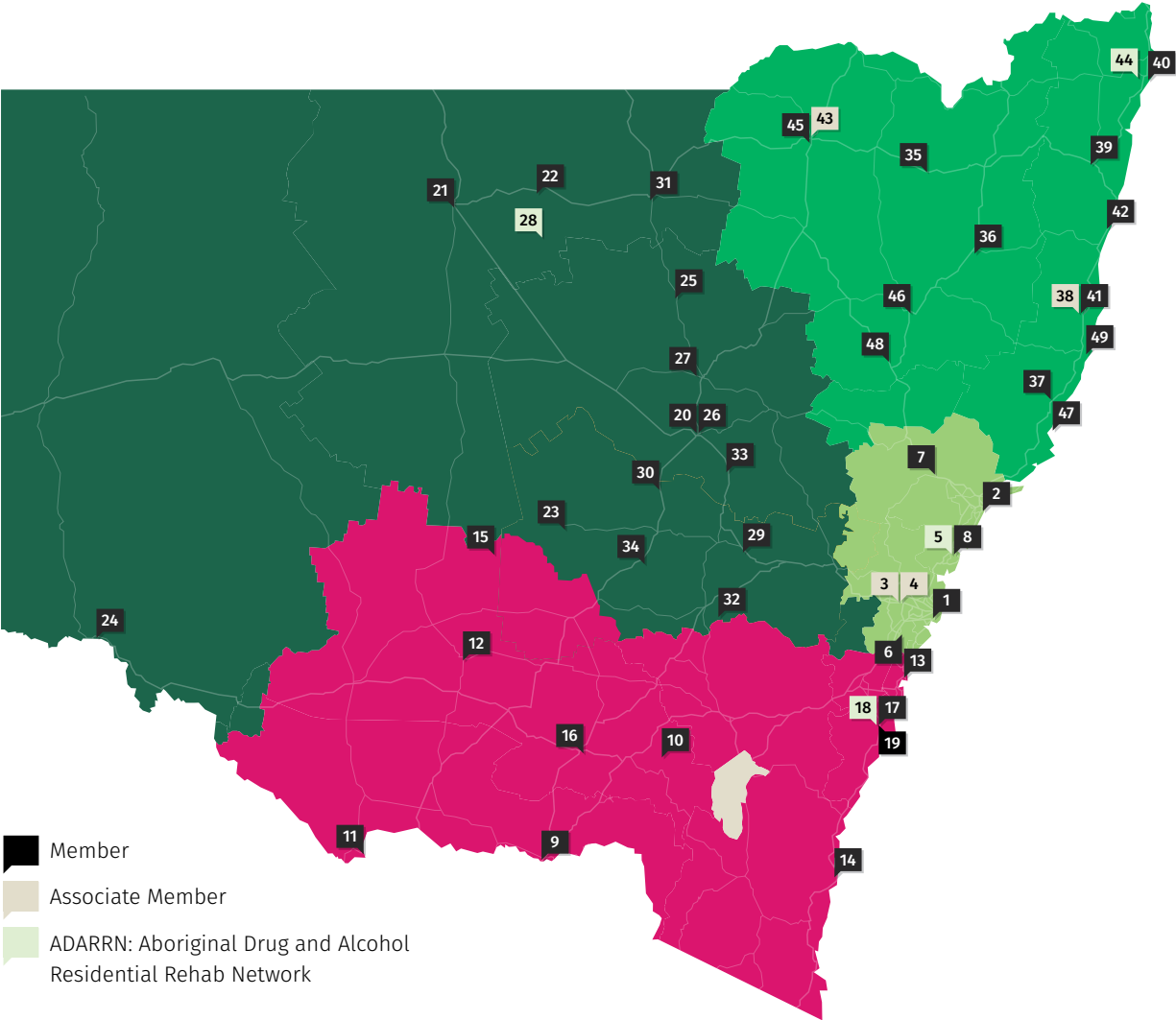
Western region

- 20 Bila Muuji Aboriginal Corporation Health Service
- 21 Bourke Aboriginal Health Service Ltd
- 22 Brewarrina Aboriginal Medical Service
- 23 Condobolin Aboriginal Health Service Ltd
- 24 Coomealla Health Aboriginal Corporation
- 25 Coonamble Aboriginal Health Service Inc.
- 26 Dubbo Aboriginal Medical Service
- 27 Gilgandra Local Aboriginal Medical Service
- 28 Orana Haven Aboriginal Corporation
- 29 Orange Aboriginal Health Service Inc.
- 30 Peak Hill Aboriginal Medical Service Inc.
- 31 Walgett Aboriginal Medical Service Limited
- 32 Weigelli Centre Aboriginal Corporation
- 33 Wellington Aboriginal Corporation Health
- 34 Yoorana-Gunya Family Healing Centre Aboriginal

Northern region

- 35 Armajun Aboriginal Health Service Inc.
- 36 Armidale Aboriginal Health Service – Pat Dixon Medical Centre
- 37 Biripi Aboriginal Corporation Medical Centre
- 38 Booroongen Djugun Aboriginal Corporation
- 39 Bulgarr Ngaru Medical Aboriginal Corporation
- 40 Bullinah Aboriginal Health Service
- 41 Durri Aboriginal Corporation Medical Service
- 42 Galambila Aboriginal Health Service Inc.
- 43 Maayu Mali Residential Rehabilitation
- 44 Namatjira Haven Drug & Alcohol Healing Centre
- 45 Pius X Aboriginal Corporation
- 46 Tamworth Aboriginal Medical Service Inc.
- 47 Tobwabba Aboriginal Medical Service Inc.
- 48 Walhallow Aboriginal Health Corporation
- 49 Werin Aboriginal Corporation Medical Clinic

Members map



Aboriginal Community Controlled Health Organisations

Community controlled, holistic primary health care	Health care professionals working together	Delivering a range of health care services
<p>ACCHOs are dedicated to deliver culturally safe, primary health care to Aboriginal people.</p> <p>For Aboriginal people, primary health is about the whole of community approach to achieve good health and wellbeing.</p>	<p>Large ACCHOs employ medical practitioners, Aboriginal health care workers and nurses. Small services rely on Aboriginal health workers and nurses for the delivery of primary health care services.</p> <p>ACCHOs are the first point of care for Aboriginal patients.</p>	<p>Health care services that are preventative and focus on health education including:</p> <ul style="list-style-type: none">+ Child and maternal health+ Oral and dental health+ 715 health checks+ Eye and ear health+ Preventative programs to quit smoking and health and wellbeing+ Social emotional and wellbeing services.



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Section 2

Our Leadership

Message from the Chairman

As COVID restrictions continue to ease, this year has marked significant milestones for the board. Firstly, I extend my gratitude and bid farewell to our former CEO, Robert Skeen.

Before delving into these accomplishments, I wish to acknowledge the enduring legacy of AH&MRC, the wisdom of Elders past and present, and our emerging leaders. Their foundational contributions have paved the way for AH&MRC's achievements this financial year. I also acknowledge the Executives and all staff of AH&MRC, Company Secretary Charlie Coyle, Deputy Chairperson Kane Ellis, Directors Lyn Kilby, Tracy Singleton, Kenneth Knox, Stacy Parry, Lindsay Hardy, Payden Samuelsson, Angie Stewart, Summer Hunt and Aunty Val Keed.

Charting the strategic path

The AH&MRC Board of Directors has proactively steered AH&MRC towards a transformative path. This new strategic plan emphasizes education and training, aligning with the expansion of our RTO Training center (AHMRC Training). This expansion equips our Aboriginal workforce and Members with the necessary resources for a stronger and longer life. The formulation of this vision and strategic plan was a collective endeavor involving all Member Services across NSW.

Board highlights

Through the Finance, Audit & Risk Management Committee (FARM), the AH&MRC Board of Directors has collaborated closely with our CEO and the Director of Finance & Corporate Services, ensuring alignment with funding bodies and agreements. This stewardship has resulted in delivering a modest surplus for the Financial Year 2022/2023, maintaining a robust balance sheet. Our involvement in the budgeting process for the same year is transparent and tailored to current AH&MRC operations.

Advancing Closing the Gap

On behalf of the AH&MRC Board of Directors, I commend the efforts of Robert Skeen, our former CEO, and the Policy team for their active participation in numerous NSW Government meetings and consultations. Their contributions have fostered increased engagement with Member Services in parliamentary inquiries, policy submissions, and participation in NSW Closing the Gap meetings.

The outcomes of these engagements have culminated in AH&MRC's meaningful contribution to the development of the Jurisdictional Implementation Plan on Closing the Gap. This reflects our commitment to effecting positive change for Aboriginal and Torres Strait Islander communities across NSW.



Phillip Naden
Chairperson of the Board

Acknowledgements

I would like to thank our key stakeholders: NACCHO, CAPO, NSW Health, the Ministry of Health and the Department of Health for their ongoing support of AH&MRC, its Membership and Aboriginal communities across NSW.

I would like to acknowledge the staff of the AH&MRC for their ongoing support during these challenging times. Thank you for ensuring Members Services are kept up to date with the latest training, COVID-19 updates, as well as provision of PPE stock and supplies.

The Board of Directors and I look forward to the 2023-2024 financial year where we will continue to serve Aboriginal communities in NSW, and ensure that health care is culturally safe, accessible and tailored to the needs of our communities.

Message from the acting CEO

Welcome to the AH&MRC's Annual Report for the 2022-2023 period.

Throughout this financial year, AH&MRC has maintained a strong collaboration with our Member Services, ensuring culturally sensitive approaches in the design and delivery of healthcare services across NSW. Our efforts have been dedicated to fostering growth and development in key areas of our business, all while respecting the diverse needs of different communities.

As we reflect on this year, we bid farewell to former CEO Robert Skeen in May 2023, continuing the mission and vision set forth by our organisation.

This year, our main focus has been developing our strategic plans for 2022-2025. We are actively strengthening partnerships with health, education, and government stakeholders at both federal and NSW levels. ACCHOs play a vital role in our community, and as an organisation, we understand the importance of working together to enhance health and education in every aspect.

To reach these objectives, all our departments have worked diligently to promote growth and ensure we have the necessary staff and resources to fulfill our commitments.

Rebranding efforts

In our pursuit of representation and recognition, we have unveiled a fresh logo that encapsulates our areas of business and the regions we serve. Our branding has been thoughtfully aligned with the focal points of our work within the community.

Advancements in the health sector

Recognising gaps in our health resources, we have restructured our approach to facilitate better support for various health sectors. This involved regional divisions, where engagement coordinators collaborate and leverage each other's expertise. As COVID-19 restrictions eased, our team enthusiastically reconnected with the community through forums, workshops, and conferences, delivering informative sessions with specialist speakers to promote community wellbeing and knowledge.

Policy advocacy and public health

Our policy team's expansion has enabled increased consultation with members, allowing us to represent ACCHOs within NSW more effectively in parliamentary inquiries, policy submissions, and NSW Closing the Gap meetings. This commitment garnered funding from the

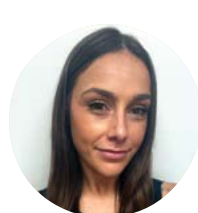
NSW Government in the 2022-23 Budget. Our Public Health Team, having expanded its scope and expertise, regularly conducts forums and webinars, addressing community needs. Additionally, six new resources have been developed in response to demand.

Ethics, research and quality improvement

Our Research Ethics Committee's crucial work ensures research is carried out with integrity and practicality for our communities. The inaugural Ethics Forum was successfully conducted, fostering important discussions. The Service Performance and Quality Team has closely collaborated with Member Services to enhance continuous quality improvement efforts, culminating in a highly attended CQI Forum.

Education and training advancements

AH&MRC Training was officially launched this year, marked by streamlined processes, system upgrades, and staff expansion. Key partnerships were established to bolster enrolments, student placements, and traineeships, contributing to our ongoing growth and success.



Shana Quayle
AH&MRC Acting CEO

Acknowledgements

The AH&MRC has expanded its capacity this year to support ACCHO Sector and Aboriginal communities in NSW. We've achieved significant milestones in the past year, and I'd like to commend all AH&MRC and Member Service staff for their dedication. Special thanks to our stakeholders and partners, including NACCHO, NIAA, Department of Health & Ageing, NSW Ministry of Health, and Centre for Aboriginal Health, for their funding and support,

I'd also like to express gratitude to AH&MRC's Chairperson, Phillip Naden, and the Board of Directors for their unwavering support of our staff and our work. We're proud of our accomplishments this year and anticipate more milestones in the upcoming year. Our commitment to empowering Our People to Live Stronger and Live Longer remains unwavering, and we extend heartfelt thanks to all who have joined us on this journey.

AH&MRC Board of Directors

Phillip Naden
Chair



Phil Naden, CEO of Dubbo, Gilgandra, and Coonamble Aboriginal Health Services, oversees strategic planning, resources, healthcare delivery, and quality standards while representing the organisation. With Gamilaroi and Wiradjuri heritage, he boasts a rich career, including CEO roles in ATSILS, Bila Muuji Regional Consortia, and a 2019 independent candidacy for the Barwon Electorate. Phil holds qualifications in Business and Management and is a Justice of the Peace. He recently completed a Masters in Business and holds leadership roles in key Aboriginal health and community organisations, including Chairperson of NSW AH&MRC and Director on NACCHO, Dreamtime Housing, and the Justice Reinvestment Project.

Kane Ellis
Deputy Chair



Kane Ellis is proud of his Aboriginal heritage and has strong connections to his land and people. Kane's father is a Jingili man from the upper Barkley region in the Northern Territory, ranging from Tennant Creek to Borroloola. His mother's country is the Darwin area, the Larrakia people.

Kane is currently the CEO of the Illawarra Aboriginal Medical Service. He commenced his career as an Aboriginal Health Worker at the Danila Dilba Health Service in 1998 and is passionate about improving the lives of Aboriginal people.

Lynette Kilby



Lynette Kilby is a proud Wiradjuri woman from Griffith and raised her five children on a mission. Lynette is currently the Director of the Griffith Aboriginal Medical Service. Her work is community minded, advocating for Aboriginal people across health, legal, aged care, childcare and education sectors.

Lynette has lived experience of the hardships many Aboriginal and Torres Strait Islander people continue to face. Lynette was employed by the Aboriginal Legal Service NSW/ACT Limited, a position she held for over 20 years, until April 2020.

Payden Samuelsson



A Murawari man, hailing from far west NSW and raised in both Far West and North West NSW, he embarked on his ACCHO sector journey in 2011 as a Trainee Aboriginal Health Worker at Bourke Aboriginal Health Service. Presently, he proudly serves as the CEO of Bullinah Aboriginal Health Service on Bundjalung Country, a position he has held since 2016.

In his earlier ACCHO career, he focused on clinical health roles but quickly expanded into program development, health service coordination, community development, social and emotional wellbeing (SEWB) programs, school-based clinical and SEWB programs, Haemodialysis clinics, and outreach services.

He pursued a practice management diploma and a Bachelor of Business Management, and contributes his expertise through advisory work with AHPRA and the ACT human rights commission and active involvement in ACCHO sector-related committees.

Angie Stewart



Angie is a Biripi woman, raised in Guruk (Port Macquarie) near the northern boundary of Biripi County. Angie has 15 years senior management experience in the non-profit sector, predominantly focussed on business and service development.

Angie commenced with Biripi Aboriginal Corporation Medical Centre in 2019 in a Program Coordination position, before moving to a Program Management position in 2020, followed by Health Service & Program Manager in 2021 and Chief Executive Officer in 2022.

Angie is passionate about improving health and wellbeing outcomes for First Nations people by addressing the broader social determinants of health in the delivery of health service for our people.

Summer Hunt



Summer Hunt is a proud Barkindji woman. She is passionate about Aboriginal Health Care/ Social Emotional Wellbeing and is the Chief Executive Officer of Coomealla Health Aboriginal Corporation, an Aboriginal Community Controlled Organisation.

During Summer's time at Coomealla Health Aboriginal Corporation, Summer has achieved many milestones for her local community, with a continuous vision of building a strong healthy community. In recent years Summer has opened a new Health Clinic in Wentworth NSW, and last year celebrated 30 years of Coomealla Health Aboriginal Corporation.

Stacy Parry



Stacy Parry is a Gomeroi woman and educator. Stacy has been a teacher for over 17 years for the Department of Education and is a Board Member of Yerin Eleanor Duncan. Yerin is the supporting organisation for the Eleanor Duncan Aboriginal Health Centre.

Lindsay Hardy



Lindsay is a Bidjara & Gunggari Murrumbidgee man from Central Queensland, with over 30 years' experience in engagement and collaborations with community, government, NGO, and private sector organisations which has always been the significant determinant in influencing his direction to help improve opportunities for his people.

Lindsay is the current Deputy Chair of Yerin Eleanor Duncan Aboriginal Health Service presently works as the Indigenous Employment Partner/Manager Student Services for the Wollotuka Institute of education and Research to help build a diverse and inclusive workforce that represents our Aboriginal and Torres Strait students and communities.

Departed

Tracy Singleton	20 August 2022
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Kenneth Kox	9 January 2023
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Valda Keed	16 March 2023
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Board meeting dates

Board meeting 1	2 August 2022
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Board meeting 2	18 August 2022
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2023 Annual General Meeting	20 September 2022
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Board meeting 3	15 November 2022
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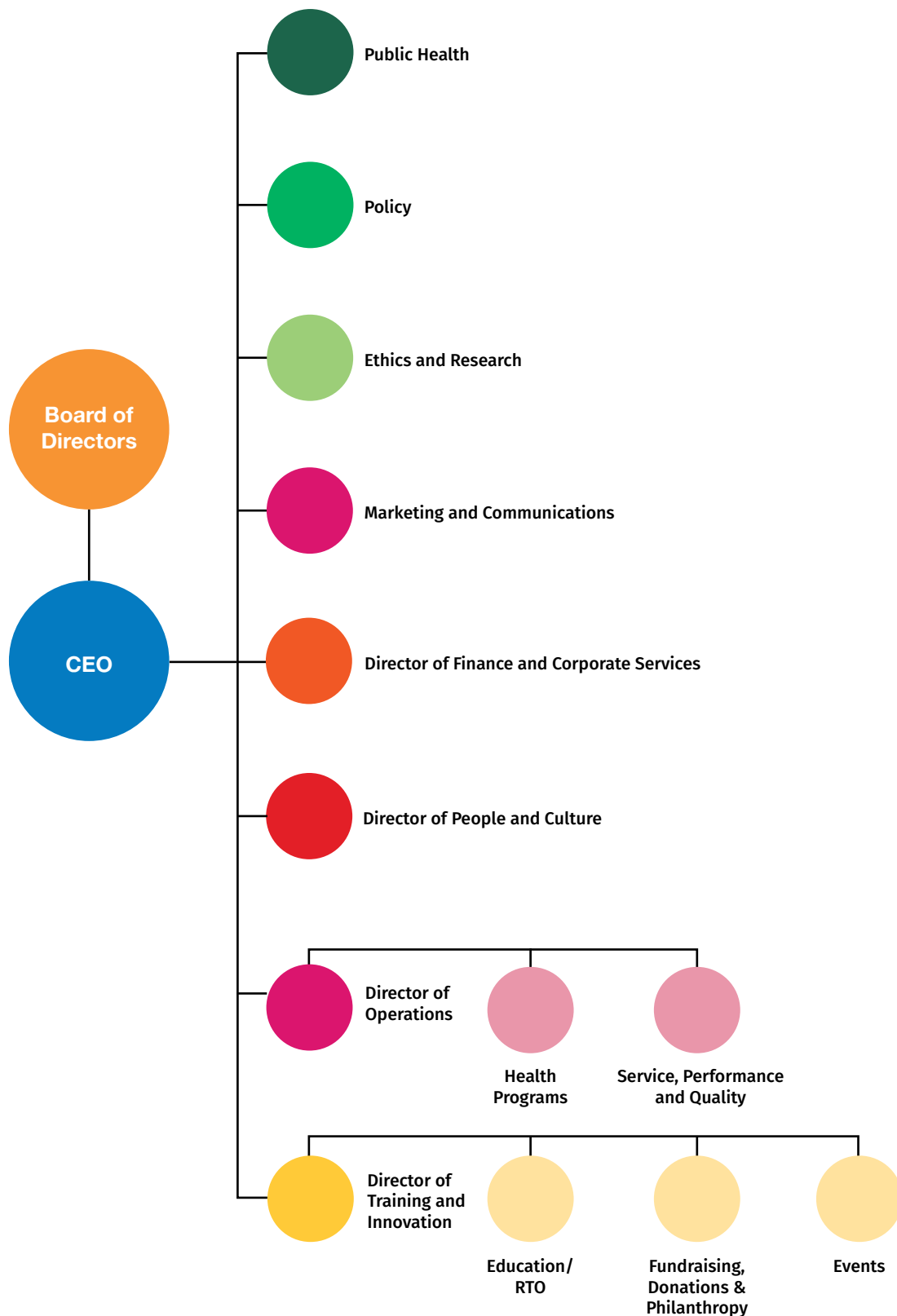
Board meeting 4	13 December 2022
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Board meeting 5	13 March 2023
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Board meeting 6	15 June 2023
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Board meeting 7	23 June 2023
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AH&MRC organisational structure



2022–2023 year in review

Building our profile



179K Website visits

+101k

78k last year



3,752 Twitter followers

-1

3,753 last year



2,497 Instagram followers

+365

2,132 last year



3,236 Facebook followers

+233

3,003 last year



1,839 LinkedIn followers

+805

1,034 last year

AH&MRC Training

130

Students enrolled with 65% completion rate

Grants, donations and sponsorship

646K

Health programs team



4 Community Health expos



7 Forums/Training/Conferences

1k+

participants in workforce training

Ethics, policy and research



474 new applications, and **132** approved



18 HREC Members, 2022: 18



First Ethics Forum: **174** attendees

Service Performance and Quality team

7

member onsite training



4 accreditation workshops



CQI Forum: 30 Member Services, the event saw 65 attendees

Policy



200

Indigenous Health Summit attendees



6 Publications and Submissions

Public Health



30

Deadly Doctor Forum attendees



6 Publications and Submissions

2022–2023 highlights

The AH&MRC's commitment to enhancing the health and wellbeing of Aboriginal communities in NSW remained steadfast this year. Our comprehensive approach, encompassing health promotion, education, training, advocacy, and business support, continues to yield ongoing benefits for our valued members.

Our organisation

In the 2022-2023 fiscal year, AH&MRC underwent a restructure to better serve our Member Services and communities. Alongside this, new branding and guidelines were established to create heightened awareness.

Health programs

Our Health Programs team comprises 9 distinct health units, now collectively referred to as the Member Engagement Unit, which will feature 2-3 Member Engagement Coordinators assigned to each region. This unit actively pursues the acquisition and dissemination of best practice knowledge, while working closely with Member Services to execute impactful activities. Key areas of focus include sector engagement, resource development, program enhancement, and information sharing and training.

Throughout the year, the team organised 4 Community Health expos, conducted 16 member site visits, hosted 7 forums, training sessions and conferences, and provided training to over 1,000 individuals. Notably, 8 Aboriginal Mental Health First Aid Training sessions were conducted, involving over 100 participants. Additionally, 12,000 condoms were distributed across 18 Member Services, and \$160,000 was allocated to 40 Member Services for nicotine replacement therapy.

AH&MRC has rebranded the 'Healthy Deadly Kids' initiative to align with our strategic vision. This program is now known as the 'Live, Longer, Stronger Kids Program,' and it integrates into the broader Live, Longer, Stronger program with a specific focus on children. This program will official launch in 2024.

Supporting member services

The Service Performance and Quality team, now referred to as Compliance, is dedicated to enhancing Member Services' capabilities through programs and training. They conducted 7 site training visits and organised a CQI State Forum with participation from 30 Member Services, hosting 65 attendees. As part of an ongoing initiative, the team assisted 4 Member Services with their RACGP Accreditation.

Upskilling our ACCHO workforce

AH&MRC Training saw remarkable progress this year, with the NSW Government committing \$1.365 million to AH&MRC for the building upgrade at Little Bay. The redevelopment of the department, bolstered by a skilled team of trainers and administrative staff, allowed AH&MRC Training to implement new processes and structures. A total of 130 students were enrolled, achieving a commendable completion rate of 65% which is the highest achieved thus far.

Ethics, policy, and research

A significant milestone was achieved with the inaugural Ethics Forum, the first of its kind. This event exceeded expectations, drawing 180 attendees from various universities and government departments. The positive feedback received and the high demand for more frequent events indicate the success of the forum and align with AH&MRC HREC's expansion and growth plans.

Advocating for policy reform

The Policy Team dedicated itself to advocating for policy reform on behalf of AH&MRC and Member Services. This financial year, they submitted 6 policy submissions and hosted an Indigenous Health Summit, which saw participation from 200 attendees. The summit served as a platform for comprehensive discussions on pressing sector issues and innovative solutions in line with the Closing the Gap agenda.

Public health

In alignment with the growth of the Public Health sector, AH&MRC established a dedicated division. This focus is channeled through a commitment to public health and evidence-based primary healthcare within Aboriginal Community Controlled Health Services (ACCHOs). An additional highlight was the convening of the Deadly Doctors Forum, which brought together 30 General Practitioners from ACCHOs across NSW. Additionally, the team contributed to the creation of 6 publications and resources.



Section 3

Our Business Performance

Member Engagement Unit

formerly the health programs team

4

Community Health expos

16

member site visits

7

Forums/Training/Conferences

1,000+

in workforce training

8

Aboriginal Mental Health First Aid
Training, and over 100 participants

12,000

condoms distributed to
18 Member Services

\$160,000

given to 40 Member Services for Nicotine Replacement Therapy





The Member Engagement Unit, (formerly the Health Programs Team) actively pursues the acquisition and dissemination of best practice knowledge.

This is achieved through clear direction and influence provided to members and key stakeholders. The Member Engagement Unit remains well-informed and works closely with our Member Services to execute impactful and pertinent activities, including:

- + Sector engagement
- + Resource development
- + Representation in state program area advisory & research committees
- + Policy support – Communicating sector challenges and needs to inform policy
- + RTO support – Facilitating information exchange to align RTO education with workforce requirements
- + Program enhancement – Providing funding grants and recommendations for improvements
- + Information sharing – Distributing crucial stakeholder information to keep the sector well-informed.

Simultaneously, the Member Engagement Unit focuses on various areas within the sector, covering a range of areas:

- + Chronic care
- + Sexual health
- + Alcohol and substance abuse
- + Mental health
- + National Disability Insurance Scheme (NDIS)
- + Ear and eye health
- + 715 services promotion
- + Smoking cessation
- + Suicide prevention

In June 2023, the AH&MRC Board sanctioned modifications to the structure of units, now emphasising regional alignment. The Health Programs team was redefined as the Member Engagement Unit, which will feature 2-3 Member Engagement Coordinators assigned to each region. Their primary objective will be to offer comprehensive assistance to services. This approach positions the unit optimally to route inquiries to other segments within the organisation.

Engagement with Member Services

AH&MRC has collaborated with four Member Services to organise Community Health Expos for the 2022/23 fiscal year with offering support on the day, funding, merchandise and the Health Passport printed and designed for the needs of the event. The team also conducted sixteen site visits to these Member Services.

Development of the workforce

AH&MRC has extended sponsorship to various workforce development forums, including the Aboriginal Corporations Drug and Alcohol Networks (ACDAN) Symposium and the Aboriginal Mental Health and Wellbeing Workforce Forum. Additionally, AH&MRC partnered with NACCHO to facilitate the Sexual Health Workshop in June and partnered with the Agency of

Clinical Innovation (ACI) to host this year's Chronic Conditions Conference. On December 9th, 2022, AH&MRC conducted an Ear Health Forum for the sector. In conjunction with our Public Health team, we organised the Deadly Doctors Forum on November 24th, 2022.

Strengthening the sector

In alignment with the Closing the Gap Initiatives, AH&MRC has collaborated with the NSW Government to secure increased funding for the sector. As a result, the Towards Zero Suicides Building on Aboriginal Communities Resilience (BACR) Initiative has led to funding for an additional 13 ACCHS. Through the CTG Mental Health Model of Care initiative, 12 partnerships have been funded between ACCHSs and Local Health Districts (LHDs) for the next two and a half years.





Ear health

Ear health forum

AH&MRC successfully organised the Ear Health Forum, a collaborative effort with ear health stakeholders and Member Services. The forum took place at Mercure Hotel Sydney NSW on Gadigal country, on Friday December 9th 2022. This event provided an essential platform for stakeholders within the ACCHO sector to engage in discussions surrounding critical ear health issues. It also facilitated the showcasing of available health training and equipment, as well as addressing gaps and barriers present in the field. The forum garnered significant attendance, with over 40 patrons from Member Services, stakeholders, and special guests.

The forum featured a distinguished lineup of guest speakers, including Uncle Allen Madden who delivered the Welcome to Country address. Joanne Grant, AH&MRC's Director of Operation, addressed the forum, while Nicole Turner served as the MC for the day's proceedings. The event also had the privilege of hosting Professor Kelvin Kong, an otolaryngology, head and neck surgeon. The esteemed guest speakers represented various organisations such as Rural Doctors Network, Hearing Australia First Nations Unit, Tafe NSW, Sonic Equipment, and AH&MRC Service Performance and Quality Acting Manager Richie Garcia.



Ear health training by Benchmark Group

Benchmark Group played a vital role in delivering comprehensive ear health training sessions, which included three significant components:

Ear health assessment

Conducted on June 14th 2022, this session focused on equipping attendees with the skills necessary for effective ear health assessment.

Otoscopy workshop

Taking place on March 13th 2023, this workshop highlighted the significance of otoscopy ear health screening as a tool for investigating patients' symptoms and illnesses. Attendees, including individuals from ACCHS backgrounds like RNs, AHPS, and AHWs, gained valuable insights into anatomy, physiology, otoscope use, assessment principles, and ear health screening for both adults and children.



Course in ear wax removal (irrigation)

Held on July 24th 2023, this course aimed to equip participants with the confidence and skills required to support ear wax removal (irrigation) and enhance ear health assessment. The training covered various aspects, including ear anatomy, wax management, complications of ear irrigation, and the necessary competencies for successful ear irrigation. Representatives from five ACCHS, including Gilgandra Aboriginal Medical Service, Orange Aboriginal Medical Service, Tamworth Aboriginal Medical Service, Durri Aboriginal Corporation Medical Service, and Waminda, benefited from this training.

Site visits and future planning

Throughout the year, AH&MRC conducted site visits to various ACCHS establishments, such as Griffith AMS, Albury Wodonga Aboriginal Health Service, Illawarra Aboriginal Medical Service, Dubbo Regional Aboriginal Health Service, Wellington Aboriginal Corporation Health Service, Durri Aboriginal Corporation Medical Service, Werin Aboriginal Corporation Medical Centre, and Tamworth Aboriginal Medical Service. These visits were instrumental in identifying gaps and barriers in local ear health care. Key areas of concern included access to specialists (ENTs, paediatrics and speech pathologists), availability of necessary health equipment, hearing health programs, and workforce upskilling needs.

Looking forward to 2024, discussions centered around the Ear Health National Key Performance Indicators (nKPI's). The emphasis was on enhancing access to hearing health equipment, programs, and workforce training, reflecting AH&MRC's commitment to elevating ear health care standards, fostering collaborations, and addressing challenges. These efforts aimed to ensure accessible and high-quality ear health care for Aboriginal and Torres Strait Islander communities.

Mental health

AH&MRC played a significant role in supporting the Aboriginal Mental Health and Wellbeing Workforce Forum held in Broken Hill from May 17th to 18th, 2023. Collaborating with the Far West NSW Local Health District, AH&MRC provided sponsorship for this event, including the cultural activities on the second day. The forum featured notable contributions such as an opening address delivered by AH&MRC's Program Officer for Suicide Prevention, Lachlan Madden, and a presentation



on Aboriginal Mental Health First Aid Training by Program Officer for Mental Health & Alcohol and Other Drugs, Colin McGrath. The forum attracted almost 100 participants representing ACCHS and LHD workforces.

Through the Closing the Gap initiative, AH&MRC has established a close partnership with NSW Health Leads to facilitate the implementation of the Mental Health Model Of Care initiative. This collaborative endeavor is aimed at addressing access and care transfer challenges for Aboriginal Mental Health patients across NSW, involving 12 funded partnerships.

Within its Mental Health and Alcohol & Other Drugs (MH&AOD) program, AH&MRC's Programs Officer has curated a resource register containing culturally appropriate resources tailored for the workforce.

Alcohol and other drugs

AH&MRC took an active role in sponsoring the 2023 Aboriginal Corporations Drug and Alcohol Network (ACDAN) Symposium, held in Coffs Harbour from June 6th to 8th, 2023. Members of AH&MRC's MH and AOD Team participated to highlight RTO training offerings. The symposium placed special emphasis on topics relevant to the Aboriginal Alcohol and Other Drug Workforce.

At the 2023 NADA Conference, AH&RCM participated in a panel discussion titled 'Culture at the Core of Healing.' The session, which featured representatives from NADA, regional health services, ACDAN, ADARRN, and AH&MRC, underscored the vital need to integrate culture into a client's journey, particularly for Aboriginal individuals, to maintain a connection with their cultural identity and heritage. The collective knowledge and wisdom of Aboriginal communities were highlighted as crucial for holistic healing. This session resonated with over 400 AOD workers from ACCHS, government, and NGOs who attended the forum.

Chronic Care

In a noteworthy collaboration, AH&MRC partnered with ACI's Aboriginal Chronic Conditions Network (ACCN) to host the Aboriginal Chronic Conditions Conference on June 6th-7th, 2023, at Kirribilli. Under the theme 'Aboriginal Workforce and Chronic Care Models,' the conference aimed to enrich the knowledge and capacity of the Aboriginal Health Workforce across the Aboriginal Community Controlled Health Sectors and Local Health Districts. The event included an opening address by AH&MRC, as well as presentations by Richie Garcia on Continuous Quality Improvement and Jason Webb on the significance of skilled Aboriginal Health Practitioners within the sector. This conference attracted nearly 150 in-person attendees and over 200 online participants.

AH&MRC collaborated with Dubbo Aboriginal Medical Service, Gilgandra Local Aboriginal Medical Service (GLAMS), and Coonamble Aboriginal Health Service (CAHS) to organise a series of three Community Health and Wellbeing Expos. Aligned with the AH&MRC Our Health Our Future Health Promotion campaign, these expos aimed to enhance health literacy, raise awareness of annual health checks, and foster community engagement. The expos played a pivotal role in strengthening the relationship between ACCHS and their communities, offering services ranging from health check bookings to mental health support and vaccination opportunities. Community members benefited from these expos by signing up for health checks, receiving flu or COVID-19 vaccinations, and connecting with various local health and service providers.

NDIS and aged care

Through its involvement with NACCO, AH&MRC is committed to supporting the delivery of the Elder Care Support Program to ACCHS and ACCOs in NSW. This program is designed to bolster aged care services within primary care and community health settings. AH&MRC's role includes facilitating online and non-accredited training, as well as providing access to accredited training based on the specific needs of new services.

In a bid to raise awareness and promote access to NDIS and disability support services, AH&MRC provided support to Coonamble Aboriginal Health Service to organise the Disability Support Expo on October 13th, 2022. This event brought together local and regional service providers, enabling them to directly engage with the community.

Suicide prevention

AH&MRC has taken proactive steps to provide Aboriginal Mental Health First Aid Training to member services, offering crucial support to clinicians and workers in crisis management. This training initiative has already reached eight member services in the previous financial year, with plans to expand the training to cover Youth Aboriginal Mental Health First Aid.

As part of its engagement in the Closing the Gap initiative, AH&MRC has been closely collaborating with NSW Health Leads to extend support for the Towards Zero Suicides Building on Aboriginal Communities Resilience Initiative. The extension of funding to 25 services, including 13 new ACCHS in NSW, underscores AH&MRC's commitment to this cause. AH&MRC's involvement in the initiative includes networking, workforce development initiatives, and support in implementing relevant activities.

Through its participation in NACCHO, AH&MRC is positioned to support identified ACCHS in implementing the Culture Care Connect Program (CCC), a suicide prevention and aftercare service. As part of this effort, AH&MRC has facilitated eight Aboriginal Mental Health First Aid Training sessions, benefiting over 100 participants.

Sexual health

AH&MRC teamed up with NACCHO to deliver the NSW Sexual Health Workshop, attracting 47 registrations from ACCHS across the country, with over 30 attendees present on the day. The workshop covered topics such as epidemiological evidence on syphilis outbreaks, updates on the Take Back Your Health Promotion campaign, and presentations from services actively engaged in sexual health promotion.

With a proactive approach to sexual health, AH&MRC distributed 12,000 condoms across 18 member services in the previous financial year. Additionally, the AH&MRC Doing it Right! Sexual Health Resource is being transformed into a comprehensive four-part workshop aimed at providing essential sexual education for young individuals.

In a notable development, AH&MRC has assumed the role of a Clinical Hub within the ATLAS Indigenous Primary Care Surveillance and Research Network. This network is dedicated to tracking and interpreting patterns of STI, BBV, and VPD testing and treatment within the Aboriginal and Torres Strait Islander primary care community.

Smoking cessation

Demonstrating a commitment to smoking cessation, AH&MRC allocated over \$160,000 to support 40 member services in purchasing and distributing Nicotine Replacement Therapy during the 2022/23 financial year.

AH&MRC facilitated access to smoking cessation education for member services, providing Brief Interventions in Smoking Cessation training either in person and online. During the 2022/23 financial year, this training was successfully conducted five times.

In a significant partnership, AH&MRC collaborated with the Cancer Institute NSW to develop the Excellence in Smoking Cessation Training, Education and Resources (ESTER) project. This project involves creating an online module focused on smoking and vaping cessation for health professionals. The module will be jointly hosted on NSW Health HETI and the AH&MRC RTOs website.

Your health, your future videos

In collaboration with Nathan Lyons from Kooking with a Koori, a series of videos were created to help with the promotion of 715 campaign with the brand name Your Health Your Future. A total of 11 videos were produced to provide helpful tips and explanations from all our health sectors featuring our staff. They were launched on Facebook in November, with a total 13,513 views.



Live, Longer, Stronger program

Healthy Deadly Kids



The NSW Government announced \$10.9 million in funding towards the Healthy Deadly Kids program (HDK) to enhance school attendance levels in Aboriginal communities across the state. The official announcement happened at AH&MRC Training Institute in Little Bay.

In 2019, Illawarra Aboriginal Medical Service designed and piloted this Indigenous community program as a way to promote healthy living education, aimed at primary school aged children from Early Stage 1 – Stage 3 that focuses on teaching a holistic view of health and wellbeing.

The additional funding will support partnerships between Aboriginal Community Controlled Health Services and will help AH&MRC deliver an online program and make it available to all Australian kids across all local schools.

Live, longer, stronger kids program

AH&MRC has rebranded the 'Healthy Deadly Kids' initiative to align with our strategic vision. This program is now known as the 'Live, Longer, Stronger kids program,' and it integrates into the broader Live, Longer, Stronger program with a specific focus on children.

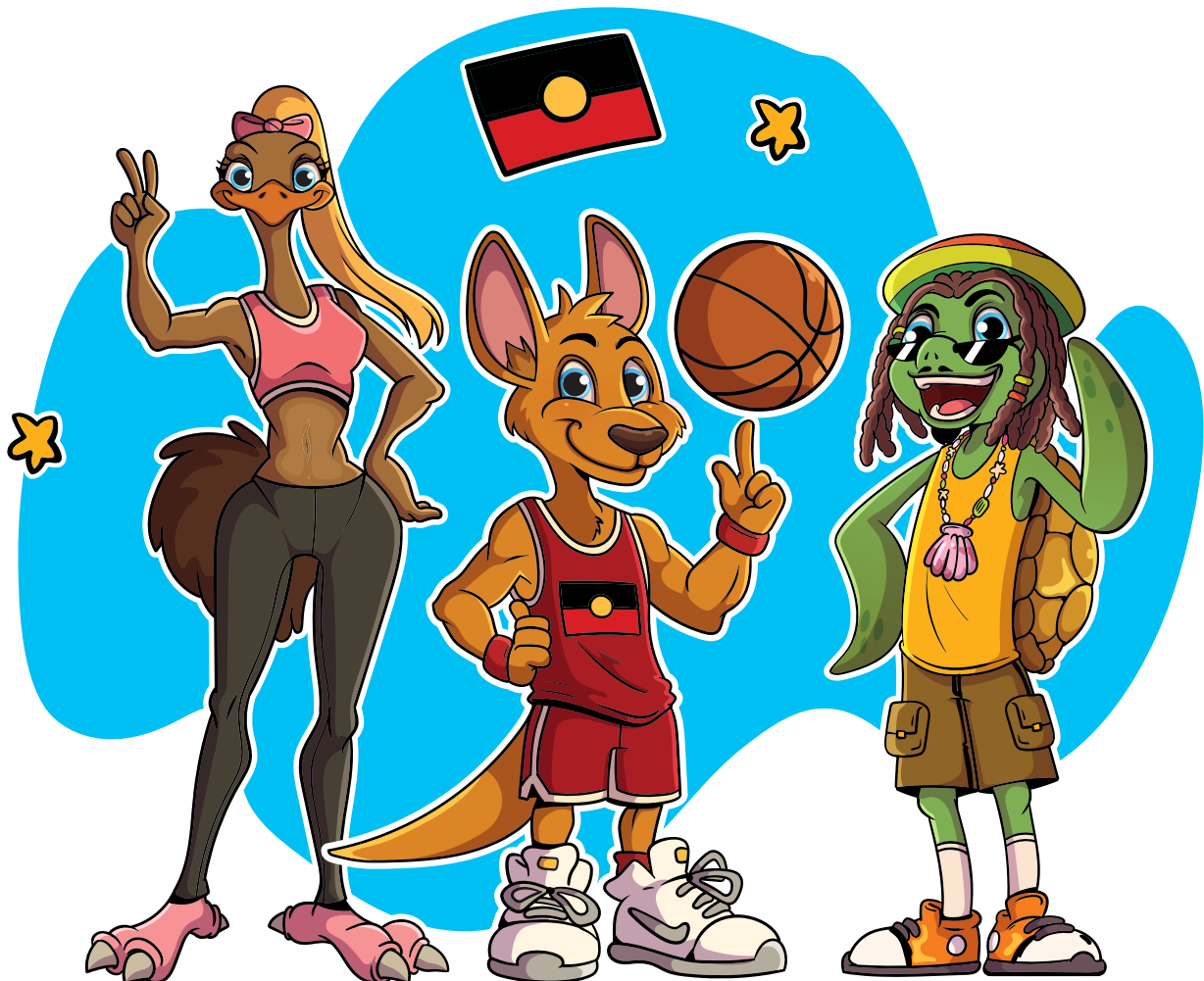
In the current year, we initiated the recruitment of 16 staff members to fill positions such as coordinators, trainees, and educators, responsible for coordinating activities across all regions. These staff members are actively engaging with communities and schools to tailor the program to local needs before its official launch in 2024.

The Live, Longer, Stronger kids program is an educational and promotional initiative tailored for primary school-aged children, emphasising health, wellbeing, and education. Aligned with the curriculum, the program is structured in stages to facilitate effective learning. Through a culturally sensitive approach, we create a safe space for children to explore various aspects of health and wellbeing.

Our goal is to empower students by providing them with knowledge and tools for informed decisions about their wellbeing. The program instills the understanding that genuine commitment to health involves mindful decision-making. The program covers key areas:

- + Nutrition
- + Physical activity
- + Mental health
- + Vaping and smoking
- + Bullying and social media
- + Healthy hygiene practices
- + Healthy and unhealthy relationships
- + Positive role models

The Live, Longer, Stronger kids program aspires to equip young individuals with the skills and mindset needed for a healthier present and future, fostering their full potential through informed choices



AH&MRC Training

Registered Training Organisation



AH&MRC
Training

The AH&MRC Training centre witnessed a year of expansive progress across multiple fronts—ranging from the diversity of courses offered, forged partnerships, to an upswing in student engagement. This trajectory of growth was accompanied by an augmentation in our workforce to cater for this expansion. Concurrently, novel processes were put into place to amplify the efficacy of student engagement, enrollment, and educational delivery.

Building upgrades

The NSW Government committed \$1.365 million to AH&MRC for the building upgrade at Little Bay:

- ✦ The major upgrade for the AH&MRC building will see aluminum composite panels, timber battens, sarking and insulation on the 2006 building replaced with new materials that align with the latest National Construction Code.
- ✦ These improvements will ensure the Australian Aboriginal Health and Medical Research Council has a safe and secure base to continue its vital work training staff for community health services to support quality health care for Aboriginal communities.

All construction works were completed in July 2023.



Student enrolment and completion

This year has marked a significant milestone for AH&MRC Training as we warmly welcomed a diverse cohort of 130 students across our various programs. This figure is a testament not only to the burgeoning trust and reputation of our institution but also to the impeccable alignment and caliber of our courses in addressing the modern learner's needs.

An impressive completion rate of 65% is a figure that transcends mere statistics. It encapsulates the relentless commitment, diligence, and resilience exhibited by our students. Our students showcase remarkable dedication by effectively balancing various responsibilities while pursuing their studies, a testament to both their commitment and the supportive faculty. This accomplishment underscores the success of our curriculum and teaching methods, continually adapted to suit diverse learning styles.

Our interactive approach, enriched with practical experiences and real-life cases, ensures engaging and impactful education. Central to our achievements is our robust support system, tailored to each student's unique journey. Personalised mentorship and academic aid empower students to overcome challenges confidently and thrive in their educational pursuits.

Technological advancements

In the dynamic realm of education, technology wields the power to redefine how knowledge is imparted, absorbed, and applied. With a foresight into this transformative role, AH&MRC Training has emerged as a trailblazer by integrating cutting-edge technological solutions to elevate our educational offerings.

Some examples of what we have focused on, include:

1. Digital whiteboard virtual classroom equipment
2. Transition to Microsoft Teams education
3. New student management system

Resource redesign

Adapting to current demands

The healthcare landscape is ever-changing due to medical research, technology, and societal shifts. AH&MRC Training conducted a thorough review of our training resources and tools to ensure they are current and future-focused, aligning with our goal of preparing students for upcoming challenges.

Comprehensive overhaul

The redesign was more than cosmetic – it involved deep changes in content, methods, and tools. Working with experts, professionals, and educators, we revamped courses to align with current best practices. We updated materials, introduced fresh case studies, and integrated digital tools for better learning. Our equipment also got major upgrades. We invested in cutting-edge tools used in healthcare facilities, giving students practical experience with real-world equipment and bridging theory with practice.

Successful pilot in Dubbo

We tested our redesigned resources in Dubbo, a diverse community with unique healthcare challenges. The pilot was a success, receiving positive feedback from students and educators on relevance and interactivity. This success guides our future plans to expand the revamped training to more locations, aiming to provide all AH&MRC trainees with the best resources and equipment.

New partnerships and delivery

AH&MRC Training has ventured into uncharted territories, particularly in the realms of health and fitness and leadership and management, offering tailored standalone programs. Our approach is collaborative, partnering with esteemed organisations like Sydney Kings, WS Giants, Australia Post, Westpac Fire and Rescue NSW, and Department of Justice.

These partnerships go beyond surface-level connections; they profoundly enrich our curriculum. Each partner

contributes real-world case studies, guest lectures, internships, and hands-on training, bridging theory and practice. This equips our students not just for jobs, but for leadership roles in their fields.

In January 2023, we started a partnership with the Aboriginal Employment Strategy (AES) in Dubbo. This partnership will deliver the Indigenous Health Workforce Traineeship (IHWT) program. This partnership seeks to drive positive change by enhancing the health outcomes of Aboriginal and Torres Strait Islander communities. The IHWT program focuses on equipping Aboriginal and Torres Strait Islander healthcare professionals with the necessary skills, training, and support, in collaboration with local Aboriginal Community Controlled Health Services (ACCHS).

Additionally, The AH&MRC was honored to receive the inaugural AES Deadly Dinner Community Partner of the Year Award.





Aboriginal engagement and support

Recognising the distinct challenges and aspirations of our Aboriginal students, AH&MRC Training embarked on a transformative journey this year to elevate our commitment to their success. We've established a dedicated Aboriginal engagement and support team comprising passionate professionals deeply rooted in the community and armed with a profound understanding of the educational landscape.

Holistic student completion management

At the core of this team's mandate lies the holistic management of student completion. Their role transcends mere academic tracking, delving into the intricate web of factors that can influence a student's odyssey. From furnishing academic support and mentorship to addressing personal hurdles and providing counseling, the team ensures every Aboriginal student has the tools and support needed to emerge triumphant in their academic journey.

Away from base services

Acknowledging that many Aboriginal students hail from remote and regional areas, the team takes charge of our Away From Base services. This encompasses logistical support, including accommodation and transportation, alongside the creation of a warm and inclusive environment for students during their time away from their communities. The aim is to eliminate the hurdles of distance and displacement, making education a reality for all.

Accreditation and contracts

APRA reaccréditation

Celebrating a remarkable achievement AH&MRC Training proudly marks a significant milestone this year—the successful completion of the APRA (Australian Prudential Regulation Authority) reaccréditation process. This achievement underscores our steadfast commitment to delivering top-tier training of the highest quality. It signifies that our programs, methods, and outcomes align seamlessly with the stringent standards set by this esteemed authority. Beyond recognition, this reaccréditation signifies that our curriculum, faculty, and facilities are in perfect harmony with industry best practices. For our students, this translates into education that's not only relevant but also respected and recognised within professional spheres.

Smart and skilled contract

AH&MRC Training has taken a monumental step forward by securing an impactful Smart and Skilled contract. Beyond the numbers, this contract signifies a transformative shift in our financial landscape, boosting our training revenue by a significant 30%. Yet, its value goes far beyond finances – it's a vote of confidence in our ability to deliver top-notch, industry-relevant education. This boost in resources empowers us to expand our offerings, introduce exciting new courses, strengthen existing ones, and bring quality education to an even wider range of students. With this contract driving us, our mission to democratise education gains even more momentum.

Leadership and management training contract

Our strength in Leadership and Management training receives further validation with a new contract enabling comprehensive programs in this field. In today's complex professional landscape, effective leadership is crucial for success. Our programs equip professionals with skills, strategies, and insights for guiding teams, driving growth, and adeptly facing challenges. This contract highlights our role as a top provider of Leadership and Management training, showcasing our ability to understand sector-specific needs. As we embark on this journey, our commitment is to deliver training that surpasses expectations of partners and students.



Student Stories

WEAVE Youth Centre

Our dedicated AHMRC Training Staff organised an enriching experience for our Certificate IV in AOD (Alcohol and Other Drugs) students. This initiative entailed a meaningful excursion and placement at the esteemed WEAVE Youth Centre and the Kirketon Road Centre. The outcome was truly heartening, as both our students and the hosting centres found the experience to be immensely valuable and rewarding.

The students' enthusiasm and engagement during this excursion were palpable, as they were exposed to real-world settings that amplify their learning and provide a holistic understanding of their field. WEAVE Youth Centre and Kirketon Road Centre played a pivotal role in facilitating this hands-on learning experience, and the appreciation was mutual. The sense of mutual benefit resonated as our students received hands-on exposure, while the centres received the students' dedication and fresh perspectives.

A particularly inspiring element of the excursion was encountering Elsie Amamoo, the Senior Aboriginal Project Officer, who herself was once an AH&MRC Training student. The staff took immense pride in witnessing the positive impact Elsie has been making within the community, and her journey was a living testament to the transformative potential of our training programs.

Corporate Sponsorships and Events

AH&MRC's dedication to organising impactful events, fostering collaborations, and addressing crucial funding gaps underscores its commitment to enhancing the ACCHS sector.

By providing platforms for networking, knowledge exchange, and showcasing accomplishments, AH&MRC continues to contribute significantly to the advancement of Aboriginal health and wellbeing. The successful management of events and the launch of AH&MRC Giving exemplify AH&MRC's holistic approach to creating a positive impact on the community it serves.

Execution of AH&MRC Member Services and stakeholder events

AH&MRC achieved seamless execution of events catering to Member Services and stakeholders. These events facilitated valuable networking opportunities, fostered relationships with governmental and non-governmental entities, and contributed to the professional growth of attendees. These initiatives aimed to empower ACCHS sector professionals with actionable insights that could be readily implemented in their respective communities. AH&MRC's collaborative approach encompassed various departments, including Health Programs, Service Performance Quality, Ethics, Policy, Public Health, and AHMRC Training.

Successful launch of inaugural Ethics Forum

A significant milestone was marked with the successful inauguration of the Ethics Forum. This event garnered substantial attention, with over 150 tickets sold. The Ethics Forum attracted professionals from diverse sectors, providing a platform for insightful discussions and knowledge exchange. The sold-out event underlines AH&MRC's commitment to fostering dialogue on ethical considerations within Aboriginal health research and its broader implications.

Utilisation of Little Bay venue for collaborative endeavors

AH&MRC effectively maximised the utilisation of the Little Bay venue, engaging stakeholders such as NACCHO, Cancer Institute, Aboriginal Affairs, and the Closing the Gap Day secretariat. Over 20 paid venue hire bookings were secured in the 2022/23 financial year. The versatile space accommodated a wide range of events, including student deliveries, external workshops, live streaming launch events, dance performances, networking BBQs, television filming, and high-profile media engagements, like the NSW Premier's address.

Event highlights

- + **2022 Annual General Meeting** Hosted at Novotel Darling Harbour, this event brought together 43 attendees, fostering discussions and strategic planning for the year ahead.
- + **Deadly Doctors** Crowne Plaza Coogee Beach witnessed 36 attendees who provided overwhelmingly positive feedback, highlighting the value and impact of the event.
- + **Ear Health Forum** Held at Mercure Hotel Sydney, this forum saw 29 attendees, offering a platform for critical discussions in the realm of ear health.
- + **CQI Forum** Pullman Sydney hosted 65 attendees for the forum, setting a new attendance record from Member Services. Raised over \$40,000 in sponsorship money for the CQI forum.
- + **Chronic Care Forum** Partnering with ACI, AH&MRC hosted 150 in-person attendees at Kirribilli Club, while also facilitating online participation.
- + **Ethics Forum** The inaugural event took place at Novotel Brighton Beach with a full house of 180 attendees, underscoring the significance of ethical considerations in research.

AH&MRC Give

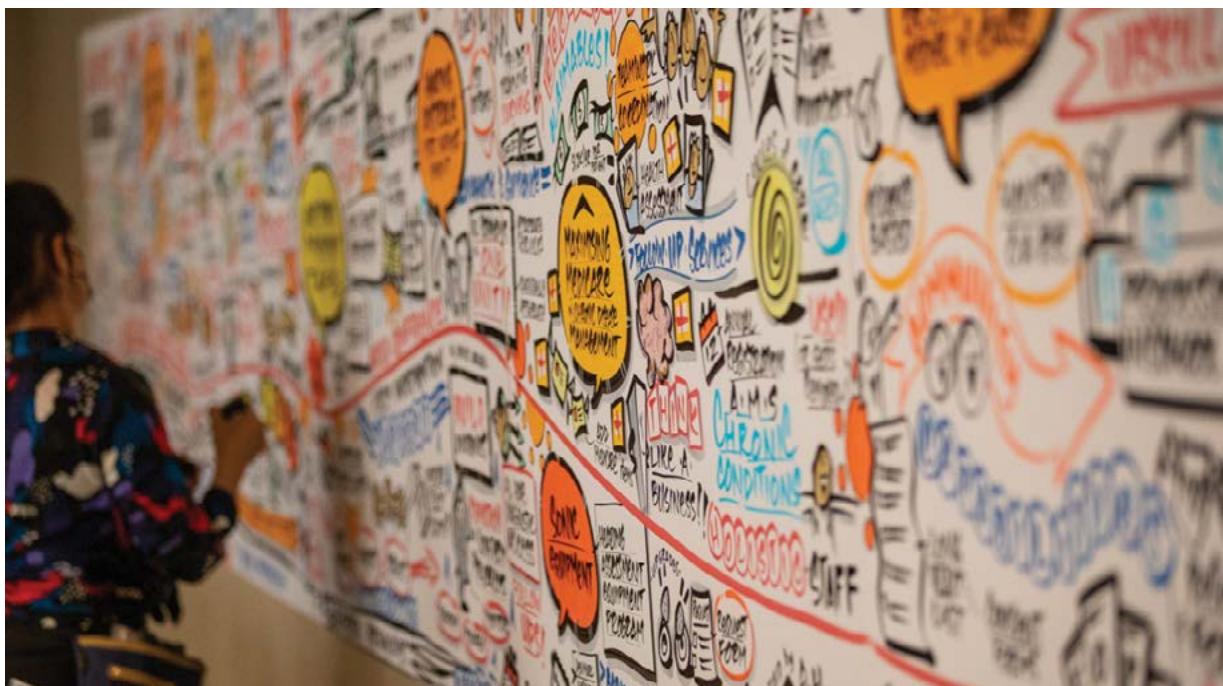
AH&MRC launched AH&MRC Give, focusing on philanthropy, donations, and fundraising. The initiative aims to address funding gaps in critical areas for the ACCHS sector, including disaster response, elective surgery, and Indigenous Scholarships. A notable achievement was the successful facilitation of a donation of medical equipment by Aspen Medical, benefiting 19 member services. The donation encompassed essential medical tools, such as stethoscopes, vaccine fridges, manual blood pressure monitors, and personal protective equipment. This endeavor demonstrated AH&MRC's commitment to supporting member services in times of need.



Grants, donations and sponsorship

AH&MRC secured a total of approx \$646K in grants, donations, and sponsorships, all of which were allocated to support a range of initiatives, including resources, events, education, and health programs.

Notable mentions include support from DCJ for COVID-related initiatives, as well as contributions from the University of Wollongong, the auDA Foundation, the Lowitja Foundation, and the Cancer Institute.



Ethics and Research



Application summary

132	89	76	9
Approved	Amendments	Annual Reports	Declined
65	103	474	
Publications	Request for further information	Total reviews	

The AH&MRC Ethics Secretariats play a vital role in supporting the Ethics Committee by managing research applications, inquiries, projects, content development, and resources related to research ethics at AH&MRC. Our actions are informed by feedback and consultations with the Ethics Committee. Working closely with Ethics Co-Chairs Dr. Summer Finlay and Dr. Michael Doyle, as well as the HREC, we ensure that research involving Aboriginal people and communities in NSW is ethically sound and culturally appropriate.

The AH&MRC Ethics Committee is resolutely dedicated to incorporating Aboriginal community-controlled governance in all Aboriginal health research. This ensures research benefits communities and aligns with their values. Active collaboration with Aboriginal partners drives decision-making, planning, and execution, fostering impactful outcomes. Addressing historical injustices, the committee aims to rectify imbalances within research. Through this commitment, the committee promotes equitable, respectful, and community-centered research outcomes, embodying their pursuit of positive change.

During the period of 2022-2023, the following table provides an overview of the research projects evaluated by the AH&MRC Ethics Committee. This includes assessments of new project applications, requests for amendments to existing proposals, extensions to ongoing projects, and evaluations of drafts for publication.

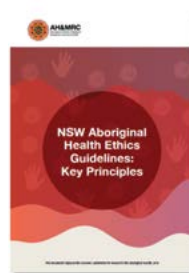
HREC recruitment

The AH&MRC prioritised the recruitment of reviewers for the HREC. This recruitment was carried out through social media and the newsletter, aiming to maintain the committee's capacity to review applications as their volume increases. Currently, the Committee consists of 17 members. The AH&MRC consistently promotes reviewer opportunities on the website and social media platforms to ensure an ongoing recruitment process for the HREC.



Events

A significant milestone was reached on Tuesday June 27th 2023, when we organised the inaugural Ethics Forum at Novotel Brighton Beach. This event saw a remarkable turnout of 180 attendees from various universities and government departments, surpassing our expectations. The forum, designed for academics, affiliated health professionals, and groups, aimed to provide educational insights into the importance of Aboriginal ethics, approval requirements, processes, and governance structures. The positive feedback received and the high demand for more frequent events indicate the success of the forum and align with AH&MRC HREC's expansion and growth plans.



During the Ethics Forum, the AH&MRC Ethics Committee distributed hard copies of the NSW Aboriginal Health Ethics Guidelines to all participants. These guidelines can also be viewed by visiting the ethics section of our website (ahmrc.org.au/ethics-main-page).

Our involvement extended to the 2023 Lowitja Conference, where the AH&MRC Secretariats created an abstract that was approved for publication on the conference's website. Additionally, the Ethics Team also received acceptance to represent the AH&MRC HREC Committee at the 2023 Lowitja Conference held in Cairns. Their presentation centered around the AH&MRC HREC's responsibilities and guidelines.

Public Health

The Public Health Team at the AH&MRC is dedicated to enhancing the health and wellbeing of Aboriginal and Torres Strait Islander communities in New South Wales (NSW) through a focus on public health and evidence-based primary healthcare within Aboriginal Community Controlled Health Services (ACCHOs).

Key achievements and highlights

Deadly Doctors Forum

The Deadly Doctors Forum, held at the Crown Plaza Coogee Beach on Bidjigal and Gadigal country, brought together 30 General Practitioners from ACCHOs across NSW. This event facilitated networking and discussions on critical sector issues, fostering a sense of community among peers.

Emergency activation framework for ACCHOs

AH&MRC worked with Public Health Matters to develop an Emergency Activation Framework for ACCHOs. This framework offers a high-level plan for responding to emergencies, with specific considerations for various scenarios. It aims to assist ACCHOs in effectively managing emergencies.

Workforce Impact of COVID-19

The Public Health Team developed and published the 'Aboriginal Community Controlled Health Workforce – the Impact of COVID-19' paper. This publication addressed key workforce challenges, proposing solutions such as dedicated ACCHO workforce development, health career pathways, and wage parity.

Support for Member Services

The Public Health Team provided vital support to member services through regional public health meetings, a dedicated newsletter, responding to ACCHOs' enquiries, coordinating the AH&MRC mobile health clinic, and offering clinical assistance at ACCHO community events.



Publications and resources

As part of our ongoing commitment and support for Aboriginal and Torres Strait Islander communities in NSW, the following resources have been created in development with our member services and NSW Health.

- ✦ Aboriginal Community Controlled Health Workforce - the Impact of COVID-19
- ✦ Emergency Activation Framework for ACCHOs
- ✦ Updated AH&MRC Pandemic Toolkit 2023
- ✦ Updated ACCHS Seasonal Influenza Preparedness Toolkit 2023
- ✦ Influenza Vaccines for 2023 poster for ACCHO clinicians
- ✦ AH&MRC submission to Commonwealth on 'Role and Functions of an Australian Centre for Disease Control'

Public health team tour from Ballina to Moree

Two members of our Public Health Team drove the AH&MRC mobile health clinic from Ballina to Moree in a whirlwind 2-day trip on the 24th and 25th of January, 2023. The team visited Bullinah Aboriginal Health Service, Bulgarr Ngaru, Armajun, and Pius X.

AH&MRC received support from The Broken Hill Proprietary Company Limited (BHP) to purchase a motorhome to help with mobile clinics and vaccinations. The AH&MRC's mobile health clinic was with Bullinah Aboriginal Health Service for six months after flooding destroyed their clinic on Cabbage Tree Island. The mobile health clinic was used by Bullinah Aboriginal

Health Service to provide ongoing healthcare and support to the community until a temporary clinic was established in Wardell.

Pius X utilised the mobile health clinic for three months to deliver care to communities in Wee Waa and Narrabri where there are currently no bulk-billing GP services. They also plan to use the van for health promotions in Toomelah and Mungindi.

Dental van

The University of Sydney has generously donated a mobile denture van, a significant addition that reinforces our commitment to serving ACCHOs in rural areas within the Aboriginal community.

This mobile denture van signifies a remarkable step forward in our efforts to provide comprehensive healthcare services to underserved regions. The University's support exemplifies the synergy between academic institutions and healthcare providers, where academia's resources and expertise intersect with the real-world needs of communities.

In the dynamic healthcare landscape, the AH&MRC Public Health Team is committed to driving positive change, providing public health expertise and offering continued support to ACCHOs. Through events like the Deadly Doctors Forum, development of emergency frameworks, workforce impact assessments, and publication of informative and practical resources, the team actively contributes to the health and wellbeing of Aboriginal and Torres Strait Islander communities across NSW.



Compliance

formerly known as Service Performance and Quality

The Compliance Unit team operates as a specialised team dedicated to enhancing the capabilities of Member Services through programs and training. Its primary focus is to support ACCHOs in delivering improved service quality, increasing revenue, ensuring financial sustainability, and enhancing clinical governance through continuous quality improvement activities.

In June 2023, the AH&MRC Board sanctioned modifications to the structure and name of the Service Performance and Quality to be named Compliance here on.

CQI events and training

The Compliance Unit's dedication was evident as they provided onsite training and assistance to 7 Member Services, contributing to their capacity building and service improvement.

The Compliance Unit continued its delivery of Clinical Continuous Quality Improvement (CQI) and Medicare training for ACCHOs.

Taking place on May 24th-25th in Sydney, the CQI Forum 2023 served as a gathering point for ACCHO staff from various corners of the state. This event not only facilitated networking but also provided a stage to highlight outstanding achievements in quality improvement. The long-standing tradition of acknowledging excellence through CQI awards persisted, reinforcing the commitment to ongoing improvement.

With participation from 30 Member Services, the event saw 65 attendees coming together to share their quality improvement endeavors and engage in meaningful interactions with peers. Complementing this, the efforts of the CQI Collaborative Committee, through both online and face-to-face meetings, played a pivotal role in bolstering these initiatives and their outcomes.

Accreditation support

The team provided vital support to Member Services in their journey towards accreditation. This included pre-assessment accreditation support onsite, progress updates on the AH&MRC ACCHS Accreditation Mapping Project,

and the facilitation of 4 regional accreditation workshops across NSW. These efforts contributed to improving service standards and organisational excellence.

Accreditation workshops provided crucial insights and knowledge for AMS staff. Attendees from 19 Member Services participated, contributing to their readiness for accreditation assessments.

The AH&MRC ACCHS Accreditation Mapping project was discussed in a workshop of the CQI Collaborative Committee. This initiative aims to maximise the utilisation of the mapping resource, enhancing the accreditation journey for ACCHOs.

Digital health program

The unit's Digital Health Program remained instrumental in providing support to Member Services. This included continued assistance with Practice Incentive Payments Scheme (PIMS) support and the delivery of workshops on Communicare, Best Practice, and Medical Director software systems. All training received positive feedback.

AH&MRC Communicare training

AH&MRC in collaboration with Telstra Health, delivered Communicare training in Kempsey from 25th to 27th October 2022.

Despite the rain and flooding in most parts of NSW, 15 ACCHS staff attended the training, 11 were from Durri Aboriginal Corporation Medical Service, 2 from Orange Aboriginal Medical Service, and 2 from Riverina Medical and Dental Aboriginal Organisation.

Two trainers from Telstra Health conducted the training – Tamara Clarke (lead trainer) and Steve White (Communicare IT developer). Both trainers provided opportunities to ask questions and talked about real-life examples from each AMS present in the training.

Overall, the attendees provided positive feedback and found the training to be valuable for their roles. Few constructive feedbacks have been taken into consideration to further improve the future training.

Resources and publications

The unit produced valuable resources, including updated MBS cheat sheets, staff duty mapping in the AMS Model of Care, ACCHS Accreditation Mapping resource draft, Chronic Disease Management model guide, updated PIMS clinical workbooks, and a compilation of ACCHS-relevant policies and procedures.



Support to ACCHOs

Over the past year, the Compliance Unit has been dedicated to working closely with Member Services to enhance their service models comprehensively. The team's efforts have focused on improving clinical governance, revenue generation, and accreditation processes. Through streamlining services and improving efficiency, the team has empowered ACCHOs to better serve their communities while also boosting organisational revenue and sustainability.

WSU Aboriginal health attachments partners gathering

The AHMRC Compliance Unit had the privilege of attending and participating in the Western Sydney

University (WSU) Innovative event. This event provided them with an opportunity to network with other service members and gain insights from industry specialists through informative talks and presentations.

Representing AH&MRC, Compliance Team members Kay and Richie delivered a presentation on various topics during the event. Their presentation covered essential aspects such as the placement of medical students in an ACCHS, cultural awareness training, safety and quality measures, risk management, accreditation standards, and practice incentive teaching payments.

The event proved to be an invaluable opportunity for the Compliance Unit to engage with peers, exchange knowledge, and remain current with the latest developments and best practices in the field.

Policy

The AH&MRC Policy team is dedicated to advocating for the ACCHO sector and Aboriginal and Torres Strait Islander communities, ensuring equitable access to healthcare.

Our advocacy focuses on policies and programs that enhance health services and outcomes.

Enhancing access We strive to improve health service access for Aboriginal communities in New South Wales, bridging gaps in healthcare provision.

Cultural safety Our efforts support the delivery of culturally safe healthcare services that respect the unique needs and perspectives of Aboriginal and Torres Strait Islander individuals.

Community partnership We actively collaborate with the ACCHO sector to co-design policies and programs, reflecting collective viewpoints and promoting genuine partnership.

Evidence-based approaches Our work is grounded in evidence-based, community-controlled models of care that foster health improvements.

The AH&MRC Policy team is instrumental in representing our organisation within the NSW Coalition of Aboriginal Peak Organisations (NSW CAPO) and the National Coalition of Peaks. Our pivotal role extends to driving the Closing the Gap initiative at both state and federal levels. We engage in Closing the Gap negotiations, working with partners to advance progress in line with the National Agreement.

Key achievements

Indigenous Health Summit

We successfully organised the inaugural AH&MRC Indigenous Health Summit on Closing the Gap, held on September 13th-14th at Sydney's CBD Mercure Hotel. With over 200 attendees, the event united Aboriginal health experts from across the nation. The summit served as a platform for comprehensive discussions on pressing sector issues and innovative solutions in line with the Closing the Gap agenda. Over two days, more than twenty speakers addressed topics including funding for Aboriginal health services, workforce development, and food security.

Capacity building program

Our team designed a comprehensive capacity building training program for Member Services. This program encompasses essential areas such as advocacy training, tender writing, and project evaluation.

Strengthening partnerships

We lead the coordination of the NSW PHN/ACCHO Working Group, fostering collaboration and shared decision-making between both sectors for matters related to Aboriginal health.

Closing the Gap initiatives

AH&MRC Policy is at the forefront of delivering various Closing the Gap initiatives under the NSW Implementation Plan. Through strategic partnerships with government stakeholders, we implement these initiatives throughout the NSW health system.

Resources and publications

The AH&MRC Policy unit has produced several valuable resources and publications in the past financial year. Notable among them are:

- + Supporting Best Practice in Aboriginal and Torres Strait Islander Maternal Health Booklet
- + Medicare Position Statement: Comprehensive Medicare Coverage for Aboriginal Community Controlled Health Services in NSW
- + Aboriginal Community Controlled Health Workforce Report – the Impact of COVID-19 (developed in collaboration with the Public Health team)

Policy submissions


The unit has actively engaged in policy advocacy through submissions on pertinent matters, such as:

- + Inquiry into the extent and nature of poverty in Australia
- + Inquiry into universal access to reproductive healthcare
- + Role and functions of an Australian Centre for Disease Control (in collaboration with the Public Health team)

Support for ACCHOs

The AH&MRC Policy team has been dedicated to representing Member Services by advocating for evidence-based policy reforms. Through submissions, reports, and papers, the team champions legislative changes that empower ACCHOs to provide quality primary healthcare in NSW. Direct advocacy support has been extended to Member Services, fostering collaboration and negotiation with government counterparts to ensure their service delivery remains strong.

Moreover, the team actively facilitates the bi-monthly Policy Advisory Group, which plays a pivotal role in identifying ongoing challenges faced by ACCHOs. Collaboratively, this group devises sector-specific solutions that reflect best practices and resonate with the unique needs of the community.



Section 4

Our Members' Success Stories



Katungul collaborative site visit AH&MRC/RDN

On the 26th of July, the collaborative meeting between Ear Health AH&MRC and Rural Doctors Network was a privilege as they had the opportunity to meet with CEO Kayleen Brown and Executive Director to CEO Marsha File. The meeting revolved around discussing the comprehensive scope of Katungul's clinical service locations in Batemans Bay, Bega, and Narooma.

The focus was on accessing specialist services, establishing strong collaboration with the local health district, and ensuring availability of ENT services/ resources and ear health training. During the meeting, the Executive Director made a significant remark, stating, "The positive outcomes resulting from the impacts of COVID have brought together local services and fostered stronger relationships, enabling us to work together for the betterment of our local communities."

Additionally, Katungul is actively involved in the Listen and Learning in Aboriginal Children (LiLAC) research project, which runs parallel to the Improving Care Pathways for Otitis Media (OM) in Aboriginal children project. Through this participation, they provide access to speech pathology and occupational therapy services for children experiencing hearing loss due to OM.

Katungul is seeking further support in terms of continuity of care and access to hearing health specialist services. Despite numerous challenges and environmental factors, Katungul maintains a shared vision and recognises the urgent need to expand their clinical facilities to accommodate visiting specialist services. The team expresses gratitude to Kayleen and Marsha for their valuable time spent in the meeting, overseeing the internal services provided. This engagement has enhanced their knowledge and understanding of the overall operational perspective, contributing to the holistic quality of care provided to ear health programs and teams in collaboration with AH&MRC and RDN.



Media training for Member Services

In an effort to enhance media engagement capabilities, fellow Member Services were extended an exclusive invitation to participate in a comprehensive and complimentary Media Training session. This highly informative training, skillfully administered by AH&MRC in Sydney, saw the participation of 10 dedicated individuals representing 4 Member Services.

The primary objective of this session was to equip leadership figures with the essential skills and knowledge required to adeptly navigate the intricate landscape of media interactions. Benefiting from AH&MRC's well-established expertise in health-related matters, the training was meticulously tailored to address the unique challenges and opportunities that media engagement presents. The participation of representatives from various Member Services further enriched the collaborative environment, fostering a fruitful exchange of insights and experiences.

The workshop itself was an exceptional learning experience, providing participants with an immersive platform to acquire practical skills and strategies. Immersed in a dynamic learning environment, attendees gained valuable insights into diverse aspects of media engagement. As they delved into the intricacies of effectively communicating through media channels, participants not only expanded their knowledge but also cultivated a heightened sense of confidence in their ability to adeptly handle media-related scenarios.

The knowledge gained will undoubtedly contribute to strengthening the media presence and communication prowess of these organisations, ultimately benefiting the communities they serve.

More sessions will follow in the new year, with plans to roll this out online.





'Our Health Our Future' Community Health Expos

AH&MRC partnered with Gilgandra Local Aboriginal Medical Service (GLAMS) and Coonamble Aboriginal Health Service (CAHS) to host two 'Our Health Our Future' community health expos. The AH&MRC was proud to support the events and a huge thanks to all the teams at GLAMS and CAHS for planning the health expo.

Community members were able to sign up as new patients, book in for their 715 annual health checks, and were able to receive flu or COVID-19 vaccinations on the day. Both Health Expos were a great success, with community members and local schools in attendance. Attendees could meet and connect with a range of local health and service providers, such as Marathon Health, Fair Dinkum Choices, Local Dental Services, and the local councils, to name a few.

The event was expertly hosted by GLAMS MC Luke Carroll, with entertainment by Duncan Ferguson at GLAMS and Maurice Walker at CAHS, which further added to the enjoyment of the event for attendees. Prizes were raffled off throughout the day, including Our Health Our Future Merchandise, fresh fruit and vegetable boxes, and meat vouchers from the local butchers.

The Our Health, Our Future program seeks to enhance health literacy, increase awareness and knowledge of annual health checks, and provide further engagement through health promotion days at a community level in collaboration with member services.



2023 National Aboriginal and Torres Strait Islander Eye Health

The 2023 National Aboriginal and Torres Strait Islander Eye Health Conference (NATSIEHC23) was held on Dharug Country in Western Sydney from 24th – 26th May.

The conference theme 'Our Vision in Our Hands: Finding Our Voice' sought to highlight emerging and future First Nations leaders of the sector, while also resonating the strength and values of the longstanding movement for Aboriginal and Torres Strait Islander self-determination in health, and the broader current national movement to enshrine First Nations Voice to parliament.

NATSIEHC23 was the seventh annual national conference and aimed to build on the collective work of the Aboriginal and Torres Strait Islander health sector to improve eye health access and outcomes for First Nations Australians. The conference was led by the National Expert Group in Aboriginal and Torres Strait Islander Eye Health (NEGATSIEH) and co-hosted by AH&MRC.

Over 240 delegates attended the conference from all states and territories – this included over 100 First Nations delegates. The delivery of 50 presentations over three days provided opportunity for connection and a

rich sharing of wisdom and learnings. Delegates included representatives from Aboriginal Community Controlled Health Organisations and other primary care service providers, eye care clinicians, policy makers, researchers, non-government organisations, hospitals, professional peak bodies and government departments from across the country.

Keynote speakers:

- ✦ Lauren Hutchinson – 2023 Jilpia Nappaljari Jones Memorial Oration
- ✦ Donna Murray – Chief Executive Officer of Indigenous Allied Health Australia (IAHA)
- ✦ Renata Watene – One of the few Māori Optometrists in Aotearoa, emerging as an Indigenous Eye Health Leader
- ✦ Karl Briscoe – CEO of the National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners (NAATSIHWP)

Opening Session – Day 2 (Full Program [NATSIEHC23-PROGRAM_2023.05.23_FINAL.pdf](#) (unimelb.edu.au))

Healthy Eyes in Rural Areas Author: Ann-Marie Thomas Abstract:

Toomelah is a small Aboriginal Community on the QLD and NSW border, a population of 250 people, 100 percent Aboriginal population. Brien Holden Vision Institute (BHVI) have been working in partnership for many years with Pius X Aboriginal Health Service providing a much needed service to the community. The community has no public transport, no shop and is 30kms from the nearest town, having this service come to the people is imperative. BHVI have also trained the Aboriginal Nurse, and since her training she is doing screening in schools and has referred children to the optometrist clinic. There are a number of children who have been provided with prescription glasses, which has greatly improved their learning outcomes. We are dedicated to closing the gap in numeracy and literacy by ensuring the children have good vision. This screening process also uncovered and enabled treatment for a young 15 year old boy at risk of glaucoma. We are dedicated and proud of the partnership to improve vision in rural and remote communities.

The awards are aligned with the Conference theme – Our Vision in Our Hands: Finding our Voice – set by the National Experts Group for Aboriginal and Torres Strait Islander Eye Health (NEGATSIEH), which contributes to the Conference Leadership Group.

This broad theme works to highlight and promote the importance of Aboriginal and Torres Strait Islander perspectives and leadership in the eye health sector locally and nationally. The theme also promotes the need for greater First Nations leadership through community-controlled services and evolving national governance mechanisms, including the call to enshrine an Indigenous voice into the Australian constitution.

We were pleased to open nominations for the 2023 awards, in the following categories:

- + Contribution to Aboriginal and Torres Strait Islander eye health by Aboriginal Community-Controlled Health Organisations (ACCHO)
- + Contribution to Aboriginal and Torres Strait Islander eye health (Individual)
- + Aboriginal and Torres Strait Islander leadership in eye health
- + Allyship in contribution to Aboriginal and Torres Strait Islander eye health





“A very special mention goes to Jenny and team at Walgett AMS for being awarded for their contribution to Aboriginal & Torres Strait Islander eye health”

The winner of the NATSIEHC 2023 award for Exceptional contribution to Aboriginal and Torres Strait Islander eye health by Aboriginal Community-Controlled Health Organisations (ACCHO) was: Walgett Aboriginal Medical Service

- + The Walgett Aboriginal Medical Service (WAMS) was one of the first eye health locations within an Aboriginal Community Controlled Health Service in NSW to provide bulk billed optometry services to their community members, starting in 1999 through NSW Aboriginal Vision program, co-designed with the Aboriginal Health and Medical Research Council of NSW (AH&MRC) and the Brien Holden Foundation (then known as ICEE). The fruit of those early seeds of collaboration continue to flourish today.
- + The nomination highlighted the dedication and commitment of WAMS management to eye health, as they have continued to fund a dedicated Eye Health Coordinator position since the very beginning of this program until today.
- + The WAMS Eye Health Coordinator supports clinics in Walgett and outreach services at Lightning Ridge, Goodooga, Collarenebri, Narrabri, Wee Waa and Pilliga.
- + Up until 2015 the WAMS Eye Health Coordinator serviced both the Walgett and Hunter New England regions, supporting over 30 outreach clinics. WAMS worked with the support of optometry provider the Brien Holden Foundation to hand some of the Western NSW and Hunter New England clinics over to the established Aboriginal Community Controlled Health Services in those communities.
- + WAMS applied for infrastructure grants to establish a well-equipped dedicated eye health room. Local outreach patients are referred into WAMS when OCT imaging is required, which eliminates travel for patients and allows eye health conditions to be managed locally.

An article about the NATSIEHC23 award winners

<https://mspgh.unimelb.edu.au/centres-institutes/onemda/research-group/ieh/news-and-events/news-events/2023-NATSIEHC-awards>



AH&MRC Deliver Aboriginal Mental Health First Aid (AMHFA) Training to Durri Aboriginal Corporation Medical Service, Kempsey

AH&MRC Deliver Aboriginal Mental Health First Aid (AMHFA) Training to Durri Aboriginal Corporation Medical Service, Kempsey

Colin McGrath and Sylvia Akusah delivered AMHFA training to Durri ACMSS' health workers.

Two AMHFA training courses were delivered over four consecutive days and to 36 of Durri's workforce.

The AH&MRC provide the AMHFA training to its Member Services free of charge and is part of a larger suicide prevention strategy.

The AMHFA training is designed to empower our ACCHO's health workers with the tools to assist community members, family and friends who experience mental health crises. Accredited Aboriginal Mental Health First Aid officers are able to support their community members who are in a mental health crisis, provide them with support and information and encouragement to reach out and get professional help and other supports that will keep them safe until professional support has been arranged.

Kempsey's Aboriginal community has been rocked by tragedies in recent times and seen much mourning and Sorry Business. Many of the health workers in attendance at the training were still grieving the loss of community members and loved ones.

Colin, himself, has struggled with AOD and Mental Health issues for most of his life, and faced and overcame many challenges that arose from these conditions.

He uses the insights gained from his own life in the delivery of the Aboriginal Mental Health First Aid training. In 2019, his partner's mother took her own life and he knows the pain and suffering caused and the stages that make up the journey through loss back to a new normal.

"This is why mental health first aid, provided in a culturally appropriate setting is so important," Colin said. Importantly, Colin added, "Having people from Aboriginal communities who have the knowledge and skills to provide mental health first aid is essential to safeguard mob. It will benefit the whole community and make them more resilient when there are people from their own community to listen and provide professional support options, and importantly, hope."

A key message to the Durri participants of the training was that grief and mourning is normal, that it is part of the healing process and not to blame yourselves for a loved one taking their own life. Colin explained it to participants by saying, "their decision to take their own life happened at a moment of dark despair, when you were not there to talk to them. It is not your fault that you were not there at that moment in time".

The AMHFA training was well received by Durri's workforce, which included, Transport Drivers, Reception staff, GPs, AHWs/AHPs, admin workers, dentists, and nurses.



Dubbo Health Expo

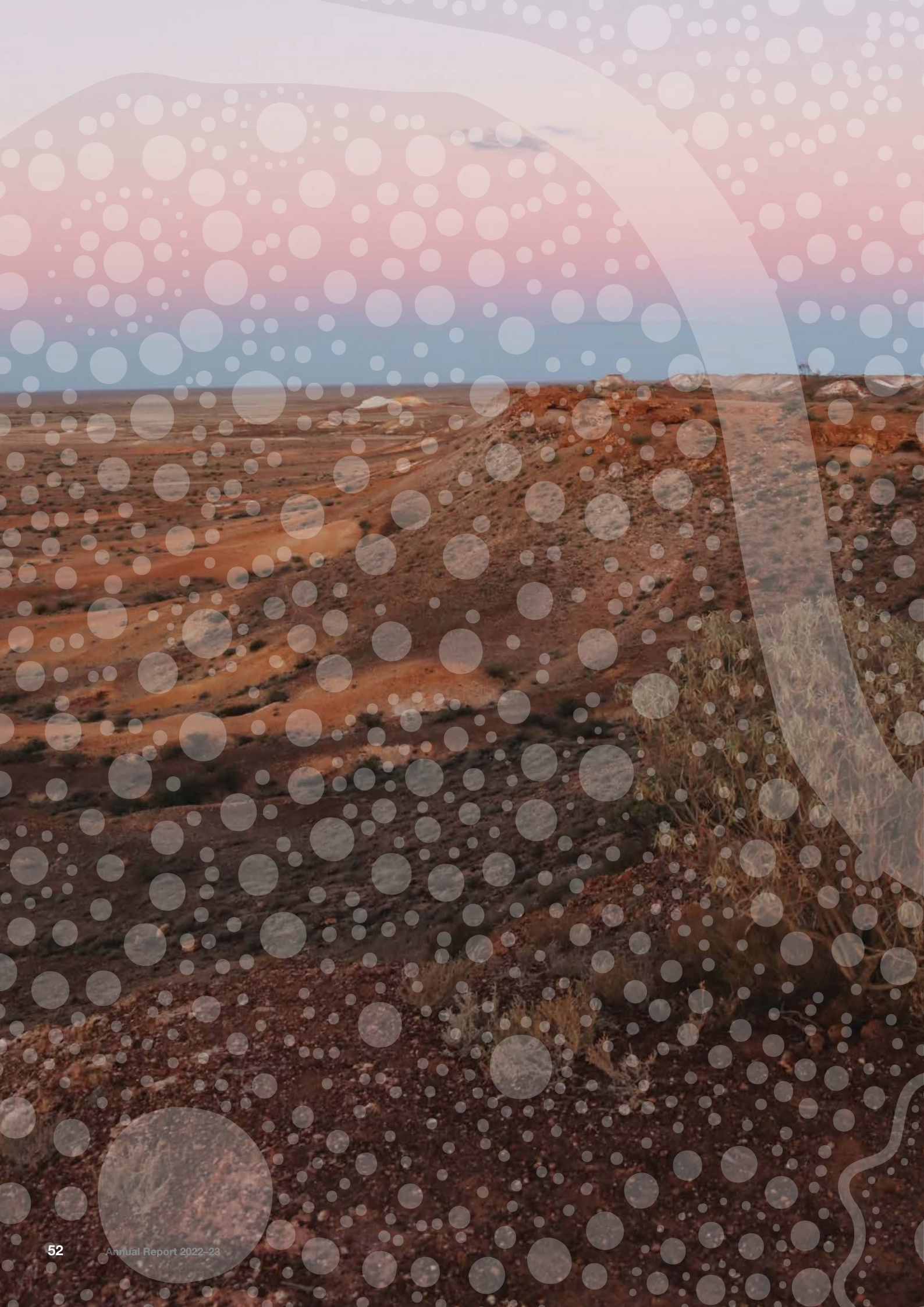
In collaboration with the AH&MRC, Dubbo AMS Health Expo 'Your Health, Your Future' was held on September 14 in Victoria Park.

The event included health checks, live entertainment, and various stakeholders stalls to promote health for all ages.

A heartfelt thank you is extended to Aunty Margaret Walker for her Welcome to Country, the attending Board Members, Kooking with a Koori MC, Llaney Webb Music for the captivating entertainment, the NRL players, and all stakeholders who took part. The event's success is further owed to the wonderful community turnout.

Dubbo AMS staff made exceptional efforts to ensure yet another successful day. The participation and contribution from all, made this a truly remarkable experience.







Section 5

Financial Reporting



Aboriginal Health and Medical Research Council of NSW

Auditor's Independence Declaration under Section 307C of the Corporations Act 2001 to the Directors of Aboriginal Health and Medical Research Council of NSW

I declare that, to the best of my knowledge and belief, during the year ended 30 June 2023, there have been:

- i. no contraventions of the auditor independence requirements as set out in the Corporations Act 2001 in relation to the audit; and
- ii. no contraventions of any applicable code of professional conduct in relation to the audit.

Chartered Accountants

Judy Brown
B Bus RCA
Managing Director
Brown Auditing Services Pty Ltd

Location Maitland NSW

Dated this 22..... day of September..... 2023

Liability limited by a scheme approved under Professional Standards Legislation



Statement of Profit or Loss and Other Comprehensive Income

For the Year Ended 30 June 2023

	Note	2023 (\$)	Restated 2022 (\$)
State and Federal Grants	4	10,633,594	9,221,684
Other Funding bodies	4	518,510	390,600
Other income	4	692,902	400,878
Consulting fees		(706,806)	(576,558)
Employee benefits expense		(5,364,606)	(4,608,182)
Travel and accomodation expenses		(840,282)	(273,016)
Audit, legal and consulting		(155,244)	(151,550)
Rent and occupancy expenses		(109,345)	(124,359)
Venue expenses		(66,751)	(31,385)
Repairs and Maintenance		(84,787)	(85,446)
Computer software and consumables expenses		(183,699)	(276,942)
Depreciation/impairment		(447,453)	(478,246)
Programs and promotions		(3,400,412)	(2,914,879)
Post and printing		(33,345)	(86,270)
Telephone expenses		(42,061)	(57,700)
Motor Vehicle running costs		(55,725)	(77,041)
Recruitment and training		(81,372)	(128,930)
Other expenses		(246,505)	(127,691)
Surplus/(deficit) before income tax		26,613	14,967
Income tax expense		-	-
Surplus/(deficit) from continuing operations		26,613	14,967
Surplus/(deficit) for the year		26,613	14,967
Other comprehensive income, net of income tax			
Total comprehensive income for the year		26,613	14,967

The accompanying notes form part of these financial statements.

Statement of Financial Position

as at 30 June 2023

	Note	2023 (\$)	Restated 2022 (\$)
Assets			
Current assets			
Cash and cash equivalents	6	11,481,893	5,737,396
Trade and other receivables	7	685,469	369,912
Other financial assets	8	2,544,769	3,785,190
Other assets	9	230,375	291,520
Total current assets		14,942,506	10,184,018
Non-current assets			
Property, plant and equipment	11	13,759,447	13,828,703
Intangible assets	12	16,636	25,777
Right-of-use assets	10	352,544	–
Total non-current assets		14,128,627	13,854,480
Total assets		29,071,133	24,038,498
Liabilities			
Current liabilities			
Trade and other payables	13	1,185,222	664,892
Employee benefits	16	238,783	195,402
Other financial liabilities	14	–	2,542
Other liabilities	15	8,460,855	4,355,827
Total current liabilities		9,884,860	5,218,663
Non-current liabilities			
Lease liabilities	10	354,656	–
Employee benefits	16	42,941	57,771
Total non-current liabilities		397,597	57,771
Total liabilities		10,282,457	5,276,434
Net assets		18,788,676	18,762,064
Equity			
Retained earnings		18,788,676	18,747,095
Total equity		18,788,676	18,747,095

The accompanying notes form part of these financial statements.

Statement of Changes in Equity

For the Year Ended 30 June 2023

	Note	Retained earnings (\$)	Total (\$)
2023			
Balance at 1 July 2022		18,762,064	18,762,064
Surplus attributable to members of the company		26,612	26,612
Balance at 30 June 2023		18,788,676	18,788,676
2022			
Balance at 1 July 2021		18,747,095	18,747,095
Surplus attributable to members of the company		14,969	14,969
Balance at 30 June 2022		18,762,064	18,762,064

The accompanying notes form part of these financial statements.

Statement of Cash Flows

For the Year Ended 30 June 2023

	Note	2023 (\$)	2022 (\$)
Cash flows from operating activities:			
Receipts from grants and other customers		16,996,279	12,696,147
Payments to suppliers and employees		(10,035,060)	(10,227,157)
Interest received		67,607	18,313
Net cash provided by/(used in) operating activities	22	7,028,826	2,487,303
Cash Flows From Investing Activities:			
Proceeds from disposal of non current assets		134,870	–
Purchase of property, plant and equipment		(178,778)	(193,478)
Movement of financial assets		(1,240,421)	952,793
Net cash provided by/(used in) investing activities		(1,284,329)	759,315
Net increase/(decrease) in cash and cash equivalents held		5,744,497	3,246,618
Cash and cash equivalents at beginning of year		5,737,396	2,488,236
Cash and cash equivalents at end of financial year	6	11,481,893	5,734,854

The accompanying notes form part of these financial statements.

Notes to the financial statements

For the Year Ended 30 June 2023

The financial report covers Aboriginal Health and Medical Research Council of NSW as an individual entity. Aboriginal Health and Medical Research Council of NSW is a not for profit Company, registered and domiciled in Australia.

The functional and presentation currency of Aboriginal Health and Medical Research Council of NSW is Australian dollars.

Comparatives are consistent with prior years, unless otherwise stated.

Note 1 Basis of Preparation

The financial statements are general purpose financial statements that have been prepared in accordance with the Australian Accounting Standards Simplified Disclosures and the *Australian Charities and Not for profits Commission Act 2012*.

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.

Significant accounting policies adopted in the preparation of these financial statements are presented below and are consistent with prior reporting periods unless otherwise stated.

Note 2 Summary of Significant Accounting Policies

a / Revenue and other income

The core principle of AASB 15 is that revenue is recognised on a basis that reflects the transfer of promised goods or services to customers at an amount that reflects the consideration the Company expects to receive in exchange for those goods or services.

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

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

When a non current asset is disposed, the gain or loss is calculated by comparing proceeds received with its carrying amount and is taken to profit or loss.

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.

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

Grant revenue

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.

Notes to the financial statements

For the Year Ended 30 June 2023

Other income

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

Interest

Interest revenue is recognised as it accrues using the effective interest method. The rate is exactly discounted estimated future cash receipts throughout the expected life of the asset.

Donation

Donations are recognised at the time of the pledge is made.

b / Income tax

The Company is exempt from income tax under Division 50 of the *Income Tax Assessment Act 1997*.

c / Goods and services tax (GST)

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

Receivables and payable are stated inclusive of GST.

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

d / Property, plant and equipment

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

Items of property, plant and equipment acquired for significantly less than fair value have been recorded at the acquisition date fair value.

Land and buildings

Land and buildings are measured using the revaluation model.

Plant and equipment

Plant and equipment are measured using the cost model.

Depreciation

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

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

Fixed asset class	Depreciation rate
Buildings	1% – 2.5%
Plant and Equipment	5% – 40%
Motor Vehicles	25%

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

Notes to the financial statements

For the Year Ended 30 June 2023

e / Financial instruments

Financial instruments are recognised initially on the date that the Company becomes party to the contractual provisions of the instrument.

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

f / Cash and cash equivalents

Cash and cash equivalents comprises cash on hand, demand deposits and short term investments which are readily convertible to known amounts of cash and which are subject to an insignificant risk of change in value.

g / Leases

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

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

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

h / Employee benefits

Provision is made for the Company's liability for employee benefits, those benefits that are expected to be wholly settled within one year have been measured at the amounts expected to be paid when the liability is settled.

Note 3 Critical Accounting Estimates and Judgements

Those charged with governance make estimates and judgements during the preparation of these financial statements regarding assumptions about current and future events affecting transactions and balances.

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

The significant estimates and judgements made have been described below.

Key estimates – impairment of property, plant and equipment

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

Key estimates – fair value of financial instruments

The Company has certain financial assets and liabilities which are measured at fair value. Where fair value has not able to be determined based on quoted price, a valuation model has been used. The inputs to these models are observable, where possible, however these techniques involve significant estimates and therefore fair value of the instruments could be affected by changes in these assumptions and inputs.

Notes to the financial statements

For the Year Ended 30 June 2023

Key estimates – provisions

As described in the accounting policies, provisions are measured at management's best estimate of the expenditure required to settle the obligation at the end of the reporting period. These estimates are made taking into account a range of possible outcomes and will vary as further information is obtained.

Note 4 Other Revenue and Income

Revenue from continuing operations

	2023 (\$)	2022 (\$)
Revenue from contracts with customers (AASB 15)		
Revenue and Other Income		
State/Federal government grants	10,633,594	9,186,684
Other organisations	518,510	390,600
	11,152,104	9,577,284
Interest received	67,607	18,314
	67,607	18,314
Other Income		
Donations & sponsorships	142,408	106,038
RTO activities	222,508	22,633
Other income	260,379	249,808
Total other income	625,295	378,479
Total revenue and other income	11,845,006	9,974,077

Notes to the financial statements

For the Year Ended 30 June 2023

Note 5 Result for the Year

The result for the year includes the following specific expenses:

	2023 (\$)	2022 (\$)
Rental expense	109,345	124,359
Audit fee	47,933	84,896
Legal and professional fee	31,759	6,610
Consultancy expense	706,806	576,558
Depreciation Building	115,649	115,649
Depreciation Plant and equipment	63,986	251,302
Depreciation Fit out	55,736	2,912
Depreciation Motor vehicle	53,275	99,240
Website – amortisation	11,911	9,142

Note 6 Cash and Cash Equivalents

	2023 (\$)	2022 (\$)
Cash at bank and in hand	11,469,866	5,220,490
Deposits at call	–	515,068
Other cash and cash equivalents	12,027	1,838
	<u>11,481,893</u>	<u>5,737,396</u>

Note 7 Trade and Other Receivables

	2023 (\$)	2022 (\$)
Current		
Trade receivables	687,298	353,919
Deposits	(1,829)	1,206
GST receivable	–	14,787
Total current trade and other receivables	<u>685,469</u>	<u>369,912</u>

Notes to the financial statements

For the Year Ended 30 June 2023

Note 8 Other Financial Assets

	2023 (\$)	2022 (\$)
Current		
Term deposit investments	2,544,769	3,785,190
Total other financial assets	<u>2,544,769</u>	<u>3,785,190</u>

Note 9 Other Assets

	2023 (\$)	2022 (\$)
Current		
Accrued income	91,522	41,784
Prepaid expenses	134,943	231,815
Other assets	–	15,000
Investments	3,910	2,921
Total other assets	<u>230,375</u>	<u>291,520</u>

Note 10 Leases

	2023 (\$)	2022 (\$)
Right of use assets		
Year ended 30 June 2023		
Balance at beginning of year	499,443	499,443
Additions to right of use assets	(146,899)	(146,899)
Balance at end of year	<u>352,544</u>	<u>352,544</u>

Notes to the financial statements
For the Year Ended 30 June 2023

Note 11 Property, Plant and Equipment

Land and buildings

Land and buildings

At cost	13,650,000	13,650,000
Accumulated depreciation	(462,597)	(346,948)
Total land and buildings	13,187,403	13,303,052

Plant and equipment

Capital works in progress

At cost	–	42,769
Total capital works in progress	–	42,769

Plant and equipment

At cost	2,153,001	2,062,662
Accumulated depreciation	(1,990,710)	(1,923,954)
Total plant and equipment	162,291	138,708

Office Fit out

At cost	259,188	116,486
Accumulated depreciation	(62,810)	(7,074)
Total Office Fit out	196,378	109,412

Motor vehicles

At cost	452,555	451,234
Accumulated depreciation	(239,180)	(216,472)
Total motor vehicles	213,375	234,762

Total plant and equipment

Total property, plant and equipment	13,759,447	13,828,703
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Notes to the financial statements

For the Year Ended 30 June 2023

a / Movements in carrying amounts

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

	Capital Works in Progress (\$)	Land and Buildings (\$)	Plant and Equipment (\$)	Office Fit out (\$)	Motor Vehicles (\$)	Total (\$)
Year ended 30 June 2023						
Balance at the beginning of year	42,769	13,303,052	138,708	109,412	234,762	13,828,703
Additions	–	–	136,522	42,256	–	178,778
Disposals	–	–	–	–	(18,112)	(18,112)
Depreciation expense	–	(115,649)	(66,756)	(55,735)	(53,275)	(291,415)
Other changes, movements	–	–	(46,183)	100,445	50,000	61,493
Balance at the end of the year	–	13,187,403	162,291	196,378	213,375	13,759,447

Note 12 Intangible Assets

	2023 (\$)	2022 (\$)
Computer software		
Cost	45,710	135,710
Accumulated amortisation	(29,074)	(109,933)
Net carrying value	16,636	25,777
Total Intangibles assets	16,636	25,777

Note 13 Trade and Other Payables

	2023 (\$)	2022 (\$)
Current		
Trade payables	659,525	564,306
Accrued expense	401,227	26,430
Other payables	124,470	74,156
Total trade and other payables	1,185,222	664,892

Trade and other payables are unsecured, non-interest bearing and are normally settled within 30 days. The carrying value of trade and other payables is considered a reasonable approximation of fair value due to the short-term nature of the balances.

Notes to the financial statements

For the Year Ended 30 June 2023

Note 14 Financial Liabilities

	2023 (\$)	2022 (\$)
Current		
Credit card – unsecured	–	2,542
Total	<u>–</u>	<u>2,542</u>

The Company measures the following financial liabilities at fair value on a recurring basis:

Note 15 Other Liabilities

	2023 (\$)	2022 (\$)
Current		
Income received in advance	8,460,855	4,343,299
Other liability	–	12,528
	<u>8,460,855</u>	<u>4,355,827</u>

Note 16 Employee Benefits

	2023 (\$)	2022 (\$)
Current liabilities		
Employee benefits	238,783	195,402
	<u>238,783</u>	<u>195,402</u>
Non current liabilities		
Employee benefits	42,941	57,771
	<u>42,941</u>	<u>57,771</u>

Notes to the financial statements

For the Year Ended 30 June 2023

Note 17 Financial Risk Management

	2023 (\$)	2022 (\$)
Financial assets		
Held at amortised cost		
Cash and cash equivalents	11,481,893	5,737,396
Trade and other receivables	685,470	369,912
Fair value through profit or loss (FVTPL)		
Fair value through Other Comprehensive Income (OCI)		
Total financial assets	12,167,363	6,107,308
Financial liabilities		
Financial liabilities measured at amortised cost	9,646,077	5,023,261
Financial liabilities at fair value		
	9,646,077	5,023,261

Objectives, policies and processes (alternate example)

Risk management is carried out by the Company's risk management committee under the delegated power from those charged with governance. The Finance Manager has primary responsibility for the development of relevant policies and procedures to mitigate the risk exposure of the Company, these policies and procedures are then approved by the risk management committee and tabled at the board meeting following their approval.

Reports are presented at each Board meeting regarding the implementation of these policies and any risk exposure which the Risk Management Committee believes the Board should be aware of.

Specific information regarding the mitigation of each financial risk to which the Company is exposed is provided below.

Liquidity risk

Liquidity risk arises from the Company's management of working capital and the finance charges and principal repayments on its debt instruments. It is the risk that the Company will encounter difficulty in meeting its financial obligations as they fall due.

The Company's policy is to ensure that it will always have sufficient cash to allow it to meet its liabilities as and when they fall due. The Company maintains cash and marketable securities to meet its liquidity requirements for up to 30 day periods. Funding for long term liquidity needs is additionally secured by an adequate amount of committed credit facilities and the ability to sell long term financial assets.

Liquidity needs are monitored in various time bands, on a day to day and week to week basis, as well a rolling 30 day projection. Long term liquidity needs for a 180 day and a 360 day period are identified monthly.

At the reporting date, these reports indicate that the Company expected to have sufficient liquid resources to meet its obligations under all reasonably expected circumstances and will not need to draw down any of the financing facilities.

The timing of cash flows presented in the table to settle financial liabilities reflects the earliest contractual settlement dates and does not reflect management's expectations that banking facilities will be rolled forward.

Notes to the financial statements

For the Year Ended 30 June 2023

The amounts disclosed in the table are the undiscounted contracted cash flows and therefore the balances in the table may not equal the balances in the statement of financial position due to the effect of discounting.

Credit risk

Credit risk refers to the risk that a counterparty will default on its contractual obligations resulting in a financial loss to the Company.

Credit risk arises from cash and cash equivalents, derivative financial instruments and deposits with banks and financial institutions, as well as credit exposure to wholesale and retail customers, including outstanding receivables and committed transactions.

The credit risk for liquid funds and other short term financial assets is considered negligible, since the counterparties are reputable banks with high quality external credit ratings.

Trade receivables

Trade receivables consist of a large number of customers, spread across diverse industries and geographical areas. Ongoing credit evaluation is performed on the financial condition of accounts receivable.

The Company has adopted a policy of only dealing with creditworthy counterparties as a means of mitigating the risk of financial loss from defaults. The risk management committee has established a credit policy under which each new customer is analysed individually for creditworthiness before the Company's standard payment and delivery terms and conditions are offered. The Company review includes external ratings, if they are available, financial statements, credit agency information and industry information. Credit limits are established for each customer and the utilisation of credit limits by customers is regularly monitored by line management. Customers who subsequently fail to meet their credit terms are required to make purchases on a prepayment basis until creditworthiness can be re established.

Those charged with governance receives monthly reports summarising the turnover, trade receivables balance and aging profile of each of the key customers individually and the Company's other customers analysed by industry sector as well as a list of customers currently transacting on a prepayment basis or who have balances in excess of their credit limits.

The Company's exposure to credit risk is influenced mainly by the individual characteristics of each customer. However, management also considers the factors that may influence the credit risk of its customer base, including the default risk associated with the industry and country in which the customers operate.

Management considers that all the financial assets that are not impaired for each of the reporting dates under review are of good credit quality, including those that are past due.

The Company has no significant concentration of credit risk with respect to any single counterparty or group of counterparties.

(i) Interest rate risk

The Company is exposed to interest rate risk as funds are borrowed at floating and fixed rates. Borrowings issued at fixed rates expose the Company to fair value interest rate risk.

The Company's policy is to minimise interest rate cash flow risk exposures on long term financing. Longer term borrowings are therefore usually at fixed rates. At the reporting date, the Company is exposed to changes in market interest rates through its bank borrowings, which are subject to variable interest rates.

Sensitivity analysis

The following table illustrates the sensitivity of the net result for the year and equity to a reasonably possible change in interest rates of +2.50% and 2.50% (2022: +1.00%/ 1.00%), with effect from the beginning of the year. These changes are considered to be reasonably possible based on observation of current market conditions and economist reports.

Notes to the financial statements

For the Year Ended 30 June 2023

The calculations are based on the financial instruments held at each reporting date. All other variables are held constant.

(ii) Price risk

Price risk relates to the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market prices of securities held being available for sale or fair value through profit and loss.

Such risk is managed through diversification of investments across industries and geographic locations.

The Company's investments are held in the following sectors at reporting date:

Banking and Finance 99% and shares 1%.

Note 18 Members' Guarantee

The Company is registered with the *Australian Charities and Not for profits Commission Act 2012* 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 \$ 10 each towards meeting any outstanding obligations of the Company. At 30 June 2023 the number of members was 49 (2022: 47).

Note 19 Key Management Personnel Disclosures

The remuneration paid to key management personnel of the Company is \$ 908,771 (2022: \$ 782,293).

Note 20 Contingencies

In the opinion of those charged with governance, the Company did not have any contingencies at 30 June 2023 (30 June 2022:None).

Note 21 Related Parties

Key management personnel – refer to Note 19.

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

Notes to the financial statements

For the Year Ended 30 June 2023

Note 22 Cash Flow Information

Key management personnel – refer to Note 19.

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

a / Reconciliation of result for the year to cashflows from operating activities

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

	2023 (\$)	2022 (\$)
Profit for the year	26,612	14,969
Cash flows excluded from profit attributable to operating activities		
Non cash flows in profit:		
+ Depreciation/impairment	447,453	478,246
Changes in assets and liabilities:		
+ (increase)/decrease in trade and other receivables	(315,558)	15,588
+ (increase)/decrease in other assets	1,240,421	613,163
+ increase/(decrease) in trade and other payables	520,330	179,040
+ (increase)/decrease in other liabilities	–	(2)
+ (increase)/decrease in income taxes payable	–	(187,151)
+ increase/(decrease) in income in advance	4,104,141	1,613,243
+ increase/(decrease) in provisions	1,005,427	(239,795)
Cashflows from operations	7,028,826	2,487,303

Note 23 Events After the End of the Reporting Period

The financial report was authorised for issue on 22 September 2023 by those charged with governance.

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

Note 25 Statutory Information

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

Aboriginal Health and Medical Research Council of NSW

35, Harvey Street

LITTLE BAY NSW 2036

Aboriginal Health and Medical Research Council of NSW


ABN: 66 085 654 397

Responsible Persons' Declaration

The responsible persons declare that in the responsible persons' opinion:

- there are reasonable grounds to believe that the registered entity is able to pay all of its debts, as and when they become due and payable; and
- the financial statements and notes satisfy the requirements of the *Australian Charities and Not-for-profits Commission Act 2012*.

Signed in accordance with subsection 60.15(2) of the *Australian Charities and Not-for-profit Commission Regulation 2013*.

Responsible person Phillip Naden Responsible person 

Dated 21st September 2023



Level 1
14 Bulwer Street
Maitland NSW 2320
ABN - 51 611 569 003

Aboriginal Health and Medical Research Council of NSW

Independent Audit Report to the members of Aboriginal Health and Medical Research Council of NSW

Report on the Audit of the Financial Report

Opinion

We have audited the financial report of Aboriginal Health and Medical Research Council of NSW, which comprises the statement of financial position as at 30 June 2023, the statement of profit or loss and other comprehensive income, the statement of changes in equity and the statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies, and the responsible persons' declaration.

In our opinion the financial report of Aboriginal Health and Medical Research Council of NSW has been prepared in accordance with Division 60 of the Australian Charities and Not-for-profits Commission Act 2012, including:

- i. giving a true and fair view of the Registered Entity's financial position as at 30 June 2023 and of its financial performance for the year ended; and
- ii. complying with Australian Accounting Standards - Simplified Disclosures and Division 60 of the Australian Charities and Not-for-profits Commission Regulation 2013.

Basis for Opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Report section of our report. We are independent of the Registered Entity in accordance with the auditor independence requirements of the Australian Charities and Not-for-profits Commission Act 2012 (ACNC Act) and the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 Code of Ethics for Professional Accountants (including Independence Standards) (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Responsibilities of Responsible Entities for the Financial Report

The responsible persons of the Registered Entity are responsible for the preparation and fair presentation of the financial report in accordance with Australian Accounting Standards - Simplified Disclosures and the ACNC Act, and for such internal control as the responsible entities determine is necessary to enable the preparation of the financial report that is free from material misstatement, whether due to fraud or error.

In preparing the financial report, the responsible persons are responsible for assessing the Registered Entity's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the responsible entities either intends to liquidate the Registered Entity or to cease operations, or has no realistic alternative but to do so.

Those charged with governance are responsible for overseeing the Registered Entity's financial reporting process.

Auditor's Responsibilities 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 Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of the financial report.

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

Brown Auditing Services Pty Ltd



Judy Brown
B Bus RCA (457300)
Managing Director
Brown Auditing Services Pty Ltd

Location Maitland NSW

Dated this 22 day of September..... 2023

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