



Durri Aboriginal Corporation Medical Service

Servicing the Macleay and Nambucca Valleys

ABN 52 730 046 875 ICN 27

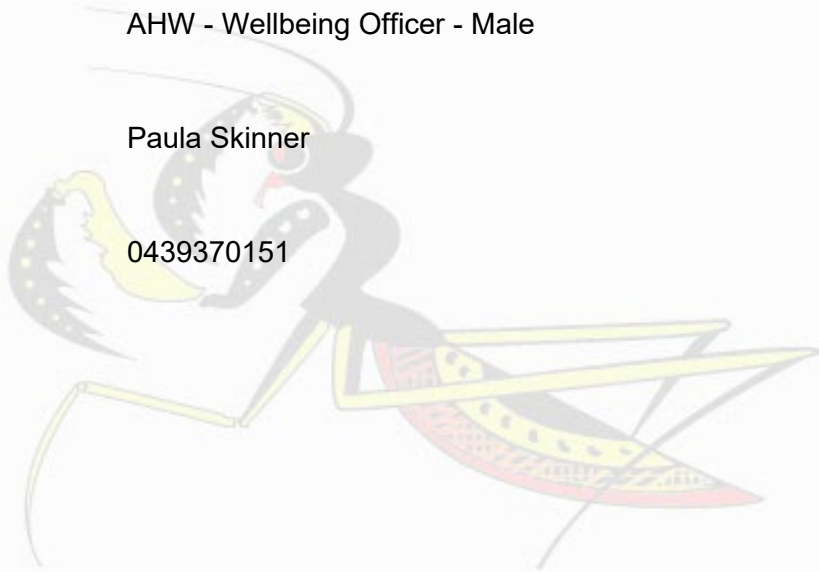
With Compliments

Position Application Package

Position Name: AHW - Wellbeing Officer - Male

Contact Name: Paula Skinner

Telephone: 0439370151



General Conditions of Employment

Position:	AHW - Wellbeing Officer - Male
Award:	ATSIHWP + ACCHS Award 2020
Classification:	AHW - Grade 4 - Level 3
Salary packaging:	To calculate your potential benefit follow the link https://eziway.net.au

Application: Your application should consist of four parts:

- 1. Completed application form (page 4)**
- 2. Selection Criteria -***Your application must answer all of the Selection Criteria essential questions, for example the questions listed 1 to 14 to below, or your application will be marked unsuccessful.*

Selection Criteria:

Essential:

1. Aboriginal or Torres Strait Islander descent (*This is an identified position under Section 14D of the NSW Anti-Discrimination Act 1977*)
2. Minimum Certificate III qualification in ATSI primary health care or willingness to obtain within 6 months, obtain certificate IV within 18 months and application for a provider number within 1 month of completing qualifications
3. Demonstrated experience with development of community programs
4. Sound knowledge of community health, public health, and Aboriginal Health
5. A thorough knowledge of and association with the local Aboriginal community
6. Experience working with health service agencies, non-government organisation, schools, community groups and medical professionals at all levels
7. Excellent networking, communication, and engagement skills, with the ability to effectively work with children and young people (aged 12 – 24 years).
8. High level of written and verbal communication skills
9. Demonstrated ability to work flexibly within tight time schedules and in accordance with variable workload demands
10. Ability to use Microsoft products and the ability to use or willingness to gain proficiency in the Communicare patient information management system and ANKA
11. Current First Aid Certificate, or ability to obtain
12. Current immunisations or willingness to participate in staff immunisation program
13. Ability to hold all relevant security clearances including National Police Check and Working with Children clearance
14. Current valid driver's license, minimum of Class "C" or equivalent

Core Competencies –

1. Ability to build and maintain strong relationships with the local community.
2. Strong interpersonal skills, including the ability to demonstrate empathy when required.
3. Ability to build relationships with all levels of the organisation

3. Resume

4. Supporting documents

- Working with children check, qualifications, registration, driver licence, national police check
- Vaccination Declaration Form, Appendix 6

(Adopted and endorsed by Durri CEO Clinical Governance Committee 10 May 2023)

Click on the links below to Complete NSW Health Undertaking/Declaration Form & find Occupational Assessment, Screening and Vaccination against Infectious Diseases Policy.

This form must be completed by all new workers, students and existing staff applying for new positions or undergoing vaccination and screening requirements outlined in the NSW Health Occupational Assessment, Screening and Vaccination against Specified Infectious Diseases Policy Directive (the “policy directive”). This includes volunteers/facilitators/contractors (including visiting medical officers and agency staff) who provide services for or on behalf of Durri ACMS.

<https://www.health.nsw.gov.au/immunisation/Documents/Occupational/appendix-6-declaration.pdf>

https://www1.health.nsw.gov.au/pds/ActivePDSDocuments/PD2024_015.pdf

Email your completed application to: Recruitment@durri.org.au

or

Post marked confidential to:

Application Human Resources
Durri Aboriginal Corporation Medical Service
PO Box 136
Kempsey NSW 2440

Closing Date: Thursday 17 April 2025 by 5.00pm - No late applications will be accepted.

Application Form

Full Name:

Address:

Email Address:

Contact Number:

Date of Birth:

Drivers Licence: ☐ Yes ☐ No Class: Expiry date:

Do you identify as Aboriginal and or Torres Strait Islander? ☐ Yes ☐ No

Do you identify as having a disability? ☐ Yes ☐ No

Are you an Australian citizen or permanent resident? ☐ Yes ☐ No

Have you attached your Working with Children check? ☐ Yes ☐ No

WWCC No:.....

Have you attached your National Police Check? ☐ Yes ☐ No

Date of issue: ☐ Yes ☐ No

Have you attached your NSW Health Undertaking/Declaration Form? ☐ Yes ☐ No

Have you attached your Qualifications? ☐ Yes ☐ No

Have you attached your registration if applicable? ☐ Yes ☐ No

Where did you see this position advertised?

List two referees (one being a current manager)

Referees	Referee 1	Referee 2
Name:		
Title:		
Organisation:		
Contact Details:		
Email Address:		