



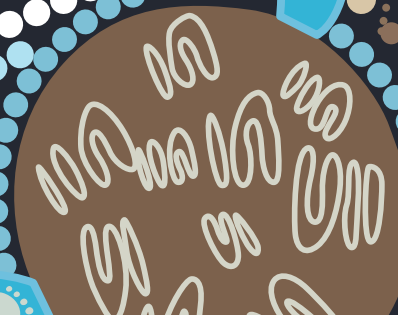
Durri

Aboriginal Corporation Medical Service

ICN 27

ANNUAL REPORT

23-24



ACKNOWLEDGEMENTS

Thank you to the Board of Directors, Chief Executive Officer, Acting Chief Executive Officer, Senior Management Team, and all Durri ACMS staff who contributed for your hard work and efforts over this financial year. We sincerely acknowledge your hard work and dedication.

We also want to extend our heartfelt gratitude to all staff members not specifically mentioned in this report who were part of our journey during the 2023-2024 financial year.

Durri ACMS pays deep respect to elder's past, present and future and offers our heartfelt condolences to families who have experienced Sorry Business.

Special Acknowledgement to Stephen Blunden

We would like to extend our heartfelt gratitude to Stephen Blunden for his unwavering dedication and leadership as the CEO of Durri ACMS.

Stephen's vision and passion for the community has inspired generations. He had an ability to build relationships and empower many individuals, groups, organisation, and communities.

Thank you, Stephen, for your tireless efforts of being a champion of change. Your legacy will resonate for years to come.



We wish you all the best in this new chapter of your life. May it be filled with joy, adventure, and relaxation. Enjoy every moment of your retirement- you have truly earned it.

About the reports

The activities outlined in this Annual Report are a summary of comprehensive reports provided by each program and area.

Staff photos and lists are those for programs and activities that were delivered from the 1st of July 2023 through to 30th of June 2024.



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Artwork by Jason Ridgeway

This artwork features the beach to bush country to coast theme.

It has meeting places that represent some of the communities in and around the Macleay and Nambucca Valleys.

The landscapes depict significance.

The blue and aqua tones depict the water and the browns and yellows depict the land we walk.

There are footprints that lead to and from the meeting places with them depict connections in both the valleys.



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OUR VISION

To be the provider of choice for Primary Care of Aboriginal Health and Wellbeing Service.

OUR MISSION

We are the preferred provider of primary health care and allied health services which address the wellbeing of the Aboriginal and Torres Strait Islander communities of the Macleay and Nambucca Valleys

OUR VALUES

INTEGRITY

At Durri Aboriginal Corporation Medical Service (Durri) we will do what we say we will do, and how we will do it. Honesty, sincerity and living our values will define us. Our partnerships with staff, community and other stakeholders will assist us in striving to always exceed expectations.

TRADITION

We continue our journey evolving from our rich history, learning from our challenge and creating a better future. We will embrace our rich tradition of community care and find ways to embed these traditions into modern health care practices.

ACCOUNTABILITY

Our responsibility is to accept nothing but the best for our community. We remain accountable to the people to whom we provide these services. We accept this accountability and will always aspire to be answerable to those whom we serve.

SOCIAL JUSTICE

Durri maintains that as a socially just organisation, we understand, recognise and value every person in our society and base our decisions and actions upon the principle of equality and solidarity.

GOVERNANCE

The leaders of the organisation are committed to the principles of quality governance such as continuous improvement and compliance in order to position Durri as a leader in the field of primary and holistic health care.

BOARD OF DIRECTORS

Arthur Kelly

Appointed Director 27.11.19

Appointed Chairperson 6.12.22

Katherine (Lynne) Holten

Appointed Chairperson December 2020

Retired Chairperson 6.12.22

Retired 28.11.23

Ivy Brown

Appointed Director 28.11.23

Donald Griffen

Appointed Director 10.3.20

Retired 28.11.2023

Taylor Kelly-Scholes

Appointed Director 29.11.22

Patricia Edwards

Appointed Director 27.1.22

Mary-Lou Buck

Appointed Director 28.11.22

Rosemary Vale

Appointed Director 28.11.23

COMPANY SECRETARY

Connie Smith

Jodie Sherrin

Appointed 1.9.22

Resigned 5.12.22



MESSAGE FROM OUR CHAIRPERSON



During the 2023-2024 financial year, Durri ACMS has had many challenges for the various communities in our footprint. Some of these challenges includes sharing the sadness involving so many of our community who have experienced 'sorry business.' We have lost so many special people over the past twelve months and The Board of Directors share your grief.

I would like to thank the previous and current Board of Directors for your ongoing commitment to ensuring that Durri ACMS has a strong governance structure.

The Board of Directors has an ongoing desire to achieve the vision for this organisation. This evolves around a commitment to increase the primary health care for every one of our patients. We have a strong commitment to develop and maintain partnerships and more importantly have a strengthened link with every community in our catchment area.

The Board is still focusing on our capital works program, and we will shortly be celebrating the official opening of a new clinic in Nambucca Heads. Services will be recommencing soon for our valued community in Bellbrook as we continue to work with the Thungghutti Local Aboriginal Land Council.

Significant capital has been delivered to the Health Outpost in Bowraville. This was a result of a recommencement of a partnership that ended in 2012. The opening of this newly refurbished facility will be held over until next year as we look at what is needed to respectfully service this community.

Our new building in River Street is in the final stages of approval as the Local health District considers the proposal to build our new facility across from the Kempsey District Hospital.

I congratulate our staff on their resilience. These congratulations are for our medical staff, reception, and transport staff. It certainly has not been easy going for the past year. My sincere thanks to the senior managers who have risen to meet the various challenges.

It is sad that we accepted the retirement of Professor Stephen Blunden who has been a legend in the Aboriginal health industry. I personally thank him for helping Durri ACMS when things were not certain, and I wish him a well-deserved retirement.

My fellow Directors are focused on the future, and we all look forward to taking our Durri ACMS into the strongest possible position and that will lead to better health outcomes for everyone.

Arthur 'Fred' Kelly

Chairperson- Durri ACMS Board of Directors

SPECIAL MESSAGE

I would like the opportunity to Acknowledge Dunghutti Country and pay my respects to our Elders, past, present, and emerging.

I also want to acknowledge Sorry Business in our Communities and send out our condolences to everyone who have lost loved ones over the years.

Sadly, it has come time for me to hang up the gloves, and hand the reigns over to the next generation of leaders. I want to say that it has been an absolute honour to be associated with Durri and the people who have walked these corridors with me over the many years. I am so proud of you all. It has been some journey with many special moments.

And I just want to reflect on this one point, Durri has come from very humbled beginnings on Greenhill mission many years ago, and now we have built a legacy for future generations to shape and grow even further.

I can say I have given my all and it has been an absolute honour to work with my community. I hope I have contributed towards better health in Durri's communities. I want you all to keep supporting Durri.

It is now time for me to enjoy my family, and just relax and go fishing.

Thank you all so much.

Stephen Blunden



ACTING CEO REPORT 2024



Firstly, I want to Acknowledge our beautiful Dunghutti Country and pay my respects to our Elders, past, present and emerging. I also want to acknowledge Sorry Business in our Communities, and send out our condolences to everyone who have lost loved ones.

For background, I came back to Durri in early November 2023 as the Executive Officer of Corporate Services and was appointed into the Acting Chief Executive Officer position on the 5th of June 2024.

I want to thank the former CEO Stephen Blunden for his support, and his efforts to better position Durri over the years. I also want to thank the Board for having the confidence in me to act in this role. I am grateful for the opportunity.

There have been several significant changes across the service this year, more notably the increase in staff and the new programs. We have consolidated our senior management team, and we are building better systems to address our plans and our funding agreements. There is greater emphasis on community development, cultural safety and building capacity in the Drug, Alcohol and Mental Health space. We are also taking steps to establish our own Residential Rehabilitation/Wellbeing Centre in the Durri Footprint. Durri has increased some clinical and dental services, and recruited a Human Resource Management team, which addresses a major gap in our service, particularly with orientation, internal training/workshops, professional development opportunities and the development of career pathways for community members and students.

The Board participated in a two day corporate governance training workshop in August 2024 which was facilitated by Solicitor, Lila De Souza. The training covered the principles of good decision making, compliance with the Durri Rule Book and the Corporations Act 2006, the role of Members vs Directors, Directors' duties, managing conflicts of interest, compliance with the Code of Conduct, and workplace health and safety obligations.

Our patient information management system is currently being reviewed and it will be updated to streamline its effectiveness and efficiency in the near future. We've also developed a Medicare Plan which gives Durri more direction and a goal to aim for so we can continue to grow our services and contribute towards more community initiatives.

As a result of our efforts, more patients are attending Durri in general, with an average of 80 plus patients coming through our doors per day. Health Assessments are being promoted (715's) across our footprint and again more patients are starting access our services and get their 715's done. This all contributes towards a healthier outcome for our community.

I also want to commend staff for their efforts and resilience, and their great teamwork, especially in emergency situations. You make us all proud. In closing I would like to thank the community for your ongoing support and your ability to help us through our hard time. THANK YOU! We look forward to a bigger 2025.

Regards,

Paul Morris

CAPITAL WORKS PROJECTS

Project Management of capital works projects:

Durri have engaged DRA Architects to project manage our capital works projects for the new proposed Durri ACMS site at Kempsey District Hospital, and the new proposed New Darrimba Maarra site at Nambucca Heads. DRA Architects will also work on a Master Plan for our other sites to ensure Durri's financial position and potential moving forward.

River Street, West Kempsey: (New Durri ACMS Site)

Durri's has taken steps to obtain a long term lease (40years) with the Mid North Coast Local Health District, for the new Durri ACMS which will be located at the Kempsey District Hospital site. This was put in motion by the previous CEO and Board from early 2023.

At this stage we are waiting on a Benefits Planning process to be completed, and an approval for the lease from the NSW Ministry of Health.

The new proposed site is situated across the road from the old Accident and Emergency entry at Kempsey District Hospital. This will be a process to get through but well worth it in the long term given the benefit this will give the community being this close to the Hospital.

Short Street, Nambucca Heads: (New Darrimba Maarra)

Durri ACMS has purchased a new site for our Darrimba Maarra Service in Nambucca and has recently obtained \$250K grant for minor capital works on the building. DRA Architects have been engaged to project manage the site and gave us an estimate of when the building may be finished, which is in late February or early March 2025. The new site is much needed for the area and will better position Darrimba Maarra for expansion of its current services.

Bowraville Health Outpost:

Durri ACMS has been formerly invited by the Bowraville community, to recommence services from the site previously known as the Bowraville Health Outpost at Gumbayngirr Road. Discussions are continuing with the Bowraville Local Aboriginal Land Council. At present we have temporarily ceased work until further funds become available to complete works and address the proposed staffing levels for Bowraville. The Bowraville community will still be provided a service from Darrimba Maarra and through the HealthOne in Bowraville. We look forward to working with the Bowraville community in a staged approach, to ensure that the Bowraville community has the best possible health service.

Bellbrook Health Outpost:

Durri ACMS has work closely with the Thunghutti Local Aboriginal Land Council for over 6 months to recommence services at Bellbrook. Services are schedule to recommenced in late October and includes fortnightly GP and Nursing services, Allied Health, Oral Health programs and Programs. Durri will continue to support the Bellbrook community. We look forward to working with the Bellbrook community in a staged approach, to ensure that they also have the best possible health service.

PRIMARY HEALTHCARE TEAM



Norma Kelly –
Practice Manager



RECEPTION & TRANSPORT

Jessica Holten – Snr Receptionist T/L
 Tahnia Brown – Receptionist
 Nesiuan Dixon – Receptionist
 Janelle Holten – Receptionist
 Iris Flanders – Receptionist
 Indiana Teerman – Receptionist
 Kim Caldwell – Medical Records Clerk
 David Welsh – Transport Officer
 Emily Heuston – Transport Officer
 Jacqueline Smith – Casual Receptionist
 Estella Blair – Casual Receptionist



Aim:

The Reception/Transport team are the first point of contact for Durri ACMS and aim to provide a professional and friendly frontline service to our community/staff and external stakeholders.

Achievements of program during this past financial year:

Key achievements include but are not limited to:

- Utilisation of Provider Digital Access (PRODA) for eligible patients to enrol with Closing the Gap (CTG), Medicare verification and service eligibility.
- Training of new staff to ensure competent service delivery to all who engage with Durri ACMS.
- Flexible transport delivery within the Macleay/Hastings areas for patient appointments.
- 715 – 378 claimed – \$88,071.85 (Health Assessments)
- 721 – 301 claimed - \$47,693.20 (GP Management Plan)
- 723 – 320 claimed - \$40,180.35 (Team Care Arrangement)
- 732 – 62 claimed - \$4,909.60 (GPMP/TCA Review)
- A total of 4338 transports conducted

Transport Statistics 1/7/23 to 30/6/24		
Males	Females	Total
1292	2687	4338

Training/Professional Development participation:

- RACGP Medical Reception
- First Aid/CPR
- Child Protection
- Communicare
- Fire Warden
- Aboriginal Mental Health First Aid
- Stress management
- Conflict resolution
- Trauma & Inner Spirit
- Social wellbeing Emotional & Lateral Violence
- Medicare Training AH&MRC

Future Directions

- All staff trained in de-escalation and duress procedures to ensure safety of staff and visitors to our Medical Service.
- Multi-skilled staff to ensure all positions are covered during times of leave if required.
- All staff upskilled in Medicare claiming procedures and guidelines.
- All staff appropriately upskilled in Communicare procedures and guidelines as relevant to their role.



PRIMARY HEALTH CLINIC

Tracy Murrells – Clinic Team Leader

Amy Thompson – Registered Nurse

Noelene Brown – Endorsed Enrolled Nurse

Marissa Widders – Endorsed Enrolled Nurse

Susan Ward - Endorsed Enrolled Nurse

Dr Wendy Olden – General Practitioner

Dr Peter Fletcher – General Practitioner

Dr Nigel Humphreys – General Practitioner

Dr Beom Koh – General Practitioner

Dr Takesure Madzivire – General Practitioner

Dr Neralie Skuker – General Practitioner



Aim:

The aim of the Primary health Care Program is to support our First Nations Community to achieve good health. This means in all aspects of Wellbeing – In Body, in Heart, in Mind and in Spirit.

We are a Medical Service that continues to also offer a walk-in service for our clients as well as appointments. We offer many services apart from acute medical and we listen to our patients' stories and journeys so we can best assist them to find out what they need help with.

The Clinical team is a group of committed Doctors, Nurses and Aboriginal Health workers who are all passionate about working at “closing the gap” of inequality whilst providing the best possible health service.

Achievements of program during this past financial year:

Key achievements include but are not limited to:

- We have managed to remain functioning through demanding times.
- We currently have 5 Doctors who are regular faces for our patients – Dr Wendy Olden, Dr Peter Fletcher, Dr Nigel Humphreys, Dr Blessing Madzivire and Dr Beom Koh. This is hugely beneficial to ongoing continuity of care.
- Our GPs offer a range of consults such as Care Plans, Health Assessments, Workcover, Mental Health Treatment Plans and Obstetrics, just to name a few. Again, thanks to our committed staff for their assistance during a particularly busy year.

- Our Iron infusion Clinic now runs throughout the week via booked appointments, enabling our patients to attend Durri as an alternative to the Hospital. This can help particularly when there may be longer wait times for appointments at the Kempsey District Hospital.

Future Directions

We are excited to offer outreach services to Bellbrook and Bowraville communities in the very near future, which continues a long tradition of supporting our sister communities.

We would like to continue to assist, educate and learn from our community in a partnership that is based on mutual trust and respect and a shared commitment to fostering stronger bodies, hearts, minds, and spirits.

We look forward to ensuring all staff are upskilled in Medicare claiming procedures and guidelines and ensure that all staff are appropriately upskilled in Communicare procedures and guidelines as relevant to the role.

We aim to Improve pathways and partnerships with key stakeholders.

CHRONIC DISEASE

Tony McMahon – Team Leader Clinical Chronic Care Services

Lee Moroney – Chronic Care RN

Deborah Faucett – Chronic Care EEN

Karen Foster – Chronic Care SAHP

Barry Phyball – Trainee AHP

Lisa Brown – ITC Coordinator

Aim:

Our Chronic Disease Care Services here at Durri are for Aboriginal patient starting at 15 years and over with more than one chronic disease. Having the chronic disease at Durri aims to improve health outcomes for Aboriginal and Torres/Strait Islander people within our footprint by providing culturally appropriate care.

We aim to do this by:

- Holistic Care: addressing physical emotional and social wellbeing
- Prevention and management: focusing on the prevention and effective management of all chronic diseases
- Cultural Competence: ensuring services respect and integrate Aboriginal cultural values
- Community Engagement: Actively Involving the community in health education and decision making
- Capacity building: training and supporting Aboriginal Health Workers to enhance community services
- Access to care: improving access to health care services and resources

Achievements of program during this past financial year:

- Within the reporting period we continued to enjoy the strategic co-location with the NSW Health/KDH with easy access to Pathology, Renal Unit, Community Health & Emergency Department Services.
- During the November/December period we had an upsurge in care plans due to the consistent availability of GPs. Our patients were followed up immediately when attending Cardio, Endo & Renal Clinics.



Future Directions:

- Our goal would be to have a dedicated GP for Chronic Disease Patients.
- Ideally, we would all like to meet our end KPIs (100% Health Assessments & 100 % Care Plans will ensure these are met). To meet sector KPI percentages is a step in the right direction. National benchmarks are the large next step.
- Our goal is to improve patient attendance at Specialist Clinics and for Care Plan appointments.
- We aim to Improve pathways and partnerships with key stakeholders.



ORAL HEALTH

Dr Roshan Abraham – Dentist

Jonine Gilmour - Dental Therapist

Mayta Smith - Dental Assistant

Bradley Kershaw - Trainee Dental Assistant

Ky-Tayha Kelly Nean - Trainee Dental Assistant

Ella Cooper - Casual Dental Assistant



Aim:

The Oral Health Program aims to:

- Improve oral health of the First Nations people within Durri’s footprint.
- Improve the oral health of people attending the dental program.
- Improve access to dental services through outreach programs via mobile dental vans.
- Provide denture services to Durri patients in need.
- Employ more First Nations people in dental services.
- Reduce traumatic dental injuries through the provision of mouthguards.
- Create partnerships to develop oral health projects in our community.
- Use incentives such as CDBS to enhance budgetary support.
- Meet funding KPIs.

Achievements of program during this past financial year:

1. Funding KPI from the NSW Health Ministry Centre for Oral Health Strategy is the total Dental Weighted Activity Units.
2. In 2022 to 2023 the Dental Weighted Activity Units achieved was 732.73, and in **2023 to 2024 the Dental Weighted Activity Units achieved 725.00**. For both financial years Durri ACMS dental service has exceeded the funding KPI as stipulated by the NSW Health Ministry, Centre for Oral Health Strategy.

The following indicators are to be provided directly to COHS- Titanium Service Profile Report.

Indicator Title	Indicator Description	Frequency of Reporting	Commencement of Reporting Period
Oral Health Service Delivery	<p>Your Organisation must provide data for:</p> <ul style="list-style-type: none"> • Deliver 674 Dental Weighted Activity Units (DWAU) annually <p>Provide the Titanium Service Profile Report to the Centre for Oral Health Strategy by close of business by the 5th day of each month.</p>	Monthly	1 July 2022

The DWAU target will be escalated each year in line with any funding escalation applied.

Below table provides comparative totals for years 2016 to 2014.

Financial Year	Dental Weighted Activity Units	No of Patient seen	No of Treatments provided	Estimated \$ value of services provided under the Public oral health service charter
2015 - 2016	610.61	960	7057	\$362,196.44
2016 - 2017	747.80	1218	9611	\$448,510.20
2017 - 2018	734.50	1232	9892	\$439,759.78
2018 - 2019	588.91	1080	7823	\$352,682.31
2019 - 2020	523.04	958	6941	\$311,381.72
2020 - 2021	547.68	868	6658	\$323,680.99
2021 - 2022	462.33	796	5917	\$276,452.94
2022 - 2023	718.56	1028	8588	\$430,078.24
2023 - 2024	725.51	1224	9632	\$433,813.49

3. Revenue achieved from the Commonwealth Dental Benefits Scheme for financial year 2023 to 2024 is \$115,309.55.

The following table provides comparative totals of revenue of CDBS.

1.7.2019 – 30.6.2020	\$50,255.80
1.7.2020 – 30.6.2021	\$45,526.20
31.7.2021 – 30.6.2022	\$80,028.35
1.7.2022 – 30.6.2023	\$126,908.40
1.7.2023 – 30.6.2024	\$115,309.55
Total Revenue from CDBS	\$466,004.90

Source: Communicare 1.7.2024

4. A total of 9638 treatments were completed on 1225 patients, over 2383 visits to the dental clinic.

Source: Titanium 1.10.2024

- Durri now has a purpose-built health van that can and does provide outreach services to schools and communities. It is currently situated at West Kempsey school and provides dental services on Tuesday and Thursday.

	Age 2-17	Age 18-100	Unknown/Other	Total
Total Number of Operators	9	9	4	9
Total Patients in Period	581	630	14	1225
Total Visits in Period	1219	1144	20	2383
Total Treatments in Period	4559	5009	70	9638
Average Visits per Patient				1.89
Average Treatments per Visit				3.89
Average Treatments per Patient				7.57
Total DWAU Value	333.14	387.77	4.09	725.00
Average DWAU per Patient				0.59
Average DWAU per Visit				0.30

- Durri is hosting Bachelor of Oral Health Students from the University of Sydney currently on their fourth rotation.

The visiting Bachelor of Oral Health students for 2023 and 2024 were Samantha Peach, Vanessa Po, Henry Wu. Razan Bahnam, Katerina Lyras, Ali Scheiwani, Sabrina Hakami.





Future directions:

- Include dental services through Bowraville.
- Support to provide population wide oral health promotion activities.
- Orthodontic services.
- Introduce the provision of denture services for eligible Durri clients.
- A Mums and Bubs program to train young mothers in developing healthy oral health practices for their newborn.
- Work in conjunction with the Kempsey Shire Council to include Fluoride in the water supply to reduce dental decay.
- Develop projects in consultation with other programs in Durri to improve oral health of our community members.
- Organise dental forum for key stakeholders to bring about better oral health outcomes for our communities.
- Work with internal and external stakeholders to provide quality oral health services.
- Continue the roll out of school-based services via the mobile health van.
- Increase CDBS revenue.
- Funding baseline for denture services through the Centre of Oral Health Strategy.
- Expansion of services to neighbouring AMSs having difficulty recruiting dental staff.
- Recruitment of an oral health therapist.
- Ensure all local water supplies have optimum fluoride levels.
- Improve pathways and partnerships with key stakeholders.

DARRIMBA MAARRA OUTPOST



Terri Jarrett –
Manager



DARRIMBA MAARRA HEALTH OUTPOST

Terri Jarrett – Practice Manager Darrimba Maarra
(Nambucca Valley)

Aim:

As practice manager for Darrimba Maarra my aim is to ensure the delivery of culturally sensitive, high-quality healthcare to our patients. I strive to create a welcoming and supportive environment that respects and integrates traditional practices with modern medical care. My focus is on enhancing operational efficiency, fostering a collaborative team culture, and advocating for the health needs of our community. By prioritising patient-centred care and continuous improvement, I aim to contribute to closing the health gap and promoting overall well-being within our community.

Achievements of program during this financial year:

This year, as Practice Manager, I am proud to highlight the significant strides we have made in enhancing client care and staff wellbeing. This year, our team has dedicated significant efforts towards streamlining patient care to ensure adherence to best practices across all touchpoints. By prioritising preventative care, we have aimed to mitigate potential health issues before they arise, thus fostering overall wellness within our patient community.

Additionally, we have placed a strong emphasis on supporting patients living with chronic diseases, providing them with the necessary resources and guidance to maintain a healthy lifestyle. Our holistic approach not only enhances the quality of care but also empowers patients to take an active role in managing their health, leading to better outcomes and a higher quality of life.

Our clinical staff report highlights a patient journey that highlights the patients care, however the patients journey commences from the time they walk through our doors. From their interaction with our dedicated reception and transport staff to their health journey with our clinical staff. Our wrap around approach is paramount to ensuring patient needs are met.

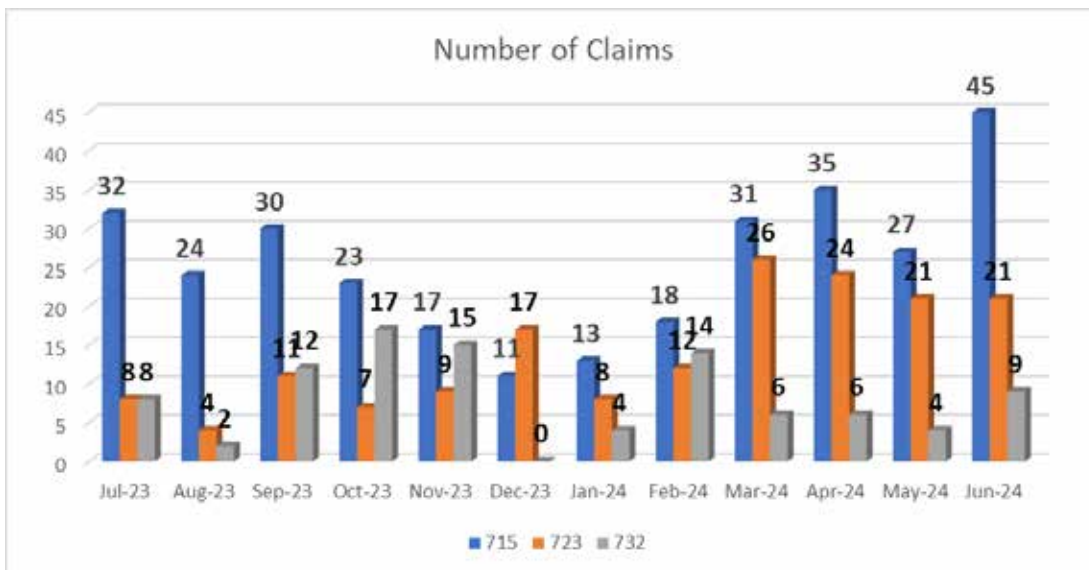
Staff emergency care training has been utilised many times over the course of the year with many presentations of chest pain and or a patient that has attended in need of emergency medical care that staff have provided while awaiting emergency services to arrive. This emergency training starts with our frontline staff in reception, staff can identify with training and the use of the POP triage chart when a patient needs urgent triage. All staff have enacted the emergency plan with great communication throughout the emergency resulting in best practice care for the patients.

2024 Events:

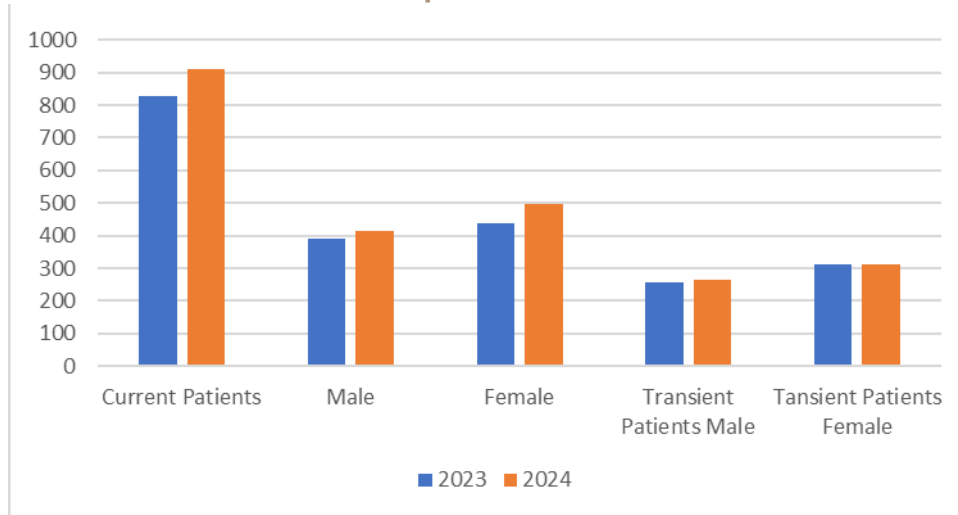


With events run and or supported through Durri we have had a very eventful year from sponsoring the Roosters indigenous round to working alongside organisations to host a NAIDOC bingo event. Along with celebrating “Close the Gap” day.

Staff wellbeing has been a key focus, as always staff get together and bring in different treats to enjoy a morning tea along with staff appreciation lunch. This is a show of comradery to always remember to continue team building, bonding, and creating a positive work environment. To add to staff wellbeing as we work in at times a high stress environment we have added a peaceful pause area where puzzle pieces await to build the complete picture, Staff will take a five minute break to pause and reset before moving onto the next task be it a transport, patient care and or completing admin task, as required for patients to have a smooth consultation when attending Darrimba Maarra.



Patient comparison 2023 to 2024



Future directions:

As we transition into our new building, we are thrilled about the opportunities this expansion brings for Nambucca Valley and surrounding areas that access Darrimba Maarra. The additional space will allow us to offer a wider range of services and accommodate more allied health staff, ensuring comprehensive care for our patients. Our growing team is committed to maintaining the highest standards of care, and we eagerly anticipate another year of best practice in patient treatment. Furthermore, we aim to enhance our staff's education and training programs, enabling them to provide exceptional care consistently. A key focus will be the continued effort to close the gap in Aboriginal Health, ensuring equitable access and outcomes for all members of our community. We are excited about the future and the positive impact these advancements will have on the health and well-being of our patients.

RECEPTION & TRANSPORT

Corrinna Dahlstrom – Receptionist

Susan Edwards - Receptionist

Christopher Donnovan- Transport Officer

Nathan Cooper - Casual Transport Officer

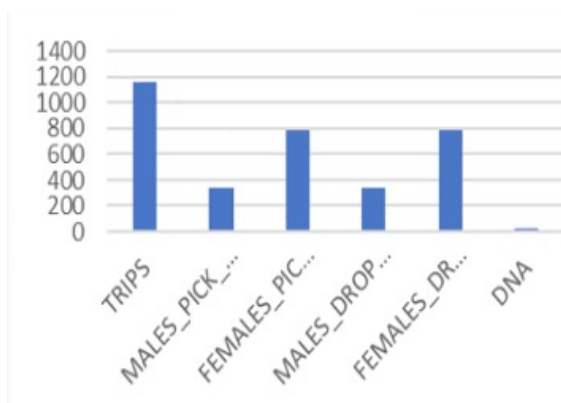
Aim:

Our role is crucial as we are the first point of contact for our patients, offering warm and efficient assistance to ensure seamless scheduling, information dissemination, and a welcoming environment. We are integral in maintaining the smooth operation of Darrimba Maarra and contribute significantly to the overall patient experience.

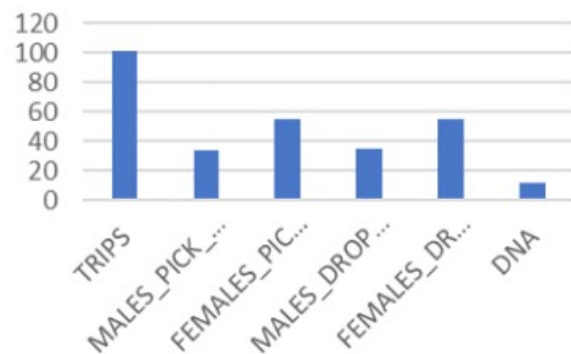
Similarly, our transport officers play a vital role in ensuring that patients have safe and reliable transportation to and from Darrimba Maarra, thereby removing potential obstacles to accessing care. Our dedicated efforts significantly contribute to fostering a supportive and accessible environment, aligning with our goal of prioritising patient care and well-being.

Achievements of program during this past financial year:

Transport Statistics



Transport Driver A



Transport Driver B

DARRIMBA MAARRA CLINICAL PROGRAM

Irina Holmes - Registered Nurse

Natalie Wood - Registered Nurse

Genetta Carberry - Aboriginal Health Practitioner

Dorothy Cohen - Child & Family Health AHW

Aim:

The aim of our clinical staff is to continue delivering exceptional healthcare while upholding our commitment to cultural inclusivity and community wellness. With a team that includes two registered nurses, one Aboriginal health practitioner, and one child and family health Aboriginal health worker, we provide comprehensive and culturally sensitive care to our diverse patient population. Our focus is to further strengthen our patient-centred approach, address health disparities within the community, and ensure that our services reflect an understanding of the unique health needs of our patients. Through collaborative efforts and a steadfast dedication to excellence, our clinical team is committed to making substantive contributions to the health and well-being of our community.

Achievements of the program during this past financial year:

- Our dedicated clinical staff have achieved numerous milestones this year, demonstrating their unwavering commitment to delivering high-quality, culturally sensitive care.
- Successful implementation of health and wellness initiatives.
- Demonstrated commitment to delivering high-quality and culturally sensitive care.
- Exceptional teamwork and collaborative efforts to enhance patient outcomes.
- Consistent focus on continuous improvement in patient care and service delivery. Positive impact on patient satisfaction and well-being through compassionate care and dedication.

We are thrilled to announce the addition of an inspiring Aboriginal health practitioner to our team, who has excelled through our comprehensive study support program. This dedicated individual has demonstrated remarkable resilience and commitment to both their education and their community. By integrating traditional knowledge with contemporary health practices, they bring a unique and invaluable perspective to our healthcare services. Their journey exemplifies the power of education and support in empowering future leaders, and we are confident they will make a profound impact on our collective efforts to provide culturally sensitive and holistic care.

A patient was struggling with uncontrolled diabetes, experiencing frequent hypoglycemics episodes that severely impacted their overall health. The patient's blood sugar levels

fluctuated wildly, and their HbA1c was alarmingly high at 10.3%. The situation was dire, and their quality of life was suffering. However, our dedicated clinical team was determined to help the patient regain control over their health. Through tireless effort, our diabetes education clinics, endocrine specialists, and nursing staff collaborated closely. They provided the patient with personalised care plans, consistent follow-ups, and invaluable education on managing this condition.

Over the ensuing months, the patient has gone through an added diagnosis requiring treatment, the patient's commitment to their health, paired with our team's unwavering support, began to yield remarkable results. The patient attended all appointments diligently and adhered to the advice and strategies provided by our specialists. Gradually, the blood sugar levels stabilized, and their hypoglycaemic episodes became a thing of the past. The patient transitioned from insulin injections to oral medications, a significant milestone in this treatment journey. The HbA1c dropped from 10.3% to a much healthier 6.8%, reflecting the tremendous progress he had made. Today, the patient's diabetes is well-controlled, and they are enjoying an improved quality of life, thanks to the collaborative efforts of our clinical team and their own dedication to managing their health.

Future directions:

Through their collective efforts, they have successfully facilitated health and wellness initiatives that have positively impacted our community. Their exceptional teamwork, compassionate patient care, and commitment to continuous improvement have been instrumental in significantly enhancing patient outcomes and satisfaction. The clinical staff's tireless dedication and exceptional contributions have truly set a standard of excellence within our organisation, and we are immensely proud of their achievements.



PROGRAMS



Alicia Stewart –
Programs Manager



ABORIGINAL MATERNAL INFANT HEALTH SERVICE

Kate Jones - Midwife

Delya Smith - Aboriginal Health Worker

Aim:

The Aboriginal Maternal & Infant Health Service (AMIHS) aims to:

- Provide culturally safe antenatal care to Aboriginal women during their pregnancy journey.
- Support and encourage pregnant women for early attendance.
- Follow-up home visits for 6 weeks post - partum depending on suitability for the mum.
- To create a trusting environment that is non-judgemental and confidential.
- To understand their thoughts and feelings and speak with clients in a culturally appropriate way.
- To support and encourage clients to have ownership of their decision making.
- To understand and respect a patient's history and heritage.
- Follow-up phone calls to remind clients of appointments related to antenatal and postnatal care.
- Provide ongoing transport

Achievements of the program during this past financial year:

- Aboriginal Health Worker commenced May 2024 to join the Midwife and Doctor team to strengthen the program and support Aboriginal Pregnant women.
- Achieving Aboriginal designs to identify the AMIHS program.
- Establishing a partnership with the Coolamon Community Corporation.

Future directions:

- The team will continue to improve service delivery to all pregnant women who present at Durri ACMS.
- All pregnant women in the AMIHS program to complete a Health Assessment (715) by 30 weeks. Once complete they will be eligible to receive a Coolamon Crib.
- Produce more educational material for the AMIHS program.
- Improve pathways and partnerships with key stakeholders.



AUSTRALIAN FAMILY PARTNERSHIP PROGRAM



Irene Weiss- Nurse supervisor

Martina Rosas - Nurse Home visitor

April Collins- Nurse Home visitor

Tahlia Duroux-Lancaster - Family partnership worker

Justine Green - Family partnership worker

David Fernando - Family partnership worker

Aim:

The Australian Family Partnership Program (AFPP) aims to improve maternal and child health and wellbeing for Aboriginal and Torres Strait Islander families. This is achieved, by assisting women to engage in good preventative health practices, supporting parents to improve child health and development, and assisting parents to develop a vision for their own future.

Achievements of the program during this past financial year:

We are happy to say that we now have a full home visiting team, the team supports each other to deliver the best possible program we can. We are very lucky to have a male FPW to allow us to build better therapeutic relationships with our families and offer increased support to the dads in the program.

We have been working on community engagement and have successfully participated in many community events. Community events are always a great opportunity to network with other providers and are also great for team building.

We have completed a rebranding.

We continue to hold group events for our clients to encourage engagement and networking between AFPP clients. These events are so important, as they offer numerous opportunistic education moments, such as healthy eating discussions.

The AFPP team flew to Adelaide to do a site visit. This was important as none of the staff have completed a site visit, so it was fantastic to see how another site operates. It not only gave us some fantastic ideas to implement at our site but was a great team building exercise.

We have secured our own space and will be moving to the Durri site at Kempsey District Hospital. It will be amazing to have our own space to enable us to create a welcoming, safe, homely environment. We hope that we have increased referrals and engagement because of that.

Future directions:

- To increase external referrals by further strengthening relationships with external stakeholders.
- To increase knowledge of the program in both the Kempsey and Nambucca Valley within those communities.
- To improve client engagement.
- Improve pathways and partnerships with key stakeholders.



CHILD & FAMILY HEALTH



Bronwyn Smith - Aboriginal Health Worker

Kim Wright - CNC, RN, CFHN, Paediatric Nurse

Tracey Houston - RN, CFHN

Kylie Shearer - RN, CFHN, Paediatric Nurse

Aims:

The Child Health Program (6 weeks to 14yrs) aims to provide a holistic service in collaboration with the entire Maternal, Child and Family health team, families, and carers to promote optimal health, growth, and development for the child.

Durri Child & Family Health Program provides:

- Universal screening and Blue Book checks.
- Health Assessments and Immunisation services.
- Support to families in their role to optimise the health, wellbeing, and development of the infant & child/teen.
- Identify as early as possible, children who may have developmental or other health problems.
- Identify as early as possible those parents, families and children who may require additional support to promote optimal physical, social, and emotional development.
- Improve the health outcomes of those individuals identified as having problems or difficulties, by enabling early access to appropriate and timely services and supports.

Achievements of the program during this past financial year:

During the period 2023 to 2024 Child Health Program has:

- Employed another Part Time Child and Family Nurse (Kylie Shearer) 3 days a week.
- Provided 533 health assessments for Babies, Children and Teens 0-14 years age.
- Provided 380 Blue Book checks for Babies 6wks to 4 years.
- Provided 824 scheduled and opportunistic immunisation encounters for babies, children, and teenagers (0-14years) to maintain up to date childhood immunisations as required and the Durri Flu Vaccination Campaign.
- Provided a comprehensive service for babies and children with complex needs.
- Co-ordinated and facilitated 18 Paed Clinic for Dr Jim Kerr with 293 children and 10 Paed Clinics for Dr Mark Johnson with 203 Children seen. Paediatric Clinics were conducted at Durri Kempsey for Nambucca and Kempsey Clients.
- Negotiated the continued service of Paediatrician Dr Jim Kerr with Durri ACMS to ensure timely access to Paediatric services for Durri children. Maintained Dr Kerr's clinical services at 18 clinics per year reducing the wait time for Paediatric assessment.
- Continued providing complex HA and Care Plans for children in Out of Home Care programs (OOHC).
- Attended Immunisation, CPR updates and all Mandatory Durri Training including fire and Mental Health First Aid training.
- Managed COLD CHAIN for all Immunisation services at Durri.
- Maintained the NSW Health Staff Vaccination Compliance Policy at Durri for all new and existing Durri Staff and an Immunisation Record Card for all Durri Staff Members.

Future directions:

- Continue to increase Child Health Service immunisation, blue book checks and health assessment provision at Durri ACMS.
- Continue to provide opportunistic Immunisation services to maximise the rate of immunisation for Aboriginal babies, children, and teens.
- To continue providing complex HA's and care plans for children in OOHC programs.
- To continue to provide Specialist Paediatric Clinic Services at Durri with high attendances.
- To continue to undertake Health assessment for Clontarf Programs for local high schools in collaboration with Durri's AHWs and AHP's.
- To continue to provide a streamlined service for Families, their babies, children, and teenagers when seeking Health Care services at Durri.
- To secure a female GP to enable the Child Health Team/Generalist AHWs to provide health assessment and immunisation services to the high school NASCA program for girls.
- Seek RDN funding to employ a Paediatric Occupational Therapist.

- Fill the Family Worker Position at Durri to assist families requiring extra support.
- Deliver Outreach Child and Family services to Bellbrook Community when Durri commences outreach on site to Bellbrook.
- Improve pathways and partnerships with key stakeholders.



ALCOHOL & OTHER DRUGS

Shane Holten – Aboriginal Health Worker

Aim:

The program aims to support persons affected by Alcohol and other drug use and promote the reduction of substance use within the community and is a primary focus of service delivery.

The program incorporates and supports patients in case management of their addictions, advocacy with agencies, one on one support, family support, referrals, and other assistance as required.

Achievements of the program during this past financial year:

Increased community engagement by participating in NAIDOC week and men's group yarn ups.

Future directions:

- To complete further studies.
- Funding for a female position of Drug and Alcohol.
- Commence a Youth AOD Education program within the community.
- Improved service coordination and partnerships.
- Additional funding to extend the program into the Nambucca Valley.
- Improve pathways and partnerships with key stakeholders.



HEARING HEALTH

Theresa Silva – Aboriginal Health Worker



Aim:

Hearing health program aims to improve hearing health of Aboriginal and Torres Strait Islander people within the Durri ACMS footprint.

Achievements of the program during this past financial year:

Australian Hearing Clinics are carried out at Durri for children above 4 years of age to adults, children under the age of 4 and those with special needs are seen at the Port Macquarie Centre.

- Total patients seen by hearing Australia Audiologist Michelle Liong for Durri ACMS (84).
- Total patients seen by Hearing Australia Audiologist Megan Hardie porter for Darrimba Maarra (15) due to a few clinics being cancelled due to Audiologist being away.
- Total patients seen by visiting ENT specialist Bill Johnston (44) patients.
- Total patients seen by visiting ENT specialist Professor Robert Eisenberg (28).

Future directions:

Improve pathways and partnerships with key stakeholders.



EYE HEALTH

Theresa Silva - Aboriginal Health Worker

Aim:

Eye Health program aims to prevent early eye disease in our patients to improve the quality of life to our patients. We are proud to provide the community with a visiting Optometrist who delivers monthly clinics of one day and a half day at Durri ACMS and one day per month at Darrimba Maarra Health Outpost.



The AHW/P coordinates clinics ensuring our Patients attend their appointments and follow-ups and referrals to specialists if needed.

The Optometrist provides eye care and testing, and management of visual conditions to provide eye health care to our Aboriginal Torres Strait Island patients within the Durri ACMS footprint.

The Optometrists after examination may prescribe glasses or lenses to correct some visual problems, they may advise the Aboriginal Health Worker/Practitioner on eye health education and medical terminology if the patient do not understand.

The Optometrist specialises in eye care and regularly examine our patients' eyes and prescribe glasses or lenses provide spectacles.

Achievements of the program during this past financial year:

Total patients seen by visiting optometrist Jenny Crosbie-Walsh	
Attended (booking)	193
Attended (extra)	41
Attended (walk-in)	33
Booked - did not attend	128
Cancelled - Cancelled by patient	80
Cancelled - Cancelled by service	47
Cancelled - Queue for rescheduling	14
Cancelled - Rescheduled	39
Waiting	1

These numbers cover both Durri ACMS and Darrimba Maarra Aboriginal Health Services.

Future directions:

- Complete Audiometry certificate with TAFE NSW and become a qualified Audiologist.
- Decrease failed to attend rates.
- Improve pathways and partnerships with key stakeholders.

TARGETED EARLY INTERVENTION

Charleigh Kennedy - Aboriginal Health Practitioner

Aim:

The Target Early Intervention Families First program is to provide support and resources to families with young children, especially who are at risk of facing significant challenges. The program aim is to promote early childhood development, improve family functioning, and prevent issues that could escalate and affect the child's wellbeing. TEI offers services such as parenting support, educational resources, and access to community services to help families address challenges early and effectively.

Achievements of the program during this past financial year:

The Target Early Intervention Families First Program has achieved several notable outcomes:

- **Improved Child Development:** Enhanced early childhood development through targeted support and resources for families.
- **Strengthen Family Functioning:** Increased parental skills and family stability, leading to better overall family dynamics.
- **Prevention of Issues:** Reduced the likelihood of more serious problems by addressing challenges early leading to better long-term outcomes for children.
- **Increased Access to Resources:** Facilitated better access to community services, healthcare, and educational resources for at risk families.
- **Enhanced Parenting Practice:** Provided valuable parenting education and support, improving parenting practices and child-rearing approaches

These achievements have contributed to healthier families and better developmental outcomes for children.

Future directions:

- **Improve pathways and partnerships with key stakeholders.**
- **Broader Reach:** Expand its services to more families and communities ensuring that more at risk children benefit from early intervention.
- **Enhanced Integration:** Develop more integrated approaches with other community services and health systems to provide a more holistic support network for families.
- **Stronger Long-Term Outcomes:** Focus on long-term follow-ups to track and improve the sustained impact on child development and family well-being, ensuring that early interventions lead to lasting positive changes.
- **Data- Driven Improvements:** Utilise data and research to continuously refine and improve program strategies, ensuring that interventions are evidence based and effective.

- Increased Funding and Support: Secure additional funding and resources to expand and sustain program efforts, allowing for more comprehensive services and outreach.

These future achievements could significantly enhance the program's effectiveness and broaden its positive impact on families and children.



EARLY CHILDHOOD EDUCATION

Charleigh Kennedy - Project Officer

Aim:

The Supporting Families into Early Childhood Education Program (SFIECE) was a pilot program. The program aimed to increase access to high-quality childhood education for families, particularly those from underserved and disadvantaged backgrounds. The specific objectives included:

- **Expanding Access:** Making early childhood education more accessible to families who might otherwise be unable to afford or participate in such programs.
- **Enhancing Family Engagement:** Providing resources and support to help families navigate and engage with early childhood education services effectively.
- **Improving Educational Outcomes:** Ensuring that children from diverse backgrounds receive the early learning opportunities necessary to support their development and future academic success.

Overall, SFIECE aimed to address barriers to early education and promote equitable learning opportunities for all children.

Achievements of the program during this past financial year:

- 43 Client sign up to the SFICE Program
- 10 Clients enrolled into kindergarten
- 15 Clients enrolled into Preschool and/or Daycare
- 13 Clients on waiting list for a vacancy in a Preschool and/or Daycare
- All clients received all immunisations, Health Checks, and developmental check
- Worked with 27 Preschools and Daycares across the Durri footprint
- Continuing to have immaculate relationships with all Stakeholders

Future directions:

Unfortunately, the SFIECE program was a Pilot initiative, and its funding discontinued as of December 2023.

NDIS ABORIGINAL DISABILITY LIAISON OFFICER

Debra Morris

Aims:

The ADLO program in partnership with NACCHO is to develop and implement the following service delivery within Durri's footprint,

- Create, advocate and support external and internal linkages for ATSI patient/NDIS clients.
- Education Awareness of NDIS/Disability program for the ATSI community and clients to access NDIS and mainstream NDIS services, community and ACCHO services for help to support informed NDIS decision making regarding access and appropriate support on a NDIS plan, support maintain and optimize NDIS support, support ATSI people to organize and attend appointments to obtain functional assessments and evidence required for access requests.
- Provide Culturally appropriate and trauma informed support to ATSI people to ensure they engage and interact with NDIS.
- Stakeholder engagement- create and build positive relationships with the Partners in the Communities (PITC) and National Disability Insurance Agency (NDIA).
- Stakeholder Engagement - build relationships with PITC to link ATSI NDIS potential participants and build trust between PITC and ATSI.

Achievements of the program during this past financial year:

- Program Team established - Aboriginal Disability Liaison Officer (ADLO) sits with Chronic Disease Team (CDT) and links in with Primary Health Team, Early Childhood Services, Social Emotional and Wellbeing (SEWB) Team, Families and Young People services and other Durri services.
- Linkages created and continuing such as internal/external referrals from all staff for NDIS /disability patients- potential participant and NDIS registered participants.
- Community Engagement - We have attended and delivered services to the below Community Groups:
 - » 8th March International Women's Day
 - » 10 April Meet and Greet Services Australia
 - » 29th February - Kinchela Boys Home - Elders Chair Yoga
 - » 15th&24 April Tabatinga Day – Child and Family Team event
 - » 17th&26th April Family Movie Days – Child and Family Team Event
 - » 18th April – Family Day Macleay Valley Farm Day – Child and Family Team Event



- » 23 April KBH – Family Beach Day Cresco Day
- » 29th May Reconciliation Walk(school) 21st June Melville High school, 17th June Kempsey West Primary School & 27th June South Kempsey Primary school.
- » 8th June Food Bank with Aboriginal Affairs
- » Hastings Macleay Clinical Network (MNCLHD) 17,24 ,18, & 25 June – Shady Ladies Program.

Referral pathway is being established through internal and external referrals are occurring more. The total number reached within the community 800 people consulted 460 referrals as of now is 46 with more to come.

In the reporting period:

Total Number of people with disability engaged within the reporting period	46
Number of people with disability assisted in accessing the NDIS	16
Number of people with disability assisted in accessing the NDIS who were successful – met access (if known)	16
Number of NDIS participants having ongoing support after successfully accessing the NDIS	16
Number of people with disability assisted to link to non-NDIS services / supports	10
Number of NDIS-related community activities:	
Attended	49
Supported	46
Delivered	9

Future directions:

I would like to see the NDIS Team grow to be able to service more of our ATSI community clients within the Durri footprint and be able to meet the eligibility criteria of the NDIS process to eventually close the gap. The program is aiming to improve pathways and partnerships with key stakeholders.

Debra Morris will attend the ADLO gathering in Cairns in July, the theme will be “NDIS is part of my story”, collectively there were 30 ACCHOs, 48 ADLOs, Managers and CEOs with a combined years of experience in the disability sector of 689 years.

SUICIDE PREVENTION & EDUCATION

Adam Robertson

Aim:

This program has had an extension of funding.

Originally the program was funded until June 2022 and has now been extended until June 2025.

As this program is not a clinical based program for Aboriginal youth aged 12-24 years, major activities for this area are:

- Contributes to team knowledge about referral resources appropriate to the goals of clients participating in the program.
- Provides Suicide Prevention and Education related information to potential clients and their families of Aboriginal youth aged 12-24 years.
- Provides ongoing cultural information and participates in team-based discussion and decision-making matters pertaining to Suicide Prevention and Education.
- Participate in the development of Suicide Prevention and Education promotions and education strategies ensuring feedback from the community is incorporated into planning pertaining to Aboriginal youth aged 12-24 years.

Achievements of the program during this past financial year:

- Funding extension

Future directions:

- Recruitment of a Female Suicide Prevention and Education Officer
- Improve pathways and partnerships with key stakeholders.

WOMEN'S HEALTH

Cathy Turnbull – Registered Nurse

Aim:

The Womens Health Program aims to:

- Advocate/ liaise in Women's Health
- Promote Preventative Health for Aboriginal women. CSTs and Mammograms
- STI checks
- Postnatal Checks
- Referral to GP for abnormal results, contraception, infertility.
- Education re menopause and other Women health issues
- Assist GPs in contraceptive procedures. Eg Mirena IUD insertions

Achievements of the program during this financial year:

Hosted BreastScreen NSW in June 2024 with 17 people being screened, with 6 of these being new to the service and 4 lapsed screeners attending.

Future directions:

- To improve KPIs for Cervical screening at Durri.
- Continuation of Women's health Clinics with the help of an Aboriginal Health Worker for community consultation and referral to Womens Health Program at Durri for preventative health.
- Improve pathways and partnerships with key stakeholders.



SOCIAL & EMOTIONAL WELLBEING

Peter Bodell – Psychologist, SEWB

David Cutmore – Aboriginal Health Worker, SEWB

Victoria Tremble – Aboriginal Health Worker, SEWB

Aim:

Social and Emotional Wellbeing (SEWB) service aims to assist and improve the social and emotional wellbeing of Aboriginal families residing in the Kempsey and Nambucca valley Local Government area, across the Dunghutti, Thunghutti and Gumbaynggirr nations.

The SEWB service aims to increase availability of culturally safe, professional, and coordinated supports for Aboriginal children, young people, families and more broadly communities within the Durri ACMS footprint.

The service also aims to improve families overall social and emotional wellbeing, to see a significant reduction of problematic alcohol and/or other drug use, a reduction in mental health concerns and mental health plans in place, and to see a reduction in emotional distress, thoughts of suicide and/or self-harming behaviours, ultimately to see a reduction of ongoing chronic mental illness and suicide.

Peter Bodell is a recent addition to the services provided at Durri AMS. Originally from California, USA, Peter is a Registered Psychologist who has been providing services to the Dhungutti/Thunghutti community since 2018 previously working in Aboriginal Out of Home Care in Kempsey. He has experience in Bush Adventure Therapy, working with “at risk” young people on hiking and camping excursions and outdoor “walk and talk” style counselling. Peter offers culturally safe and empirically based psychology intervention strategies such as Narrative Therapy and aspires to support his clients to re-encounter themselves in the natural world and find deep connection with their life journey from that place of belonging.

Peter has joined Durri AMS to provide psychological counselling services to its patients as well as to its staff. Peter also provides professional letter writing for Centrelink, NDIS and other support services requiring mental health advice. In-house counselling at Durri offers a safe and confidential space where staff can receive support without any worry about confidentiality breaches in the workplace. Peter was also brought on board to support community programs such as Culture Camps, providing therapeutic assistance to outdoor excursions on Country for disengaged or “at risk” young people who are not involved with school-based programs.

Achievements of the program during this past financial year:

- Continued development of Durri SEWB model.
- The recruitment of a psychologist.
- The recruitment of Aboriginal Identified Alcohol & Other Drugs Worker.
- The recruitment of Aboriginal Identified Drug & Alcohol Youth & Education Worker.
- The continued establishment of a counselling service at Durri ACMS.
- The continued development of collaborative partnerships & facilitation of care co-ordination with local service providers across both community and government departments.
- Working with AHW – Alcohol & Other Drugs.
- Working with AHW – Drug & Alcohol Youth & Education.
- 169 counselling sessions completed all on country.
- 4 Long term clients now in employment due to counselling and mental Health Consults to limit negative impacts on wellbeing and Motivational Interviewing.
- Completed AOD skill Sets Counselling Training with AHMRC to enhance skills
- Client Support Group created, and 3 days of activities completed.
- Attended and supported in setting up Men's Day at Bowraville 040723 during Naidoc week.

Future directions:

- Increase community awareness and decrease stigma of mental health.
- Decrease the number of admissions of our people into the mental health unit at the hospitals.
- Build stronger ties with other community-based organisations to build community wellness.
- Increase workforce to respond to community needs.
- Move to Bigger Building to do Counselling Sessions in own office to Improve health and Safety for staff.
- Increase in Numbers of Client Support Group and Incorporate some more physical activities and learn how to cook with meat alternatives, with the help of Physio and Dietitian.
- Improve pathways and partnerships with key stakeholders.

AGED CARE PROGRAM (ELDER CARE SUPPORT)

Raelene Davis - Aged Care Coordinator

Deborah Wright - Aged Care Connector

Aim:

The Aged Care Program is a new initiative funded by the National Aboriginal Community Controlled Health Organisation to assist communities in the role of advocacy and support for our Elders.

It is our role to assist Elders in applying for Aged Care Services in a culturally safe environment with a focus on individual centred care. We will provide advocacy and support for Elders who need help with applications for new aged care packages as well as increasing their current packages. Our footprint covers the Macleay Valley and Nambucca Valley. We also link in with other service to connect and achieve positive outcome for the individuals from a cultural respectful background.

Achievements of the program during this past financial year:

- Attendance at the Elders Olympics on 9th May 2024 to promote our new service.
- Attendance at the Elder Care Support Yarning Circle – 4th-6th June 2024 to Network with other care providers.
- Hosted NAIDOC Elders Luncheon & Karaoke at Kempsey RSL Club with Booroongen Djugun & Annecto on 9th July 2024. This event was attended by approximately 75 elders from the Kempsey community.
- Completed My Aged Care Online Training.

Future directions:

- To increase the number of our Elders to have access and understanding of the My Aged Care System.
- Hold an annual NAIDOC Elders event partnered with other Aged Care providers.
- Ongoing staff development and training.
- Improve pathways and partnerships with key stakeholders.



ALLIED HEALTH

The aims of allied health include:

- **Improving Health Outcomes:** Allied health professionals work to enhance the overall health and well-being of individuals and communities through preventative care, rehabilitation, and health education.
- **Supporting Patient Care:** They provide essential support to patients and their families, ensuring that care is holistic and addresses physical, emotional, and social needs.
- **Enhancing Quality of Life:** Allied health aims to improve the quality of life for patients by helping them manage chronic conditions, recover from injuries, and maintain independence.
- **Collaboration:** Allied health professionals often work as part of a multidisciplinary team, collaborating with s, nurses, and other healthcare providers to deliver comprehensive care.
- **Promoting Public Health:** They engage in community health initiatives, focusing on prevention and education to promote healthier lifestyles and reduce the incidence of disease.

Overall, the aim is to provide high-quality, patient-centered care that addresses a wide range of health needs.

Our services include but not limited to:

- Dietician
- Speech Pathologist
- Podiatry
- Audiometry
- Physiotherapy
- Optometry

A few our services are highlighted below:

DIETITIAN SERVICE

Sarah Greenwood - Dietitian

Aim: The Dietitian clinic at Durri ACMS runs once a week on Wednesdays for 48 visits per financial year.

The aim of the clinic is to provide clinical dietitian services to clients of Durri ACMS who have a chronic disease or are at risk of developing a chronic disease such as diabetes, heart disease, lung disease, renal disease, and liver disease.

The dietitian service aims to provide culturally safe dietitian care working alongside GP's, Nursing staff, Aboriginal Health Workers, and Allied Health staff with the aims to provide holistic care, and to break down barriers to accessing dietitian services.

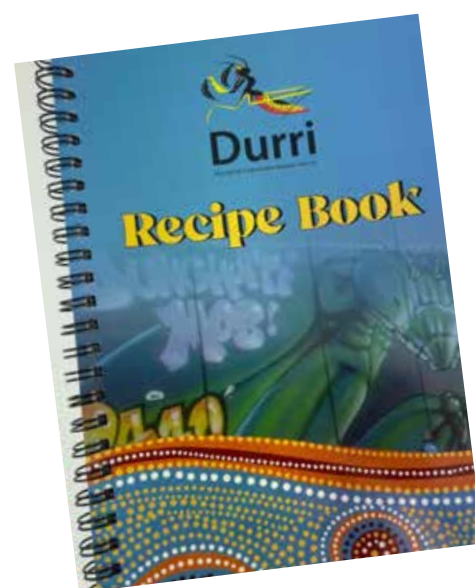
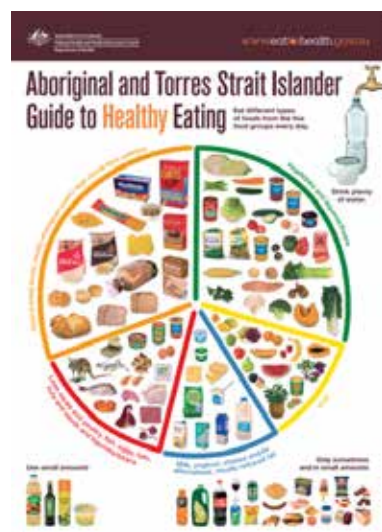
During clinic appointments the dietitian will complete nutrition assessment and provide individualised nutrition advice and education on nutrition, along with nutrition counselling with the aim to help individuals improve nutrition to meet their health goals and improve overall health and wellbeing.

Achievements of the program during this past financial year:

- Many referrals and busy clinic over the past year, with 173 dietitian consults completed over the year.
- Involvement in NAIDOC community BBQ.
- Involvement in attending the Yuwa Nyinda Dream Academy Festival alongside other.
- Durri ACMS staff promoting health care careers and healthy eating for good health.

Future directions:

- Ongoing access to the dietitian service for community to continuing breaking down barriers to accessing a dietitian, to help with chronic disease prevention and management with the goal to improve nutrition and overall health.
- Continued engagement where possible in group education and community events to promote good nutrition and access to dietitian service.
- Ideally hoping to increase access to outlying communities.



PHYSIOTHERAPY/ EXERCISE PHYSIOLOGY SERVICE

Jade Fraser (Physiotherapist and Exercise Physiologist)

Aim:

The aim of this service is to support our local first nations community to improve and maintain their health by improving access to physiotherapy and exercise physiology services.

To access allied health services a GP referral is required following a health assessment GPMP and TCA.

The program assists individuals with various conditions such as:

- Chronic conditions such as diabetes, osteoporosis, or osteoarthritis.
- Cardiac or respiratory conditions.
- Falls prevention.
- Mental health conditions.
- Musculoskeletal conditions, injuries, or injury prevention.
- Stroke and other neurological illnesses such as Parkinson's Disease or MS.
- Orthopaedic rehab post-surgery/recent fractures.
- Pain management.
- Women's health conditions.

Physiotherapy and Exercise Physiology services include:

- Initial assessment to go through medical history, current function/health status and goals.
- Physiotherapy treatment dependent on your needs.
- An individual exercise program for home.
- Education on health conditions and how we can assist with managing your health.
- A supervised exercise session in the Durri Gym.
- Women's and Men's group exercise sessions.

Achievements of the program during this past financial year:

- The physiotherapy/exercise physiology service has increased days this year to 4 days a week (Mon – Thurs).
- New equipment has been purchased which has been beneficial for all individuals and particularly the group sessions.
- Women's group exercise sessions and falls prevention classes have recommenced in the Durri gym and Durri ACMS is collaborating with the Aboriginal Chronic Care Team

of the Hastings Macleay Clinical Network (MNCLHD) to deliver the physical activity component of the Shady Ladies program.

- Durri ACMS allied health staff attended the local Yuwa Nyinda Dream Academy festival to assist with education and activities for primary school aged children and career advice and education for high school children.

Future directions:

- Assist with outreach education and exercise sessions with the local communities.
- Create interest in a men's group exercise session at the Durri ACMS gym.



CORPORATE SERVICES



Steve – Manager

DURRI
ABORIGINAL CORPORATION
MEDICAL SERVICE



HUMAN RESOURCES

Stuart Cohen – Human Resources Manager

Mary Edwards – Human Resources Officer

Kathleen Everson – Human Resources Administration Officer
Trainee

Isabella Bates – School Based Trainee

Caleb Smith Edwards – School Based Trainee

Jardie Morris – School Based Trainee



Aim:

The 2023-2024 fiscal year has been a year of significant growth, challenges, and success for Durri Aboriginal Corporation Medical Service. Our commitment to providing culturally appropriate health services has been met with sustained effort by our workforce. Human Resources has played a pivotal role in ensuring that our staff are supported, engaged, and equipped to serve our communities effectively.

Achievements of the program during this past financial year:

This year, the HR team implemented several key initiatives aimed at improving staff retention, satisfaction, and professional development, as well as improving HR processes with an emphasis on increased local employment. Currently, Durri employs a total of eighty-nine staff members across the footprint with 66% being Aboriginal and or Torres Strait Islander.

Achievements include:

- 48 roles recruited to with 37 being Aboriginal.
- Active casual pool with 12-17 staff available.
- Three students completed their school-based traineeships with nationally accredited qualifications.
- Improved Orientation/onboarding process for new employees.
- Improved Orientation for visiting medical students (Uni Syd, Newcastle Uni, CSU, Brien Holden Institute).
- Staff development workshops on lateral violence, cultural safety in the workplace, and the code of conduct for a more inclusive and culturally safe working environment.
- Workforce Development strategy to support the growth and career progression of all staff.
- Employee Wellness Program to provide mental health support, flexible working arrangements, and an exercise program.
- Aboriginal employment strategy targeting local people.

Challenges were evident despite our achievements. One of the primary issues continues to be recruiting and retaining staff in regional areas, particularly for clinical roles. Additionally, the growing demand for health services has led to an increased workload for staff.

Future directions:

Looking toward the future, our focus for 2024-2025 includes several key priorities. These involve strengthening our Aboriginal Employment Strategy, expanding the Workforce Development Program by introducing new leadership pathways, and enhancing staff engagement while improving HR processes and support systems. The Human Resources team remains committed to fostering a diverse, skilled, and engaged workforce. The achievements of the past year have set a solid foundation, moving forward, our efforts will continue to empower our staff to deliver exceptional healthcare services to the community.



CONTINUOUS QUALITY IMPROVEMENT

Renee Gardiner



Aim:

LogicQMS is a system for managing safety, quality, and risk. It enables all staff to suggest improvements in a structured way linked to internal audit, daily activity, or adverse events. LogicQMS is a centralised reporting and communication platform to enhance operational consistency, manage and improve quality, safety, and risk. It would allow Durri ACMS to streamline document control processes, records management, accreditation requirements and all registers required for governance, management, and reporting.

Achievements of the program during this past financial year:

- July 2023 - LogicQMs Training workshop for all staff to build and improve LOGICQMS know how, to support Senior Managers in the uptake of the program, build a culture of Continuous Quality Improvement (CQI) across their clinical, administrative and management teams.
- August 2023 – Primary Health and Chronic Disease Logic Training Workshop. Incident Management training for GPs/Primary Health and Chronic Disease staff.
- September 2023 –We have been in planning to develop the Asset booking register, functionality, and inclusions. Assets, equipment, plant, vehicle bookings register, property and room allocations. Working toward integrating the Asset register in LogicQMs to reduce risk across the organisation, track and account for items and equipment.
- September 2023 – Risk Management. Business rules have been in development for complaints, incidents, adverse events, process, and contingency planning.
- October 2023 - LogicQMS Incident Register Launched. Staff are now reporting all incidents, hazards, near miss and adverse events via the LogicQMs. Onboarding email has been created and generated to all staff including links to all training/knowledge base and Learning Academy, log in details and further resources.
- October 2023 - Accreditation Register Go live. RACGP Accreditation evidence can now be uploaded to the relevant RACGP, NSQHS reporting registers for Durri, Darrimba Maara, Dental and Chronic Disease. We are aiming to demonstrate via the LogicQMs system that we meet and can evidence RACGP accreditation standards and are continuously reviewing, assessing, and improving quality and compliance management within Durri ACMS.
- Audit And Compliance Registers Go Live. Registers are active for staff to schedule audits across Durri ACMS, to report on non-conformances and generate recommendations for improvements.

- Developed the Clinical Governance Framework and TORs Full day Workshop Kempsey Golf Club. Review and update new Clinical Governance Framework and TORs. Endorsed by the Clinical Governance Committee.
- October 2023 – Primary Health Staff LogicQMs training workshop. Additional build sessions. We want to ensure that all employees are equipped with the knowledge and skills to drive improvements, manage the registers and action allocated tasks within the QMS.
- February 2024 - Asset Register Meeting. Re-establish planning and determine scope. Ongoing.
- March 2024 – Additional One on One LogicQMs training General Practitioners/Nursing staff. We want to encourage the identification, analysis and prevention of systems error and minimise risk to patients and staff safety.
- May 2024 – Additional training session LogicQMS Durri Staff.
- June 2024 – Revision and development of Human Resource Policies. Policy work will continue until the organisation is resourced with a full complement of policies and procedures that are up to date, meet legislative compliance and standard.
- July 2024 - Accreditation Workshops have commenced with GPs and clinical Team Leads to align the requirements of RACGP standards for General Practice and to develop a step-by-step guide to building the Accreditation register in preparation for 2025 RACGP Accreditation.
- Quality and Compliance meetings are held weekly.

Future directions:

Full development and implementation of the LogicQMs system to include the build of all three registers Governance, Management and Reporting to optimise the program to its full potential to ensure we have a centralised reporting and communication platform to drive business transformation and growth and ensure LogicQMS is customised to the relevant standards and that the system is used as a complete quality and compliance management solution.



OPERATIONS

Kayla Bennett Operations Coordinator

Aim:

To support the management and leadership of the organisations corporate functions within areas of:

- Organisational Performance
- Strategic Business Development
- Budget and Financial Reporting
- Financial Operations
- Human Resource Management
- Industrial Relations Management
- Asset Management
- Organisational Leadership and Continuous Quality Improvement
- Relationship Management
- Professional Development



Achievements of the program during this past financial year:

- Successful minor capital works grant application of \$250,000 to be put towards the refurbishment of Short Street Nambucca Heads.
- Data Management: assisted in the development and maintenance of data systems that improved reporting accuracy and provided valuable insights for decision-making.
- Training and Development: Assisted in the development and design of training programs for staff, resulting in improved team performance and job satisfaction.
- Vendor Relations: Established strong relationships with vendors, negotiating contracts that resulted in better pricing and service terms.
- Compliance: Assited in ensuring compliance with industry regulations and internal policies, minimising risks and enhancing operational integrity.

Major Projects

Capital Works

Project Management of capital works projects:

Durri have engaged DRA Architects to project manage our capital works projects for the new proposed Durri ACMS site at Kempsey District Hospital, and the new proposed New Darrimba Maarra site at Nambucca Heads. DRA Architects will also work on a Master Plan for our other sites to ensure Durri's financial position and potential moving forward.

River Street, West Kempsey: (New Durri ACMS Site)

Durri's has taken steps to obtain a long-term lease (40years) with the Mid North Coast Local Health District, for the new Durri ACMS which will be located at the Kempsey District Hospital site. This was put in motion by the previous CEO and Board from early 2023.

At this stage we are waiting on a Benefits Planning process to be completed, and an approval for the lease from the NSW Ministry of Health.

The new proposed site is situated across the road from the old Accident and Emergency entry at Kempsey District Hospital. This will be a process to get through but well worth it in the long term given the benefit this will give the community being this close to the Hospital.

Anticipated benefits of the collocation include:

- Increased accessibility, sustainability, and wellness impact by removing barriers to access care through a closer location of the two services.
- Greater collaboration.
- Better value for investment.
- Training partnerships, Recruitment and Retention, Education.
- Capacity to bring together key aspects in care design and delivery through an integrated care approach.

Short Street, Nambucca Heads: (New Darrimba Maarra)

Durri ACMS has purchased a new site for our Darrimba Maarra Service in Nambucca and has recently obtained \$250K grant for minor capital works on the building. DRA Architects have been engaged to project manage the site and have provides an estimate of when the building may be finished, which is in late February or early March 2025. The new site is much needed for the area and will better position Darrimba Maarra for expansion of its current services.



Bowraville Health Outpost:

Durri ACMS has been formerly invited by the Bowraville community, to recommence services from the site previously known as the Bowraville Health Outpost at Gumbayngirr Road. Discussions are continuing with the Bowraville Local Aboriginal Land Council. At present we are working towards identifying further funding opportunities which will enable Durri ACMS to complete the internal furnishing and address the proposed staffing levels for Bowraville.



Bellbrook Health Outpost:

Durri ACMS has work closely with the Thunghutti Local Aboriginal Land Council for over 6 months to recommence services at Bellbrook. Services are schedule to recommence in late October and includes fortnightly GP and Nursing services, Allied Health, Oral Health programs and Programs. Durri will continue to support the Bellbrook community.

New Website

Our new website is nearing completion, and we are excited to announce the launch of our new website in the near future! It's designed to provide you with an enhanced experience, making it easier to find information and access our services.

Future directions:

- Turnover of Motor Vehicle Fleet to be completed.
- Launch our new website.
- Complete capital work projects.
- Acquisition of capital funding.
- Embracing Technology: Leveraging automation and advanced software solutions to streamline operations and improve efficiency.
- Data-Driven Decision Making: Utilising data analytics to make informed decisions and optimise processes, enhancing overall performance.
- Sustainability Initiatives: Focusing on environmentally sustainable practices within operations to align with growing corporate responsibility trends.

MAINTENANCE

Danuel Buckland

Aim:

To support the Corporate Services team to ensure that all Health Services grounds, buildings, plant, and equipment are well maintained, well presented, physically secure, compliant with all appropriate regulations and provide a safe environment for staff, client, contractors, and visitors to the Service.

Achievements:

- Annual Fire Safety compliance met
- Electrical testing and tagging compliance met

Future directions:

- Utilisation of LOGIQC Quality Management System for the tracking of assets and maintenance schedules.



DUNGHUTTI-NGAKU ABORIGINAL ART GALLERY

Alan Guihot - Art Gallery Coordinator

Rachel Cross - Art Gallery Assistant

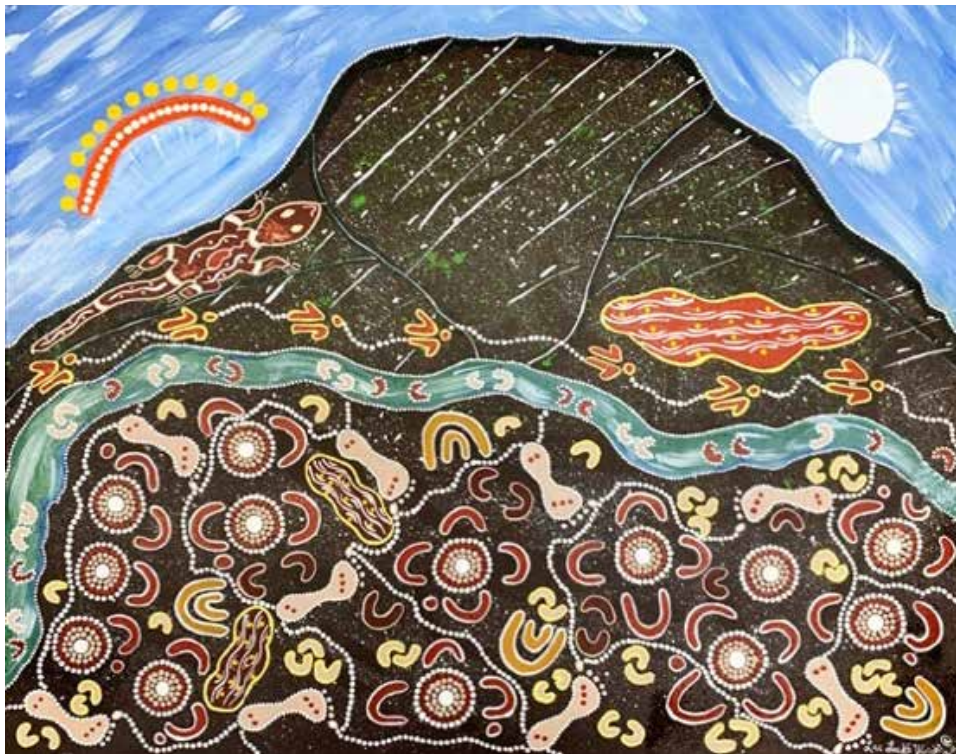
Christine Vonk – Volunteer



Aim:

DNAAG aims to:

- Continue to increase the ongoing involvement of local Aboriginal Communities in the gallery.
- Respect the worth, values, and beliefs of Aboriginal people.
- Encourage the broader community to understand and appreciate Aboriginal culture through stories, art, and products.
- Build skills in product development, business management and employment capacity.
- Support programs that strengthen and promote the interests of Aboriginal artists.
- Ensure that the centre remains a place where Aboriginal artists feel comfortable, valued, and secure in displaying and selling their products.



My House. My Site. Burrel Bulai. – Leo Leeko Wright

SNAPSHOT

DNAAG ARTISTS	ARTWORKS SOLD	PRINTS SOLD
21	68	564

T-Shirts
 MUGS Weaving
 Jewellery Dream Stones **HATS** ← OTHER ARTIST MEDIUMS SOLD
Healing Stones Chopping boards
 COASTERS
 travel mugs
 Boomerangs
BASKETS

136

MERCHANDISE
 SOLD
 765

MUGS Scarves
 soap jewellery
 tea towels BODY LOTION
 Handcream
Cushion covers COOLERS
 BODY WASH
 tablecloths
 caps KAFTANS

ARTWORK SALES

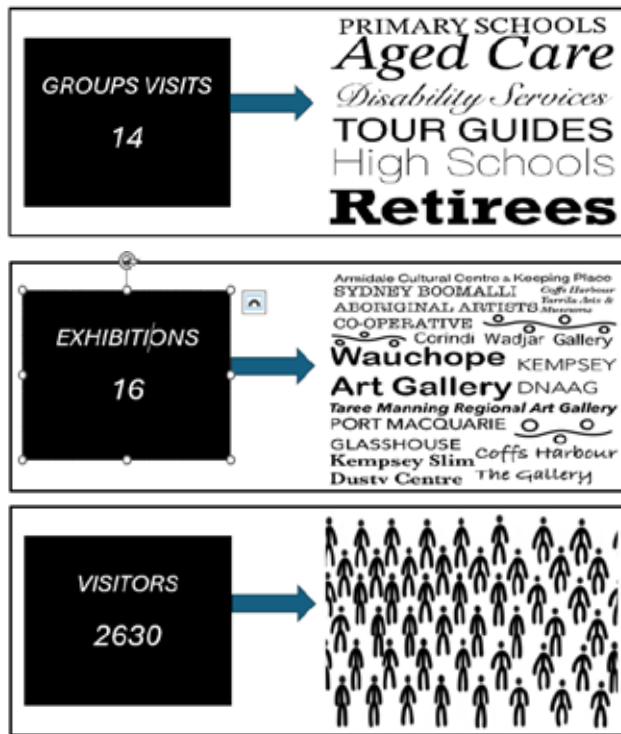
TOTAL ART AND
 PRINT SALES
 2023 TO 2024 → \$54,394.50

TOTAL PAID TO
 ARTISTS → \$44,585.00

TOTAL ART AND
 PRINT SALES
 2022 TO 2023
 FINANCIAL YEAR →

TOTAL
 \$57,368.00
 PAID TO ARTISTS
 \$45,712.00

ACHIEVEMENTS



WEBSITE



Rosalee Quinlin – Gravelly Dog

FUTURE DIRECTIONS

1

Grow our online sales and increase online engagement with the art gallery. Utilise the website to its full potential.

Staff training for website management.

2

Be more visible in the community -

- Increase community engagement through workshops.
- Link in with schools and TAFE.

Once a month community day.

3

Promote the gallery and our artists by using free online social media platforms such as Facebook and Instagram.

Create Facebook and Instagram pages by the end of September 2024.

4

Streamline and update the procedures and sales systems within the gallery, making them more efficient and time saving.

DNAAG staff to work with the finance team to set up a sales system within MYOB.



Mabel Ritchie - Passing on Knowledge



Mirra-Winni Gaze - The Crystal Waters



Anthony Flanders - Brolgas Nesting



Gus Kelly - Green Tree Frog



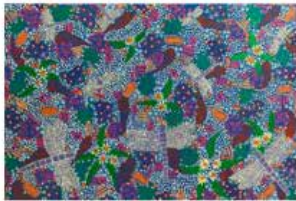
Rachel Cross - Swimmer Crabs



Leo Wright - Echidna Hunt



Leah Bale - Echidna



Tanya Taylor - Dragonflies



Zalie Davison - Beach Pipsis



Jesse Cross - Wildfire



Tanya Taylor - Black Boys



Gai Southwell



Sheyleace Stevens



Jason Ridgeway - Eagle, Python and Shark

FINANCE TEAM

Ruth Gardner - Senior Finance Officer

Gareth Davies - Finance Officer

Natalie Pearson - Bookkeeper

Kerrin Schmidt - Bookkeeper

Shania Smith - Trainee Bookkeeper

Aim:

As a part of the corporate services group, the Finance team aims to support the business with timely and accurate recordkeeping of business and financial transactions. General ledger and balance sheet accounts are regularly updated and reconciled, as are supplier and creditor balances, to facilitate business continuity and confidence in the integrity of the management reports drawn from our databases.

With a solid mix of qualifications and experience, the Finance team offer a wide range of practical advice around budgeting, capital projects, and financial investment opportunities. The team works closely with the Human Resources team to provide friendly support across the organisation and to enhance the suite of corporate software used to manage resourcing requirements of the business.

Achievements of the Finance team during this past financial year:

Finance introduced the new payroll system from July. The system has simplified elements of the payroll by moving a lot of the processes online giving employees more control over their payroll administration.

Our Finance trainee, Shania, has continued her Accounting and Bookkeeping Certificate IV course at TAFE and is mentored during her studies by the rest of the team. Through supporting the development of a local Aboriginal girl Durri is investing in the future of our Dhungutti youth, which aligns with our corporate strategic direction.

Future directions:

During the coming year, the Finance team will continue documenting and analysing processes so that they can be simplified for provision to new staff and offer clear steps to carry out particular bookkeeping functions required by the business.

Additionally, Finance is looking into adopting a safer, more reliable purchase order protocol to replace the cumbersome manual ordering system currently in place.

Durri Aboriginal Corporation Medical Service

ABN 52 730 046 875

ICN 27

Financial Report

For the Year Ended 30 June 2024

Durri Aboriginal Corporation Medical Service
Financial Report
For the Year Ended 30 June 2024

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**Durri Aboriginal Corporation Medical Service
DIRECTORS' REPORT
For the Year Ended 30 June 2024**

Your Directors present their report on Durri Aboriginal Corporation Medical Service (the Corporation) for the financial year ended 30 June 2024.

Directors

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

Name	Appointed / Resigned Date
Arthur Kelly	Appointed 27 November 2019 Appointed Chair 6 December 2022
Mary-Lou Buck	Appointed 27 November 2019
Patricia Ann Edwards	Appointed 27 January 2022
Taylor Kelly-Scholes	Appointed 29 November 2022
Noel Lockwood	Appointed 29 November 2022
Ivy Brown	Appointed 28 November 2023
Rosemary Vale	Appointed 28 November 2023
Katherine Holten	Appointed 10 March 2022 Resigned 28 November 2023
Donald Griffen	Appointed 10 March 2022 Resigned 28 November 2023

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

Principal Activities

The principal activity of the Corporation during the financial year was the delivery of primary and allied health care for Indigenous Australians on the Mid North Coast of New South Wales through the operation of two medical centres located in Kempsey and Nambucca Heads.

No significant change in the nature of this principal activity occurred during the financial year.

Company Secretary

The following person held the position of Company Secretary during the financial year:

Arthur Kelly	Resigned 9 January 2024
Connie Smith	Appointed 9 January 2024

Operating Results

The loss of the Corporation for the financial year ended 30 June 2024 amounted to \$216,766. The operating result represented an increase in operating performance of \$220,981 when compared to the loss of \$437,747 for the previous financial year.

Dividends

There has been no dividend paid or recommended to be paid during the financial year.

Significant Changes in State of Affairs

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

**Durri Aboriginal Corporation Medical Service
DIRECTORS' REPORT
For the Year Ended 30 June 2024**

Review of Operations

Total revenue increased by \$1,644,911 from \$12,341,886 to \$13,986,797 for the 2024 financial year. Total expenditure increased by \$1,423,930 from \$12,779,633 in 2023 to \$14,203,563 for the 2024 financial year. Included in expenditure of the Corporation during the year ended 30 June 2024 was an amount of \$600,047 (2023: \$565,934) representing a charge to the provisions for unexpended grants.

After Balance Date Events

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

Future Developments

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

Auditor's Independence

A copy of the Auditor's Independence Declaration as required under Section 339-50 of the *Corporations (Aboriginal and Torres Strait Islander) Act 2006* has been received and is included in this financial report.

Environmental Issues

The Corporation's operations are not subject to any significant environmental regulation under a law of the Commonwealth or of a State or Territory.

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

Indemnifying Officers or Auditors

During the financial year the Corporation held a Directors and Officers Insurance Policy. The policy has an exclusion clause that precludes any further disclosure.

No indemnities have been given or agreed to be given or insurance premiums paid or agreed to be paid, during or since the end of the financial year, to any person who is or has been an auditor of the Corporation.

Proceedings on Behalf of the Corporation

No person has applied for leave of Court to bring proceedings on behalf of the Corporation or intervene in any proceedings to which the Corporation is a party for the purpose of taking responsibility on behalf of the Corporation for all or any part of those proceedings.

The Corporation was not a party to any such proceedings during the year.

**Durri Aboriginal Corporation Medical Service
DIRECTORS' REPORT
For the Year Ended 30 June 2024**

Information on Current Directors

Arthur Kelly

Qualifications Training and Assessment, Certificate IV in Alcohol and other Drugs (Statement of Excellence), Certificate IV in Broadcasting, Certificate IV in Mental Health (Statement of Excellence), Certificate III Remote Area operations (Radio), Certificate IV Workplace Training, Masters in Indigenous Social Policy (deferred), Bachelor of Education in Adult Education, Advanced Certificate in Public Administration, Certificate in Public Administration, Business Management Course. Currently enrolled in Masters in Indigenous Language Education (MILE)

Experience Experience with government, organisational and financial management as well as strategic planning. Currently holds numerous positions within Boards and Committees. Advocate for Aboriginal communities and health matters.

Special Responsibilities Chairperson

Patricia Ann Edwards

Experience Patricia Ann has represented the Bowraville community on the Board of the Bowraville Land Council and is a long time Elder in the Bowraville community. Patricia Ann is also a member of the Ngambaga Bindarry Girraa Elder's Association of the Nambucca Valley and is a long time respected Elder of the Gumbaynggirr people.

Mary-Lou Buck

Experience Has represented the Aboriginal community on various Boards including but not limited to Redfern AMS, Redfern AHO, Kempsey Aboriginal Land Council. Was a successful Native Title Claimant and an integral part of the Dunghutti Elders. Mary-Lou worked with the Roads and Traffic Authority for numerous years and provided advocacy for the Aboriginal communities in various manners including being involved with Kempsey District Hospital as an Aboriginal representative.

Taylor Kelly-Scholes

Qualifications Graduate Diploma in Indigenous Health Promotion

Experience Board of Director (Secretary) of another Aboriginal Corporation

Noel Lockwood

Qualifications Various certificates including accounting and holds a Diploma in Business Management

Experience Advocate for Aboriginal community, has represented and a board member for numerous organisations as well as a Chief Executive Officer

Ivy Brown

Qualifications

Experience

Rosemary Vale

Qualifications

Experience

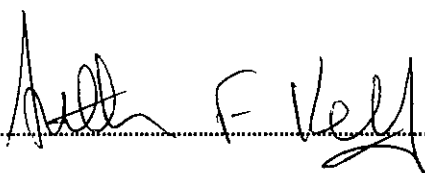
**Durri Aboriginal Corporation Medical Service
DIRECTORS' REPORT
For the Year Ended 30 June 2024**

Meetings of Directors

During the financial year, 10 meetings of Directors (including General meetings) were held. Attendances by each Director during the year were as follows:

	Board Meetings		General Meetings	
	Number eligible to attend	Number attended	Number eligible to attend	Number attended
Arthur Kelly	7	7	3	3
Mary-Lou Buck	7	1	3	0
Patricia Ann Edwards	7	5	3	1
Taylor Kelly-Scholes	7	7	3	3
Noel Lockwood	7	5	3	1
Ivy Brown	4	3	1	1
Rosemary Vale	4	4	1	1
Katherine Holten	3	0	2	0
Donald Griffen	3	1	2	0

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

Director: 

Dated: 22 October 2024

AUDITOR'S INDEPENDENCE DECLARATION

Under Section 339-50 of the *Corporations (Aboriginal and Torres Strait Islander) Act 2006*

To the Directors of Durri Aboriginal Corporation Medical Service

I declare that, to the best of my knowledge and belief, during the year ended 30 June 2024 there have been no contraventions of:

- (i) the auditor independence requirements as set out in the *Corporations (Aboriginal and Torres Strait Islander) Act 2006* in relation to the audit; and
- (ii) any applicable code of professional conduct in relation to the audit.

NORTHCORP ACCOUNTANTS



Bart Lawler
Registered Company Auditor

**10-12 Short Street
PORT MACQUARIE
NSW 2444**

Dated: 22 October 2024



Durri Aboriginal Corporation Medical Service

DIRECTORS' DECLARATION

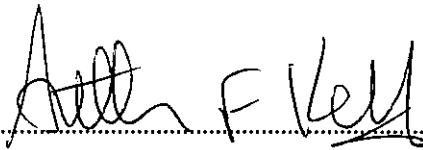
The Directors of the Corporation declare that:

- (1) The financial statements, comprising the Statement of Comprehensive Income, Statement of Financial Position, Statement of Changes in Equity, Statement of Cash Flows, Income and Expenditure Statement and notes to and forming part of the financial statements, are in accordance with the *Corporations (Aboriginal and Torres Strait Islander) Act 2006* and *Corporations (Aboriginal and Torres Strait Islander) Regulations 2007* and:
 - (a) have been made out in accordance with the Rules of the Corporation;
 - (b) comply with Australian Accounting Standards - Simplified Disclosure Requirements; and
 - (c) give a true and fair view of the financial position of the Corporation as at 30 June 2024 and of its performance for the year ended on that date.

- (2) In the Directors' opinion there are reasonable grounds to believe that the Corporation will be able to pay its debts as and when they become due and payable.

This declaration is made in accordance with a resolution of the Board of Directors and is signed for and on behalf of the Directors by:

Director:



Dated: 22 October 2024

PARTNERS

Paul Fahey B Bus CA

Bart Lawler B Com CA

Patrick Brennan B Com CA

Alison McKinnon B Bus CA

INDEPENDENT AUDITOR'S REPORT

To the Members of Durri Aboriginal Corporation Medical Service

Opinion

We have audited the accompanying financial report of Durri Aboriginal Corporation Medical Service, which comprises the Statement of Financial Position as at 30 June 2024, the Statement of Comprehensive Income, Statement of Changes in Equity, Statement of Cash Flows, and the Income and Expenditure Statement for the year then ended, and notes to the financial statements, including material accounting policy information and other explanatory information, and the Directors' Declaration.

In our opinion, the financial report of Durri Aboriginal Corporation Medical Service is properly drawn up:

- (a) so as to give a true and fair view of the Corporation's financial position as at 30 June 2024 and of its performance for the year ended on that date;
- (b) in accordance with the *Corporations (Aboriginal and Torres Strait Islander) Act 2006*, and the Rules of the Corporation;
- (c) in compliance with the *Corporations (Aboriginal and Torres Strait Islander) Regulations 2007*; and
- (d) in compliance with Australian Accounting Standards – AASB 1060: *General Purpose Financial Statements – Simplified Disclosures for For-Profit and Not-for-Profit Tier 2 Entities*.

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 Corporation in accordance with the auditor independence requirements of the *Corporations (Aboriginal and Torres Strait Islander) Act 2006* 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.

INDEPENDENT AUDITOR'S REPORT

To the Members of Durri Aboriginal Corporation Medical Service

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

The Directors are responsible for the other information. The other information comprises the information included in the Corporation's annual report for the year ended 30 June 2024 but does not include the financial report and our auditor's report thereon. Our opinion on the financial report does not cover the other information and accordingly we do not express any form of assurance conclusion thereon. In connection with our audit of the financial report, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial report, or our knowledge obtained in the audit or otherwise appears to be materially misstated. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Responsibilities of the Directors for the Financial Report

The Directors of the Corporation are responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards - AASB 1060: *General Purpose Financial Statements – Simplified Disclosures for For-Profit and Not-for-Profit Tier 2 Entities* and the *Corporations (Aboriginal and Torres Strait Islander) Act 2006* and for such internal control as the Directors 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 Directors are responsible for assessing the Corporation'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 Directors either intend to liquidate the Corporation or to cease operations, or have no realistic alternative but to do so.

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 this financial report.

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

- Identify and assess the risks of material misstatement of the financial report, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.

PARTNERS

Paul Fahey B Bus CA

Bart Lawler B Com CA

Patrick Brennan B Com CA

Alison McKinnon B Bus CA

INDEPENDENT AUDITOR'S REPORT

To the Members of Durri Aboriginal Corporation Medical Service

Auditor's Responsibilities for the Audit of the Financial Report (continued)

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Corporation's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the Directors.
- Conclude on the appropriateness of the Directors' use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Corporation's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial report or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Corporation to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial report, including the disclosures, and whether the financial report represents the underlying transactions and events in a manner that achieves fair presentation.

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

NORTHCORP ACCOUNTANTS



Bart Lawler
Registered Company Auditor

Dated: 22 October 2024

10-12 Short Street
PORT MACQUARIE NSW 2444

Durri Aboriginal Corporation Medical Service
STATEMENT OF COMPREHENSIVE INCOME
For the Year Ended 30 June 2024

	2024	2023
Note	\$	\$
Revenue	2 <u>13,986,797</u>	<u>12,341,886</u>
	<u>13,986,797</u>	<u>12,341,886</u>
Bad and doubtful debts	3(a) (6,192)	-
Contractors and consultancy	(1,911,185)	(1,769,076)
Depreciation and amortisation expense	3(a) (379,247)	(373,261)
Employee benefits expense	(7,803,567)	(7,248,348)
Expendable equipment and supplies	(68,826)	(92,826)
Insurance expenses	(254,848)	(223,783)
Motor vehicle expenses	(131,427)	(127,044)
Office, legal and administration expenses	(393,127)	(363,879)
Program, training, development and medical expenses	(1,739,927)	(1,070,527)
Repairs, maintenance and utility expenses	(654,575)	(683,216)
Unexpended grants provided	(600,047)	(565,934)
Other expenses	(260,595)	(261,739)
	<u>(14,203,563)</u>	<u>(12,779,633)</u>
Profit/(loss) before income tax	(216,766)	(437,747)
Income tax expense	1(b) -	-
Profit/(loss) for the year	(216,766)	(437,747)
Other comprehensive income/(loss) for the year		
Revaluation gain/(loss) on land and buildings	1,511,207	-
Total other comprehensive income/(loss) for the year	1,511,207	-
Total comprehensive income/(loss) for the year	1,294,441	(437,747)
Profit/(loss) attributable to members of the Corporation	(216,766)	(437,747)
Total comprehensive income attributable to members of the Corporation	1,294,441	(437,747)

The accompanying notes form part of these financial statements.

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Durri Aboriginal Corporation Medical Service
STATEMENT OF FINANCIAL POSITION
As at 30 June 2024

	Note	2024 \$	2023 \$
ASSETS			
Current assets			
Cash and cash equivalents	4	1,406,617	4,095,723
Trade and other receivables	5	3,323,887	3,152,179
Other financial assets	6	4,442,500	4,278,003
Other assets	7	227,341	261,698
Total current assets		9,400,345	11,787,603
Non-current assets			
Property, plant and equipment	8	10,348,220	7,162,686
Right of use assets	9	68,888	50,928
Total non-current assets		10,417,108	7,213,614
TOTAL ASSETS		19,817,453	19,001,217
LIABILITIES			
Current liabilities			
Lease liabilities	10	50,213	32,248
Trade and other payables	11	468,194	567,940
Other liabilities	12	2,891,060	3,282,466
Short-term provisions	13	693,124	707,614
Total current liabilities		4,102,591	4,590,268
Non-current liabilities			
Lease liabilities	10	18,681	18,681
Long-term provisions	13	97,233	87,761
Total non-current liabilities		115,914	106,442
TOTAL LIABILITIES		4,218,505	4,696,710
NET ASSETS		15,598,948	14,304,507
EQUITY			
Reserves	16	4,915,379	3,404,172
Retained earnings		10,683,569	10,900,335
TOTAL EQUITY		15,598,948	14,304,507

The accompanying notes form part of these financial statements.

Durri Aboriginal Corporation Medical Service
STATEMENT OF CHANGES IN EQUITY
For the Year Ended 30 June 2024

2024

	Retained Earnings	Asset Revaluation Reserve	Total
	\$	\$	\$
Balance at 01 July 2023	10,900,335	3,404,172	14,304,507
Profit/(loss) attributable to members of the Corporation	(216,766)	-	(216,766)
Other comprehensive income/(loss) for the year	-	1,511,207	1,511,207
Total comprehensive income for the year	(216,766)	1,511,207	1,294,441
Balance at 30 June 2024	10,683,569	4,915,379	15,598,948

2023

	Retained Earnings	Asset Revaluation Reserve	Total
	\$	\$	\$
Balance at 01 July 2022	11,338,082	3,404,172	14,742,254
Profit/(loss) attributable to members of the Corporation	(437,747)	-	(437,747)
Other comprehensive income/(loss) for the year	-	-	-
Total comprehensive income for the year	(437,747)	-	(437,747)
Balance at 30 June 2023	10,900,335	3,404,172	14,304,507

The accompanying notes form part of these financial statements.

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Durri Aboriginal Corporation Medical Service
STATEMENT OF CASH FLOWS
For the Year Ended 30 June 2024

	Note	2024 \$	2023 \$
Cash flow from operating activities:			
Receipts from customers		14,347,294	13,152,653
Payments to suppliers and employees		(15,048,030)	(13,359,317)
Interest received		224,365	82,797
Finance costs		(2,832)	(3,198)
Net cash provided by (used in) operating activities		(479,203)	(127,065)
Cash flow from investing activities:			
Proceeds from sale of plant and equipment		40,000	-
Acquisition of property, plant and equipment		(2,035,871)	(152,103)
Proceeds from / (purchase of) other financial assets		(164,497)	(32,686)
Net cash provided by (used in) investing activities		(2,160,368)	(184,789)
Cash flows from financing activities:			
Repayment of lease liabilities		(49,535)	(61,158)
Net cash provided by (used in) financing activities		(49,535)	(61,158)
Net increase (decrease) in cash and cash equivalents		(2,689,106)	(373,012)
Cash and cash equivalents at beginning of financial year		4,095,723	4,468,736
Cash and cash equivalents at end of financial year	4	1,406,617	4,095,724

The accompanying notes form part of these financial statements.

Durri Aboriginal Corporation Medical Service
INCOME AND EXPENDITURE STATEMENT
For the Year Ended 30 June 2024

	Note	2024 \$	2023 \$
INCOME			
Grants - Commonwealth Government		7,946,312	7,049,716
Grants - NSW Government		2,369,296	2,169,055
Grants - Other		1,052,238	1,033,592
Gain on sale of property, plant and equipment	2	8,163	-
Interest received		229,134	92,014
Medicare income		2,010,708	1,642,497
Practice incentive payments		170,467	16,081
Sundry income		152,262	118,974
Wage and expense contributions - external		48,217	122,392
Workers compensation refunds		-	97,565
	2	<u>13,986,797</u>	<u>12,341,886</u>
EXPENDITURE			
Advertising and promotion		77,785	19,730
Auditor's remuneration		65,500	54,500
Bad and doubtful debts	3(a)	6,192	-
Bank charges		3,032	2,792
Cleaning and pest control		144,550	129,571
Contractors and consultancy		1,911,185	1,769,076
Dental supplies		46,948	55,482
Depreciation and amortisation	3(a)	379,247	373,261
Director's meetings		139,286	130,030
Electricity, gas and water		66,049	108,934
Employee benefits expenses			
- Annual leave		601,300	647,871
- Employee assistance and wellbeing		11,883	3,943
- Fringe benefits tax expense		14,036	20,980
- Long service leave		44,701	61,719
- Other leave		118,459	3,199
- Personal/Carers leave		209,818	237,371
- RDO leave		107,011	5,545
- Superannuation contributions		738,096	658,336
- Wages		5,958,263	5,609,384
Expendable equipment		72,491	93,062
Insurance		91,660	80,147
Interest	3(a)	2,832	3,198

The accompanying notes form part of these financial statements.

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Durri Aboriginal Corporation Medical Service
INCOME AND EXPENDITURE STATEMENT
For the Year Ended 30 June 2024

	Note	2024 \$	2023 \$
EXPENDITURE (continued)			
Legal costs		43,331	37,950
Medical supplies		216,017	141,149
Motor vehicle expenses		131,427	127,044
Postage and freight		11,543	8,286
Printing, stationery and computer expenses		200,013	184,331
Program expenses		1,422,924	860,678
Rates		28,687	24,708
Recruitment expenses		13,028	49,800
Repairs and maintenance		104,776	65,994
Security costs		31,226	58,667
Staff amenities and meetings		20,811	20,281
Subscriptions and memberships		11,587	13,284
Telephone		279,362	297,102
Training and development		39,140	48,008
Travel expenses		61,079	51,930
Uniforms		15,053	12,720
Unexpended grants		600,047	565,934
Workers compensation insurance		163,188	143,636
		14,203,563	12,779,633
Profit/(loss) for the year		(216,766)	(437,747)

The accompanying notes form part of these financial statements.

Durri Aboriginal Corporation Medical Service
NOTES TO THE FINANCIAL STATEMENTS
For the Year Ended 30 June 2024

Note 1 Material Accounting Policy Information

Basis of Preparation

The financial statements are for Durri Aboriginal Corporation Medical Service as an individual entity, incorporated and domiciled in Australia.

The financial statements are general purpose financial statements that have been prepared in accordance with Australian Accounting Standards - Simplified Disclosures of the Australian Accounting Standards Board (AASB), the *Corporations (Aboriginal and Torres Strait Islander) Act 2006*, *Corporations (Aboriginal and Torres Strait Islander) Regulations 2007* and the Corporation's Rules. The Corporation is a not-for-profit entity for financial reporting purposes under Australian Accounting Standards.

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

The financial statements, except for the cash flow information, 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. The amounts presented in the financial statements have been rounded to the nearest dollar.

The financial statements were authorised for issue on 22 October 2024 by the Directors of the Corporation.

Accounting Policies

(a) Revenue

Revenue recognition

Contributed Assets

The Corporation receives assets from the government and other parties for nil or nominal consideration in order to further its objectives. These assets are recognised in accordance with the recognition requirements of other applicable accounting standards (for example AASB 9, AASB 16, AASB 116 and AASB 138).

On initial recognition of an asset, the Corporation recognises related amounts (being contributions by owners, lease liability, financial instruments, provisions, revenue or contract liability arising from a contract with a customer).

The Corporation recognises income immediately in profit or loss as the difference between the initial carrying amount of the asset and the related amounts.

Durri Aboriginal Corporation Medical Service
NOTES TO THE FINANCIAL STATEMENTS
For the Year Ended 30 June 2023

Note 1 Summary of Significant Accounting Policies (continued)

(a) Revenue (Continued)

Operating Grants

When the Corporation receives operating grant revenue it assesses whether the contract is enforceable and has sufficiently specific performance obligations in accordance with AASB 15.

Capital Grants

When the Corporation receives a capital grant, it recognises a liability for the excess of the initial carrying amount of the financial asset received over any related amounts (being contributions by owners, lease liability, financial instruments, provisions, revenue or contract liability arising from a contract with a customer) recognised under other Australian Accounting Standards.

The Corporation recognises income in profit or loss when or as the Corporation satisfies its obligations under the terms of the grant.

Interest Income

Interest income is recognised using the effective interest method.

(b) Income Tax

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

(c) Financial Instruments

Classification and Subsequent Measurement

Financial liabilities

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

Financial assets

Financial assets are subsequently measured at amortised cost.

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

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

Durri Aboriginal Corporation Medical Service
NOTES TO THE FINANCIAL STATEMENTS
For the Year Ended 30 June 2023

Note 1 Summary of Significant Accounting Policies (continued)

(d) Impairment of Non-Financial Assets

At the end of each reporting period, the Corporation reviews the carrying amounts of its tangible and intangible assets to determine whether there is any indication that those assets have been impaired. If such an indication exists, the recoverable amount of the asset, being the higher of the asset's fair value less costs to sell and value in use, is compared to the asset's carrying amount. Any excess of the asset's carrying amount over its recoverable amount is recognised in profit or loss.

(e) Property, Plant and Equipment

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

Freehold property

Freehold land and buildings are shown at their fair value (being the amount for which an asset could be exchanged between knowledgeable willing parties in an arm's length transaction) less accumulated impairment losses and accumulated depreciation for buildings. The fair value of freehold land and buildings is based on periodic, but at least triennial, valuations by external independent valuers.

Increases in the carrying amount arising on revaluation of land and buildings are recognised in other comprehensive income and accumulated in the asset revaluation reserve in equity. Revaluation decreases that offset previous increases of the same class of assets are recognised in other comprehensive income and are charged against the asset revaluation reserve directly in equity. All other decreases are charged to profit or loss.

Any accumulated depreciation at the date of revaluation is eliminated against the gross carrying amount of the asset and the net amount is restated to the revalued amount of the asset.

Plant and equipment

Plant and equipment are measured on the cost basis and are therefore carried at cost less accumulated depreciation and any impairment losses.

Depreciation

The depreciable amount of all fixed assets, including buildings and capitalised leased assets, but excluding freehold land, is depreciated on a straight-line basis or diminishing value basis over the asset's useful life to the Corporation commencing from the time the asset is held ready for use. Depreciation is recognised in profit or loss.

Leasehold improvements are depreciated over the shorter of either the unexpired period of the lease or the estimated useful lives of the improvements.

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

<i>Class of Fixed Asset</i>	<i>Depreciation Rate</i>
Buildings	2.5-10%
Plant and Equipment	10-40%
Motor Vehicles	22.50%
Office Equipment	10-40%
Medical Equipment	20-40%

Durri Aboriginal Corporation Medical Service
NOTES TO THE FINANCIAL STATEMENTS
For the Year Ended 30 June 2023

Note 1 Summary of Significant Accounting Policies (continued)

(f) Acquisition of Assets

The cost method of accounting is used for the initial recording of all acquisitions of assets controlled by the Corporation. Cost is the amount of cash or cash equivalents paid or the fair value of the other consideration given to acquire the asset at the time of its acquisition or construction or, where applicable, the amount attributed to that asset when initially recognised in accordance with the specific requirements of other Australian Accounting Standards.

Assets acquired at no cost, or for nominal consideration, are initially recognised at their fair value at the date of acquisition.

(g) Employee Benefits

In determining the liability, consideration is given to employee wage increases and the probability that the employee may not satisfy vesting requirements.

Contributions are made by the Corporation to employee superannuation funds and are charged as expenses when incurred.

(h) Unexpended Grants

The Corporation receives grant monies to fund programs for contracted periods of time or for specific programs irrespective of the period of time required to complete those programs. It is the policy of the Corporation to treat monies as unexpended grants where the Corporation is contractually obliged to provide the services in a subsequent reporting period to when the grant is received.

(i) Leases

The Corporation as Lessee

Exceptions to lease accounting

All contracts that are classified as short-term leases and leases of low value assets are recognised as operating expense on a straight-line basis over the term of the lease. The Sub-Branch has determined that a low value will be assets of \$10,000 or less.

(l) Critical Accounting Estimates and Judgements

The Corporation evaluates estimates and judgements incorporated into the financial statements based on historical knowledge and best available current information. Estimates assume a reasonable expectation of future events and are based on current trends and economic data, obtained both externally and within the Corporation.

Key estimates - impairment

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

Durri Aboriginal Corporation Medical Service
NOTES TO THE FINANCIAL STATEMENTS
For the Year Ended 30 June 2024

Note 2 Revenue	2024	2023
	\$	\$
(a) Revenue		
Grant Revenue		
Aboriginal Health and Medical Research	6,951	8,875
Australian Healthcare Associates	23,746	18,872
Department of Infrastructure, Transport, Regional Development and Communications	103,000	102,000
Department of Family and Community Services	89,552	533,058
Department of Health	6,609,668	6,473,774
Healthy North Coast Ltd	860,400	844,640
Mid North Coast Local Health District	151,519	140,830
National Aboriginal Community Controlled Health Organisation	802,070	233,030
NSW Ministry of Health	2,279,744	1,630,997
NSW Rural Doctors Network	424,623	232,037
Transport for NSW	-	5,000
University of Newcastle	16,573	-
University of NSW - Kirby Institute	-	29,250
	11,367,846	10,252,363
Other Revenue		
Interest received	229,134	92,014
Medicare income	2,010,708	1,642,497
Sundry income	152,262	118,974
Practice incentive payments	170,467	16,081
Wage and expenses contributions - external	48,217	122,392
Gain on sale of property, plant and equipment	8,163	-
Workers compensation refunds	-	97,565
	2,618,951	2,089,523
Total Revenue	13,986,797	12,341,886

Durri Aboriginal Corporation Medical Service
NOTES TO THE FINANCIAL STATEMENTS
For the Year Ended 30 June 2024

Note 3 Profit/(Loss) for the Year		2024	2023
	Note	\$	\$
(a) Expenses			
Profit/(loss) before income tax includes the following specific expenses:			
Depreciation and Amortisation			
Buildings	8(b)	213,488	210,012
Plant and equipment	8(b)	116,219	102,633
Right-of-use assets - buildings	9(a)	28,727	39,802
Right-of-use assets - motor vehicles	9(a)	20,813	20,814
Total Depreciation and Amortisation		379,247	373,261
Finance Costs			
Interest on lease liabilities	9(c)	2,832	3,198
Bad and doubtful debts			
Trade and other receivables		6,192	-
Note 4 Cash and Cash Equivalents			
Cash on Hand		1,725	2,373
Cash at Bank			
Cash Management Account		1,046,408	3,578,489
Operating Bank Accounts		358,484	514,861
		1,406,617	4,095,723
Reconciliation of Cash			
Cash at the end of the financial year as shown in the Statement of Cash Flows is reconciled to items in the Statement of Financial Position as follows:			
Cash and cash equivalents		1,406,617	4,095,724
Note 5 Trade and Other Receivables			
Current			
Grants receivables		403,804	601,675
Trade receivables		405,654	34,652
		809,458	636,327
Funds contributed to Department of Health for capital works project		2,500,000	2,500,000
Other receivables		14,429	9,660
Amounts receivable from related party		6,192	6,192
Provision for impairment		(6,192)	-
		3,323,887	3,152,179
Note 6 Other Financial Assets			
Current			
Financial assets at amortised cost		4,442,500	4,278,003
(a) Financial assets at amortised cost comprise:			
Term Deposits		4,442,500	4,278,003

Durri Aboriginal Corporation Medical Service
NOTES TO THE FINANCIAL STATEMENTS
For the Year Ended 30 June 2024

Note 7 Other Assets	2024	2023
	\$	\$
Current		
Prepayments	180,563	141,161
Prepaid Gift Cards	300	24,025
Deposits paid	7,830	39,925
GST receivable	38,648	56,587
	227,341	261,698

Note 8 Property, Plant and Equipment

Land and buildings		
Freehold land		
Land at cost	60,000	60,000
Land at independent valuation - 2021	-	1,135,000
Land at independent valuation - 2024	1,450,000	-
Total freehold land at valuation	1,510,000	1,195,000
Buildings and freehold improvements		
Buildings at cost	2,770,145	1,142,395
Buildings at independent valuation - 2021	-	4,465,000
Buildings at independent valuation - 2024	5,250,000	-
Less accumulated depreciation	(153,401)	(351,121)
Total buildings and freehold improvements	7,866,744	5,256,274
Total land and buildings	9,376,744	6,451,274
Plant and equipment		
Plant and equipment at cost	1,722,025	1,362,776
Less accumulated depreciation	(750,549)	(651,364)
Total plant and equipment	971,476	711,412
Total property, plant and equipment	10,348,220	7,162,686

(a) Valuation of Land and Buildings

Revaluations of the Corporation's land and buildings located at York Lane Kempsey, Bowra Street Nambucca Heads and High Street Bowraville were carried out by independent valuers as at 30 June 2024. The valuations were made on the basis of current market value.

(b) Movements in Carrying Amounts

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

	Land	Buildings	Plant and Equipment	Total
	\$	\$	\$	\$
Opening Balance at 1 July 2023	1,195,000	5,256,274	711,412	7,162,686
Additions	-	1,627,751	408,120	2,035,871
Disposals	-	-	(31,837)	(31,837)
Depreciation expense	-	(213,488)	(116,219)	(329,707)
Revaluation gain/(loss)	315,000	1,196,207	-	1,511,207
Closing Balance at 30 June 2024	1,510,000	7,866,744	971,476	10,348,220

Durri Aboriginal Corporation Medical Service
NOTES TO THE FINANCIAL STATEMENTS
For the Year Ended 30 June 2024

Note 9 Right of Use Assets

Non-Current	2024	2023
	\$	\$
Leased buildings	67,500	98,274
Accumulated amortisation	<u>(17,691)</u>	<u>(87,238)</u>
	49,809	11,036
Leased plant and equipment	60,706	60,706
Accumulated amortisation	<u>(41,627)</u>	<u>(20,814)</u>
	19,079	39,892

	Leased		Total
	Leased Buildings	Plant and Equipment	
(a) Movement in carrying amounts			
	\$	\$	\$
Opening Balance at 1 July 2023	11,036	39,892	50,928
Additions to right-of-use assets	67,500	-	67,500
Amortisation charge	<u>(28,727)</u>	<u>(20,813)</u>	<u>(49,540)</u>
Closing Balance at 30 June 2024	49,809	19,079	68,888

(b) Terms and conditions of leases

The Corporation leases three buildings for the provision of health services. The leases are two year leases and some of the leases include a renewal option to allow the Corporation to renew for one to two years. The leases generally contain either an annual pricing mechanism based on CPI movements or a fixed rate.

(c) Amounts recognised in the statement of comprehensive income

The amounts recognised in the statement of comprehensive income relating to leases where the Corporation is the lessees are disclosed in accordance with AASB 16 as follows:

	2024	2023
	\$	\$
Interest expense on lease liabilities	(2,832)	(3,198)
Amortisation of right-to-use assets	<u>(49,540)</u>	<u>(60,616)</u>
	(52,372)	(63,814)

Durri Aboriginal Corporation Medical Service
NOTES TO THE FINANCIAL STATEMENTS
For the Year Ended 30 June 2024

Note 10 Lease Liabilities

Lease liabilities accounted for in accordance with AASB 16 as disclosed in Note 1(l).

	Note	2024 \$	2023 \$
Current			
Lease liabilities		<u>50,213</u>	<u>32,248</u>
Non-Current			
Lease Liabilities		<u>18,681</u>	<u>18,681</u>
		<u>68,894</u>	<u>50,929</u>

Note 11 Trade and Other Payables

Current			
Unsecured liabilities			
Trade and other payables		<u>468,194</u>	<u>567,940</u>

Note 12 Other Liabilities

Current			
Unexpended grants	12(a)	<u>2,891,060</u>	<u>3,282,466</u>

Durri Aboriginal Corporation Medical Service
NOTES TO THE FINANCIAL STATEMENTS
For the Year Ended 30 June 2024

Note 12 Other Liabilities (cont.)

(a) Unexpended grants/contributions

The Corporation is contractually obliged to provide services in subsequent reporting periods in relation

Funding Body	Program	2024 \$	2023 \$
AbSec – NSW Child, Family and Community Peak Aboriginal Corporation	Combined Community Response	468	468
Aboriginal Health and Medical Research	Mental Health	4,791	5,000
	Nicotine Replacement Therapy	31,171	29,062
Australian Healthcare Associates	QUMAX	10,728	10,367
	Early Childhood Education	21,939	535,381
Department of Communities and Justice	Family Support	64,643	64,643
	Kempsey Youth	276	276
	Air Conditioning Replacement	1,373	1,373
	Australian Family Partnership Program	497,976	972,325
Department of Health	Bowraville Health Post Upgrade	-	94,500
	Elbow St Development-Kempsey Capital	332,941	387,623
	Indigenous Australians Health Program	70	70
Department of Infrastructure, Transport, Regional Development and Communications	COVID-19 Artist Support	32	32
	IT Project	3,691	3,691
Mid North Coast Local Health District	Drug and Alcohol	1,046	1,046
	Youth Alcohol-Drug Prevention	133,315	67,300
	Aboriginal Disability Liaison Officer	102,915	85,174
	Bushfire Relief-Mental Health	-	7,731
National Aboriginal Community Controlled Health Organisation	Elder Care	90,268	-
	Flood Recovery	305,680	175,000
	HIV Awareness	727	-
	The Voice - Mental Health	3,405	-
	AMIHS	30,557	7,963
	Bellbrook Bushfire Recovery	-	21,602
	COVID-19 Vaccination Promotion	40,120	40,120
NSW Ministry of Health	Dental Equipment Upgrade	350,000	-
	Dental Van	678	-
	Drug and Alcohol	142,335	110,609
	Maternal Health	95	95
	Suicide Prevention	391,165	280,083
NSW Rural Doctors Network	HEBHL	5,731	6,113
	MOICDP	105,853	56,404
	COVID Isolation Support	15,715	15,715
Primary Health Network	Integrated Team Care - Kempsey	108,644	108,644
	Integrated Team Care - Nambucca	46,914	70,052
	Mens Group	4,364	82,570
The Benevolent Society	Communities Program	9,879	9,879
Transport for NSW	Child Restraints	3,305	3,305
University of NSW - Kirby Institute	Walkabout Barber	28,250	28,250
		2,891,060	3,282,466

Durri Aboriginal Corporation Medical Service
NOTES TO THE FINANCIAL STATEMENTS
For the Year Ended 30 June 2024

Note 13 Provisions	Employee Benefits	Total
	\$	\$
Opening Balance at 1 July 2023	795,375	795,375
Additional provisions	761,071	761,071
Amounts used	(766,089)	(766,089)
Closing Balance at 30 June 2024	790,357	790,357
Analysis of Total Provisions		
Employee Benefits	2024	2023
	\$	\$
Current	693,124	707,614
Non-current	97,233	87,761
	790,357	795,375

Provision for Employee Benefits

Provision for employee benefits represents amounts accrued for annual leave, rostered days off and long service leave.

The current portion of the provision includes the total amount accrued for annual leave entitlements and rostered days off leave entitlements and amounts accrued for long service leave entitlements that have vested due to employees having completed the required period of service.

These amounts are classified as current liabilities since the Corporation does not have an unconditional right to defer settlement of these amounts in the event employees wish to use their leave entitlement.

The non-current portion of the provision includes amounts accrued for long service leave entitlements that have not yet vested in relation to those employees who have not yet completed the required period of service.

Note 14 Capital Commitments

In the opinion of those charged with governance, the Corporation did not have any capital commitments or contingencies at 30 June 2024 (30 June 2023: None).

Note 15 Events After the Reporting Period

The Directors are not aware of any significant events since the reporting date.

Note 16 Reserves

(a) Asset Revaluation Reserve

The asset revaluation reserve records revaluations of land and buildings.

Durri Aboriginal Corporation Medical Service
NOTES TO THE FINANCIAL STATEMENTS
For the Year Ended 30 June 2024

Note 17 Key Management Personnel Compensation

Key management personnel are those persons having authority and responsibility for planning, directing and controlling the activities of the Corporation, directly or indirectly, including any Director (whether executive or otherwise) of the Corporation. Control is the power to govern the financial and operating policies of the Corporation so as to obtain benefits from its activities.

The aggregate compensation of key management personnel during the financial year comprising amounts paid or payable or provided for was as follows:

	Note	2024 \$	2023 \$
Short-term employee benefits		537,544	480,366
Post-employment benefits		43,395	39,439
		<u>580,939</u>	<u>519,805</u>

Note 18 Related Party Transactions

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

During the financial year ended 30 June 2021 Director, Katherine Holten (Lynne) was paid amounts totalling \$6,192 (2024: \$Nil) by the Corporation for services rendered by Lynne, in relation to legal matters.

The amounts paid to Lynne totalling \$6,192 are recognised as amounts owing to the Corporation, in the balance of trade and other receivables, and are disclosed in Note 5 to these financial statements.

Note 19 Financial Risk Management

The Corporation's financial instruments consist mainly of cash and cash equivalents, term deposits, accounts receivable and trade payables.

The carrying amounts for each category of financial instruments, measured in accordance with AASB 139 as detailed in the accounting policies to these financial statements, are as follows:

Financial Assets			
Cash and cash equivalents	4	1,406,617	4,095,723
Trade and other receivables	5	3,323,887	3,152,179
Term deposits	6	4,442,500	4,278,003
Total Financial Assets		<u>9,173,004</u>	<u>11,525,905</u>
Financial Liabilities			
Financial liabilities at amortised cost:			
Lease liabilities	10	68,894	50,929
Trade and other payables	11	468,194	567,940
Total Financial Liabilities		<u>537,088</u>	<u>618,869</u>

(a) Net Fair Values

The net fair values of financial assets and financial liabilities approximates their carrying values. The aggregate net fair values and carrying amounts of financial assets and financial liabilities are disclosed in the statement of financial position and in the notes to the financial statements.

Durri Aboriginal Corporation Medical Service
NOTES TO THE FINANCIAL STATEMENTS
For the Year Ended 30 June 2024

Note 20 Fair Value Measurement

The Corporation has the following assets, as set out in the table below, that are measured at fair value on a recurring basis after their initial recognition. The Corporation does not subsequently measure any liabilities at fair value on a recurring basis and has no assets or liabilities that are measured at fair value on a non-recurring basis.

	Note	2024 \$	2023 \$
Recurring fair value measurements			
Non-financial assets:			
Property, plant and equipment			
Freehold land	8, 16(a)	1,510,000	1,195,000
Freehold buildings	8, 16(a)	5,250,000	4,465,000
		<u>6,760,000</u>	<u>5,660,000</u>

(a) Valuation Techniques

The fair values for freehold land and buildings are determined every three years and are based on valuations by independent valuers using recent observable comparable market data for similar properties.

Note 21 Economic Dependency

The Corporation's continued operation is financially dependent on the continued support of the funding bodies for recurrent grant income. Without the continued support of the funding bodies the Corporation may not be able to continue as a going concern, and assets and liabilities recorded in the financial statements may be required to be recognised at amounts other than stated.

Note 22 Auditor Remuneration Disclosure

Remuneration of the auditor for:		
Auditing the financial statements	50,250	47,250
Other assurance related services	11,250	11,250
	<u>61,500</u>	<u>58,500</u>

Note 23 Corporation Details

Registered Office

The registered office of the Corporation is:

Durri Aboriginal Corporation Medical Service
15-19 York Lane
Kempsey NSW 2440

COMMUNITY EVENTS 2023/2024

Durri has proudly hosted and partnered with many organisations to deliver community events. These events were attended by many community members and organisations. We extend our heartfelt thank you to each and every one of you for your participation. Your enthusiasm and engagement made it a truly memorable experience. It was inspiring to see so many of you come together, share your ideas, and contribute to our community's growth.

Your involvement is invaluable, and we appreciate your commitment to making our community a better place. We look forward to seeing you at future events and continuing our journey together!

Durri would also like to express sincere gratitude to our funding bodies for their generous support and funding. Your commitment to our organisation has been instrumental in allowing us to achieve our goals. The resources provided have enabled us to come together, share ideas, and collaborate on projects that will benefit our community, and we are truly appreciative of your belief in our mission. Thank you for being a vital partner in our journey.

Together we can achieve great things!

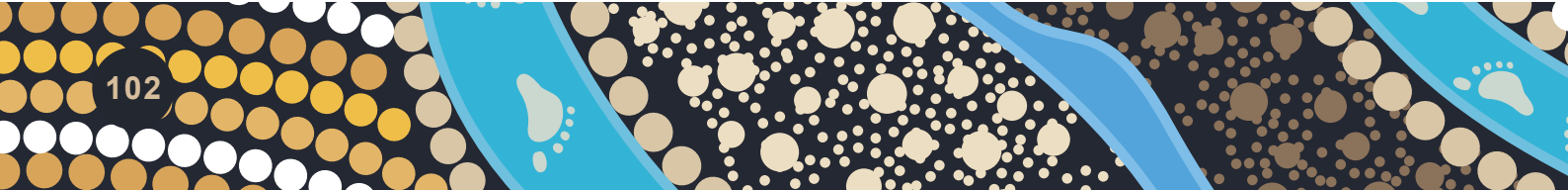






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Durri

Aboriginal Corporation Medical Service
ICN 27

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