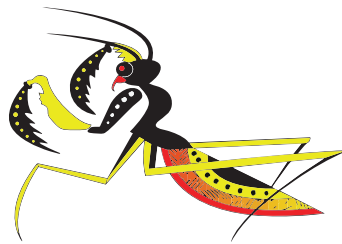


# Annual Report 24-25



**Durri**

Aboriginal Corporation Medical Service

## **ACKNOWLEDGEMENT OF COUNTRY**

We would like to acknowledge our Dunghutti and Gumbaynggirr Nations, who's land we live and work on today.

We pay our respects to Elders, past, present and future.

We acknowledge the hard work and commitment of the current staff and Board Members.

And would also like to acknowledge all past Dunghutti Elders, Dunghutti Community Members, past Staff and Board members who have contributed towards building Durri to what it is today.

## **About the reports**

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



PO Box 136  
Kempsey NSW 2440  
P: 02 6560 2300  
F: 02 6562 7069



*Artwork created by Freeda Roberts, Dunghutti Creations, July 2025.*

*This piece was commissioned in June 2025 by Durri ACMS. The title "Healing Together" of this artwork highlights the importance of community wellbeing.*

*This artwork highlights that healing is not linear. It is ongoing and tied to culture, identity, community and connection to country. As we continue to heal ourselves, we heal our community.*



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## Our Vision

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

## 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 our partnerships with staff, community and other stakeholders. These relationships will assist us in striving to always exceed expectations.

### TRADITION

We continue our journey evolving from our rich history, learning from our challenges 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 equity 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.

## OUR BOARD

**Darren Holten Chairperson**

Appointed 26.11.24

**Noel Lockwood**

Appointed 29.11.22

**Ivy Brown**

Appointed 28.11.23

**Patricia Ann Edwards**

Appointed 25.2.25

**Alison Clarke**

Appointed 26.11.24

**Sean Phillips**

Appointed 25.02.25

**Arthur Kelly**

Appointed Director 27.11.19

**Mary-Lou Buck**

Appointed 27.11.19

Resigned 26.11.24

**Taylor Kelly-Scholes**

Appointed 29.11.22

Resigned 11.12.24

**Rosemary Vale**

Appointed 28.11.2023

Resigned 26.11.24

**Beau Champion  
Independent**

Appointed 25.02.25



# OUR COMMUNITY

Durri ACMS delivers culturally safe, community-led health and wellbeing services across a broad footprint encompassing the Macleay Valley and Nambucca Valley regions.

Durri’s presence in these communities ensures responsive, person-centred care that honours cultural integrity and supports holistic wellbeing for Aboriginal people across Dunghutti and Gumbaynggirr Country.

Our organisation remains deeply committed to fostering strong relationships with the community. Throughout the year, we have actively engaged with elders, community members and stakeholders through consultations, events, and collaborative initiatives. These interactions have helped shape our programs and services to better reflect the needs and aspirations of the people we serve. We are proud of the inclusive and respectful partnerships we continue to build, and we acknowledge the valuable contributions of community members in guiding our work and strengthening our shared outcomes.

## OUR SERVICE FOOTPRINT

### KEMPSEY LOCAL GOVERNMENT AREA



### Key Points about our Durri ACMS Service Footprint

#### Geographic Coverage:

Macleay Valley  
(including Kempsey and surrounding communities)

Nambucca Valley  
(including Nambucca Heads and surrounding communities)

2021 Census data  
Indigenous status

Indigenous status	Kempsey	%	New South Wales	%	Australia	%
<i>All People</i>						
Aboriginal and/or Torres Strait Islander	3,959	12.9	278,043	3.4	812,728	3.2
Non-Indigenous	24,530	79.9	7,404,499	91.7	23,375,949	91.9
Indigenous status not stated	2,200	7.2	389,616	4.8	1,234,112	4.9

## OUR SERVICE FOOTPRINT

### NAMBUCCA VALLEY LOCAL GOVERNMENT AREA



Indigenous status	Nambucca Heads	%	New South Wales	%	Australia	%
<i>All People</i>						
Aboriginal and/or Torres Strait Islander	672	10.1	278,043	3.4	812,728	3.2
Non-Indigenous	5,469	81.9	7,404,499	91.7	23,375,949	91.9
Indigenous status not stated	530	7.9	389,616	4.8	1,234,112	4.9

More information [onabs.gov.au/census/guide-census-data/census-dictionary/2021/variables-topic/aboriginal-and-torres-strait-islander-peoples/indigenous-status-ingp](https://onabs.gov.au/census/guide-census-data/census-dictionary/2021/variables-topic/aboriginal-and-torres-strait-islander-peoples/indigenous-status-ingp)  
 Tables based on place of usual residence

## MESSAGE FROM OUR CHAIRPERSON

As Chairperson of Durri Aboriginal Corporation Medical Service (Durri ACMS), I am proud to present this Summary for the 2025 Annual Report—a year that marks both reflection and renewal as we celebrate 49 years of community-controlled health service.

The journey since the 2019 AGM has been transformative. Our members sent a clear message calling for change, and I'm pleased to report that meaningful progress has been made. Guided by our Strategic Plan 2025–2030, we have embraced a future-focused approach rooted in cultural integrity, community voice, and operational excellence.

One of the most exciting developments this year has been the advancement of plans for our new facility. This purpose-built space will allow us to expand our services, improve accessibility, and deliver culturally safe care in a setting that reflects the strength and spirit of our people. The new facility is more than bricks and mortar—it's a symbol of our growth, resilience, and commitment to future generations.

We've also re-established strong partnerships with federal and state health bodies, as well as local non-government organisations. These relationships have led to increased funding and opened doors to future opportunities that will help us deliver better outcomes for our communities across Kempsey and Nambucca.

Governance has remained a key focus. Our Board has undertaken comprehensive training to strengthen leadership and ensure strategic planning guides every decision. In 2025, we began a full review of our organisational policies to ensure clarity, transparency, and alignment with our values and goals. This work will continue into 2026, reinforcing our commitment to accountability and cultural safety.

I want to acknowledge the extraordinary efforts of our staff. Their dedication, compassion, and professionalism have been unwavering, especially during challenging times. They are the heartbeat of Durri, and their contributions continue to shape a healthier, stronger future for our people.

As we look ahead, we do so with optimism and pride. Durri ACMS remains, as it always has been, an Aboriginal community-controlled health organisation—led by our people, for our people. We honour our past, celebrate our present, and walk forward together into a future defined by unity, strength, and cultural pride.

Thank you to our members, Elders, staff, and stakeholders for your continued support and trust. Together, we will continue to grow, heal, and lead.

### **Darren Holten**

Chairperson

Durri Aboriginal Corporation Medical Service



## MESSAGE FROM OUR CEO

I respectfully acknowledge the Traditional Custodians of the land on which we live and operate—the Dunghutti, Thunghutti and Gumbaynggirr peoples. I pay my deepest respects to Elders past, present, and emerging, and recognise their enduring connection to land, waters, culture, and community. I also acknowledge the ongoing impact of Sorry Business across our communities and extend my heartfelt condolences to all who have lost loved ones.

I also recognise and acknowledge the strong leadership and strength of the current Durri ACMS Board, and pay tribute to our Elders, past Board members, former staff, and the Dunghutti community who laid the foundation for Durri to become the trusted and culturally safe organisation it is today. Their legacy continues to guide our work and inspire our future.

2024/25 has been a transformative time for Durri ACMS – marked by growth, achievement, resilience, and renewed engagement with our community.

For the first time in many years, we have reached full staffing capacity, enabling us to expand services, strengthen internal and external systems, and deliver improved outcomes for our people.

Key Achievements:

- **Service Expansion:** Increased clinical, dental, and community programs across our footprint.
- **Workforce Development:** Strengthened senior management and Human Resource teams to support staff development, cultural safety and career pathways.
- **Social and Emotional Wellbeing (SEWB):** Expanded SEWB team with enhanced focus on Drug, Alcohol, Youth AOD, Family Violence, Suicide Prevention and Mental Health services, as well as Youth, Men's and Women's groups.
- **Strategic Infrastructure:** Continued progress towards the Durri and new Darrimba Maarra site being refurbished and establishing a Residential Rehabilitation/Wellbeing Centre.
- **Governance:** Completion of corporate governance training to reinforce Board leadership, financial accountability, compliance, and decision-making.
- **Systems Improvement:** Upgraded patient information systems and developed a Medicare Plan to guide future service growth.
- **Community Impact:** Increased patient attendance—averaging over 80 patients per day – and rising uptake of Health Assessments (715s), contributing to improved health outcomes.

I want to thank our dedicated staff for their leadership, professionalism, resilience, and teamwork – particularly in times of change, demand and during Sorry Business. Your commitment to our community is deeply valued and we appreciate you.

To our community: thank you for your continued support, trust, and partnership. Together, we are building a culturally safe, community-led healthcare service that reflects the strength, spirit, and values of Dunghutti Country.

### Paul Morris

Chief Executive Officer

Durri Aboriginal Corporation Medical Service



# PRIMARY HEALTH CARE



# PRIMARY HEALTH CLINIC

## STAFF DETAILS

**Raelene Davis** - Practice Manager

**Norma Kelly** - Practice Manager to September 2024

## OVERVIEW OF SERVICE

Our Primary Health Care comprises four sections:

- Reception/Transport
- GPs/Clinic
- Chronic Care
- Oral Health

Each of these sections play an important role in providing quality health care to our community and are the foundation of our medical service.

Our staff strive to provide the most culturally safe and supportive care we can to all who present to our service.

Staff have shown a commitment to our patients that is second to none and make every effort to provide the best possible care to ensure the highest outcomes for our community.

I would like to thank each of my team members for their dedication and hard work in delivering a valuable and essential service to our community even when faced with adverse conditions such as natural disasters. We are committed to providing person centred care in a culturally safe space for all who attend Durri ACMS.

I would also like to thank our patients for their continued support and understanding as we work together to build a healthier community for future generations.



Victoria, AJ, Marissa and Theresa accepting an Easter gift from Woolworths who acknowledged Durri's contribution in caring for our community. Thank you, Woolworths, for the acknowledgement.

# RECEPTION AND TRANSPORT

## RECEPTION AND TRANSPORT STAFF

**Jessica Holten** - Team Leader

**Nesuan Dixon** - Receptionist

**Iris Flanders** - Receptionist

**Jaimee Griffen** - Receptionist

**Estella Blair** - Receptionist (Part time)

**Kim Caldwell** - Medical Records

**David Welsh** - Transport Officer

**Shane Davis-Caldwell** - Transport Officer



## OVERVIEW OF SERVICE

Our reception team is the first point of contact for our community, patients, and stakeholders, providing high quality customer service in a family friendly environment within our medical service is essential for our patients.

Our role is to provide and deliver holistic patient care and transition our patients smoothly with their journey throughout our medical service.

Durri's reception staff assists patients with doctors' appointments, recalls, booking transport for local and out of town appointments, dental appointments, referrals to external and internal specialists.

Our team is committed to providing excellent customer service to our local community and endeavour to treat all patients with respect and kindness, ensuring that their interactions with Durri are as pleasant as possible.

## STATISTICS AND OUTCOMES

### Appointments attended:

**GPs: 9,322** patients attended for either walk ins or booked appointments and 1,346 of these appointments were for care plans, Health Assessments and Mental Health Treatment Plans.

**Clinic Nurses: 2,004** patients seen via our triage system.

### Transport:

**Males** - 2054

**Females** - 5100

**Total** - 7154

## CHALLENGES AND LEARNINGS

- Lack of doctors
- Transport availability for long distance appointments
- Aggressive patients
- Staffing availability
- Lunch time closure would be valuable for staff and their wellbeing
- More training for reception staff
- The need for more casual staff to appropriately cover leave

## COMMUNITY ENGAGEMENT

- NAIDOC events held at Durri allowed staff to interact with patients in a more relaxed environment.
- Durri Community Fun Day
- Breast Screen Bus onsite at Durri

## STAFF HIGHLIGHTS

- AMSED online training introduced for staff to allow access to valuable training resources onsite.
- Lateral Violence Workshops
- Durri Staff Development Day
- First Aid Training
- Fire Training/Warden Training

## QUOTES OR STORIES

Our aim is to treat every patient like family.



# PRIMARY HEALTH CLINIC

## PRIMARY HEALTH CARE CLINIC TEAM

**Tracy Murrells** - Team Leader/Reregistered Nurse

**Moriah Resurrection** - Registered Nurse

**Noelene Brown** - Endorsed Enrolled Nurse

**Marissa Widders** - Endorsed Enrolled Nurse

**Susanne Ward** - Endorsed Enrolled Nurse

**Barry Phyllis** - Aboriginal Health Practitioner

**Dr Wendy Olden**

**Dr Peter Fletcher**

**Dr Nigel Humphreys**

**Dr Takesure Madzivire**

**Dr Beom Koh** (resigned 2025)

**Dr Joanne Wong** (Registrar)

**Dr Sang-He Campbell** (Registrar)

**Dr Mujtaba Morshed** (Registrar)



## OVERVIEW OF PRIMARY HEALTH CLINIC

We have a dedicated and professional Clinical Team that support our patients with life changing health related issues with culturally appropriate care. We provide triage to assist better patient flow for our GPs. We support patients of every age to gain a better understanding of their health needs. We provide stand-alone services of dressings, immunisations, ECGs, medication education, culturally appropriate crisis support, iron infusions, pathology collection (blood collection, swabs, samples), support when seeing a doctor if requested, follow up support and recalls.

## KEY ACHIEVEMENTS

- Health assessments 15yo+, Pregnant women
- Flu vaccination health promotion – Hoodie campaign
- Monthly in-services
- Monthly Clinic team meetings for GP's, Nurses and AHP
- All staff have attended annual First Aid, CPR, Fire Training, MH First Aid, Hand Hygiene and Cold Chain
- PHN Advanced Life support training and hands-on team building exercises practical day – GPs and Nurses
- Tracy is WH&S Committee Member, Infection Control Delegate and Clinic Fire Warden
- Barry is Deputy Fire Warden
- Supporting new Staff members with GP appointments for blood serology and Immunisations to be compliant with Category A Immunisations for Health Professionals
- Provided all legal documents, workcover claims, forensic reports, Adult 16A Carer reports, housing support forms, wheelchair and licence applications, immunisations reports and provide documents to patients to pathology, lumus imaging and referrals to specialist
- Chest pains – cardiac pathway followed, and patients are managed quickly and have zero wait time.

- Covid packs and telehealth advice provided by Clinic
- RAT tests and mask wearing ongoing
- Morning and afternoon cold chain checks on Covid, Fluvax and Clinic fridges
- Ensuring compliance with PPE and Isolation management for Covid, RSV and measles
- Support of new families by ensuring all members who will be with newborns have whooping cough vaccinations
- Recalls and Monthly Bicillin injections, managing limited stock and co-ordination of this
- Home visits
- Covid vaccinations
- Overseas travel vaccinations
- Co-ordinate annual BCS compliance testing
- Women's Health Nurse providing routine checks, recalls and health promotion
- Work with Reception to support our patients
- Patient transport to help as needed
- Procedures – Mirena, Implanon, skin excision and stitches



## STATS AND OUTCOMES

### Challenges and Learnings:

We engage with our community and ensure that their challenges are supported by Durri Primary Health Clinic to the best of our abilities. We support our patients to link into other services within Durri as needed.

## COMMUNITY ENGAGEMENT

Daily interaction with Community.

### STAFF HIGHLIGHTS

Staff appreciation lunches.

Employee of the month award – Noelene Brown.

AMSED has been rolled out at Durri ACMS providing staff with access to a wide variety of online training opportunities.

### STORY OR QUOTE

Dedicated and passionate about supporting our Community for better lifestyle outcomes.

### FUTURE DIRECTIONS

- Ongoing education and support for Immunisations.
- Pathology support and more staff able to attend to blood collection.
- Moriah to complete her Nurse Immunisation course allowing her to act as an Independent Practitioner to give all Immunisations.
- Continue all 15yo+ Health Assessments.

# DURRI CHRONIC CARE PROGRAM

## STAFF DETAILS

**Tony McMahon** - Team Leader/Registered Nurse

**Lee Moroney** - Registered Nurse

**Karen Foster** - Senior Aboriginal Health Practitioner

**Lisa Brown** - ITC Co-ordinator

**Eliza Everson** - ITC Officer

**Barry Phyllall** - Aboriginal Health Practitioner/ AHP Trainee (transferred to Primary Health Clinic 2025)

**Tahnia Bown** - Chronic Care Administration Officer (transferred to Programs 2025)

**Deborah Faucett** - Endorsed Enrolled Nurse (resigned 2025)



## OVERVIEW OF SERVICE/PROGRAM

The Chronic Care Team provides both advanced clinical care and support for Adult Chronic Disease patients (aged 15 years and over) within the Durri footprint. Our internal Specialist Services (Cardiology, Endocrinology, Nephrology, Elders and Pain Services) rely upon annual care plans co-ordinated with Chronic Care.

The Integrated Team Care (ITC) Program is then able to provide purchase orders, petrol vouchers, and accommodation for our clients especially when they need to travel outside our local area to external specialist services.

Our primary focus has been in completing care plans in partnership with our GPs and co-ordinating our internal specialist clinics.

Our key focus is case managing our clients to attend and follow-up from our clinics.

## KEY ACHIEVEMENTS

- Relocation back to York Lane and a re-focus on both care plans & health assessments with an influx of Chronic Disease Team (CDT) staff membership.
- In response to patient feedback – a re-emphasis on telephone drafting of care plans to minimise the time patients spend having their care plans drafted and finalised.
- Optimisation of patient attendance at our busy specialist clinics. It is quite a challenge co-ordinating numbers due to the many challenges facing our clients. On average we have around a 75 to 80 per cent attendance rate across all specialist clinics.

## STATISTICS AND OUTCOMES

At the time of Report – September 2025 the number of Adult Chronic Disease clients directly served by our clinics equals x 500 active clients across all specialist clinics (Cardiology/ Endocrinology/ Nephrology/ Geriatrics and Pain Clinics). These clients would have current or near current care plans and referrals in place to receive ITC Funding Support. This is also a requirement for RDN funded Specialist Services. There are several inactive clients – around 150 who, for various reasons, have let their referrals/Care Plans lapse. Not all clients wish to pursue specialist support. Many clients are happy to continue or be returned to GP Management with Allied Health support.

As of June 2025 the ITC Program has a total of 781 registered Durri clients across all ages.

Since March 2025 our internal cardiology service has been on hold whilst we engage the services of a new cardiologist. Clients are seen externally at either Coffs Harbour or Port Macquarie. We are currently negotiating a new cardiology specialist service.

Reports which state there are 2969 active chronic disease cases run in February 2025 include all registered chronic disease conditions across all ages. These statistics are misleading in the sense that they do not consider that most chronic care patients have *multiple co-morbidities or conditions*. One person might have up to 5 chronic conditions. The number of un-serviced Chronic Care patients would therefore reduce considerably.

**Key performance indicators or outcomes achieved:**

More than 500 patients with chronic illness have current care plans and are supported by both the chronic care team; associated specialists and Allied Health - whether internally or externally.

**Specialist Clinic attendance rates:**

Our aim is to achieve an 80% attendance rate at each clinic. Our general trend this year is around 75% depending on clinic.

## CHALLENGES AND LEARNINGS

A significant challenge in May 2025 was working through prolonged staff shortages due to major flooding in the Kempsey and surrounds.

Our Care Planning processes have been stream-lined to minimise undue time spent drafting and then seeing the GP for our patients.

## COMMUNITY ENGAGEMENT

Two major events in the last x 6-12 months were:

- Cultural Awareness Training at the Dunghutti Elders (10/5/2024)
- Community Stroke Information Day (6/8/2024)– again at the Dunghutti Elders.

## STAFF HIGHLIGHTS

- Barry Phyball completed Aboriginal Health Practitioner Course.
- Tony McMahon contributed as a member of the NACCHO Diabetes Expert Advisory Group to support the development of AHW/ AHP TAFE-based Diabetes Courses and In-services.
- Karen Foster commenced the Diabetes Educator Course through the University of Technology, Sydney.
- Durri obtained Laser Treatment Device for Chronic Care Clients. Deborah Faucett and Tony attended Orientation Certification to use the laser device.
- Lisa Brown received Employee of the Month in June for her selfless dedication to our ITC clients.
- Lee Moroney, Deborah Faucett and Tony McMahon attended Advanced Life Support Training- along with Durri Medical staff here at Durri in April 2025.

## QUOTES OR STORIES

*“Thank you so much for all your help during my Cancer Journey. My last scans are clear. Without your assistance I wouldn’t have received the treatment.”* ITC Client



# ORAL HEALTH PROGRAM

## STAFF DETAILS

**Dr Roshan Abraham** - Senior Dental Officer

**Jonine Gilmour** - Dental Therapist (resigned 2025)

**Mayta Smith** - Dental assistant

**Hayley Capon** - Dental Assistant

**Fozia Jones** - Dental Assistant



## OVERVIEW OF SERVICE/PROGRAM

The Dental team provides Culturally appropriate dental services to Aboriginal clients across Kempsey and Nambucca.

### Purpose of program

#### Preventive:

- Improve oral health in the community.
- Improve access to dental services through outreach programs via mobile dental vans.
- Provide denture services to Durri patients in need.
- Inculcate oral health at a very young age.
- Develop partnerships for oral health projects in the community.
- Get more members of the community involved in oral health, e.g. training and employment in oral health service delivery.
- Employ more Aboriginal staff in Dental.
- Prevent traumatic dental injuries.

#### Interventional:

- Provide comprehensive dental services to the community.
- Bring dental services into the 21<sup>st</sup> century.
- Provide comprehensive dental care.

#### Budgetary:

- Meet funding KPIs
- Use government incentives such as CDBS to enhance funding.

#### Professional development:

- Encourage continuing professional development.
- Offer training positions to Aboriginal people.

## KEY ACHIEVEMENTS

- Durri dental service commenced its first ever inhouse denture program.
- Durri dental program was successful in obtaining funding from NSW Health for brand new equipment.
- Durri dental program successfully applied for funding from the Australian Dental Association for oral health promotion in the community.
- Durri commenced hosting dental student placements from Sydney University.

## STATISTICS AND OUTCOMES

- Number of clients served: 1081
- Key performance indicators or outcomes achieved:
  - DWAUs: 870.57
  - Referrals to Local Health District: 69
  - Dentures provided: 64

## CHALLENGES AND LEARNINGS

- What challenges did your team face?
  - Loss of DA trainees without completion of qualification
- What did you learn or improve upon?
  - More structured DA training program

## COMMUNITY ENGAGEMENT

- Events, partnerships, or outreach activities:
  - NAIDOC week stall for oral health promotion
  - Continued partnership with Dalaigur, local schools
  - New partnership with Booroongen Djugun
  - Outreach clinic to West Kempsey School
  - Outreach to Booroongen for Aged Care oral health assessments

## STAFF HIGHLIGHTS

Dental officer enrolled in a Diploma in Orthodontics course.

Dr Sefin Varghese, Uncle Cyril Davis  
and Bradley Kershaw



# DARRIMBA MAARRA HEALTH OUTPOST



# DARRIMBA MAARRA HEALTH OUTPOST

## STAFF DETAILS

**Terri Jarrett** - Practice Manager- Darrimba Maarra, Nambucca Valley

## STAFF DETAILS DARRIMBA MAARRA

**Corrinna Dahlstrom** - Team Leader Reception

**Susan Edwards** - Reception

**Christopher Donovan** - Transport Officer

**Damon Simon-Wilson** - Transport Officer

**Genetta Carberry** - Aboriginal Health Practitioner – General Practice and Specialist Clinics

**Irina Holmes** - Registered Nurse General Practice and Specialist Clinics

**Natalie Wood** - Registered Nurse- General Practice and Women's Health Clinic

**David Cutmore** - Social and Emotional Wellbeing Officer

**Dorothy Cohen** - Child and Family Health Aboriginal Health Worker

**Dr Daniel Ryan** - General Practitioner

**Dr Fiona Mc Govern** - General Practitioner



## OVERVIEW OF SERVICE/PROGRAM

Our service is dedicated to providing culturally safe, comprehensive, and accessible primary healthcare to our community. We offer a wide range of medical, allied health, and social support services, including general practice, chronic disease management, immunisations, mental health support, and specialist clinics.

The purpose of our service is to improve health outcomes and wellbeing within our community by delivering holistic, culturally appropriate care. We aim to empower individuals and families through health education, prevention programs, and coordinated care, ensuring that our community can access the services they need in a supportive and inclusive environment.

## KEY ACHIEVEMENTS

- 97% of all patients stated things about this practice were, Good, Very Good or Excellent via the CFEP survey.
- Our Short Street building plans have now progressed to council approval, marking a significant step forward towards our end goal of moving into the new premises.
- Our Bowraville outpost is currently under development and progressing steadily towards opening. We are excited about the opportunities this outpost will bring and remain committed to ensuring it is able to meet the needs of those we serve.

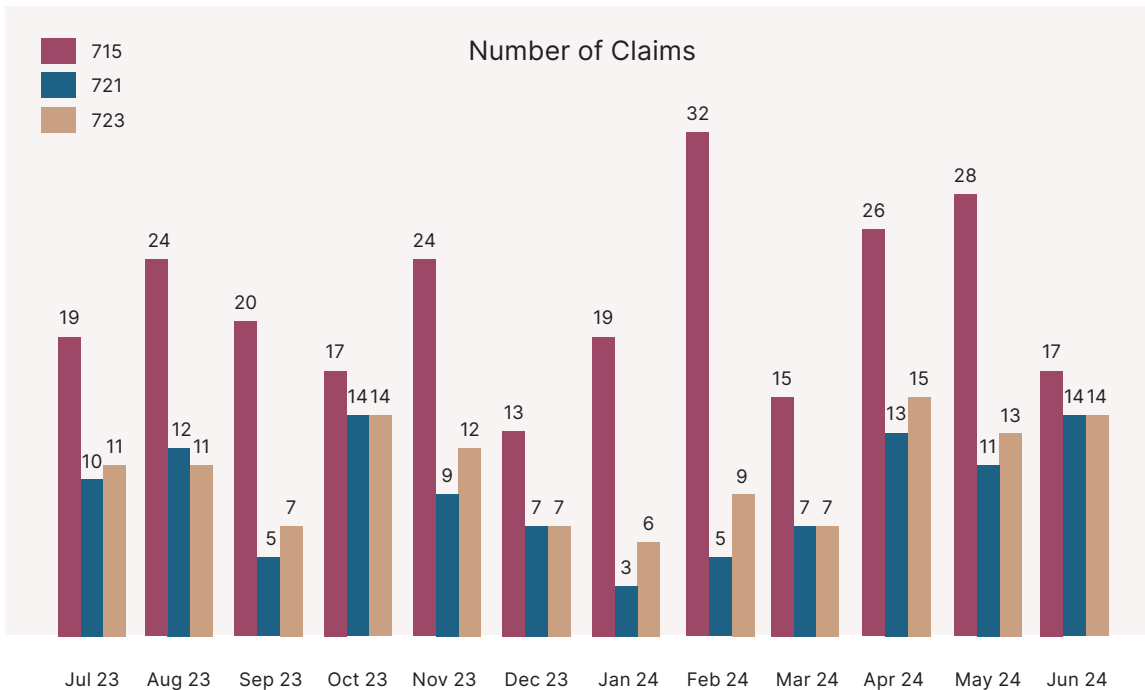
## STATISTICS AND OUTCOMES

Throughout the reporting period, we demonstrated consistent progress in delivering health assessments (715) and care plans (721 and 723). Notable increases in activity from February to May 2024 highlight our commitment to proactive patient care and the effective implementation of structured planning to support health outcomes.

## KEY ACHIEVEMENTS

- 254 health assessments (715) completed
- 110 GP management plans (721) completed
- 126 team care arrangements (723) completed
- A total of 490 assessments and care plans delivered

Looking ahead, we aim to build on this growth by further increasing access to health assessments and strengthening the coordination of care planning to enhance long-term patient outcomes.



## CHALLENGES AND LEARNINGS

- **What challenges did your team face?**

Limited space impacted our ability to provide multiple services simultaneously, created scheduling constraints. Despite these challenges, our staff adapted by optimizing workflows, coordinating appointments efficiently, and prioritizing patient-centred care to ensure services remained accessible and of high quality.

- **What did you learn or improve upon?**

During this period, we strengthened communication within our team to ensure that limited space was used efficiently to provide services. We also improved the coordination of GP, multidisciplinary care, and health assessments to better meet patient needs, ensuring timely and patient-centred care.

## COMMUNITY ENGAGEMENT

As part of our commitment to recognising and celebrating culture, we marked **NAIDOC Week** with our patients by sharing cupcakes and creating a welcoming space for conversation. A highlight of the event was the stunning balloon arch, crafted by our very own **Corrinna**, which brought colour and vibrancy to the celebration. The occasion was a wonderful opportunity to strengthen community connections and acknowledge the significance of NAIDOC Week

## STAFF HIGHLIGHTS

This year our team celebrated key moments and achievements, including:

- Seeing the positive health improvements of our patients through ongoing care and support
- Celebrating NAIDOC Week together as a team and with our community
- Participating in professional development and training opportunities to strengthen our skills and enhance service delivery

## QUOTES OR STORIES

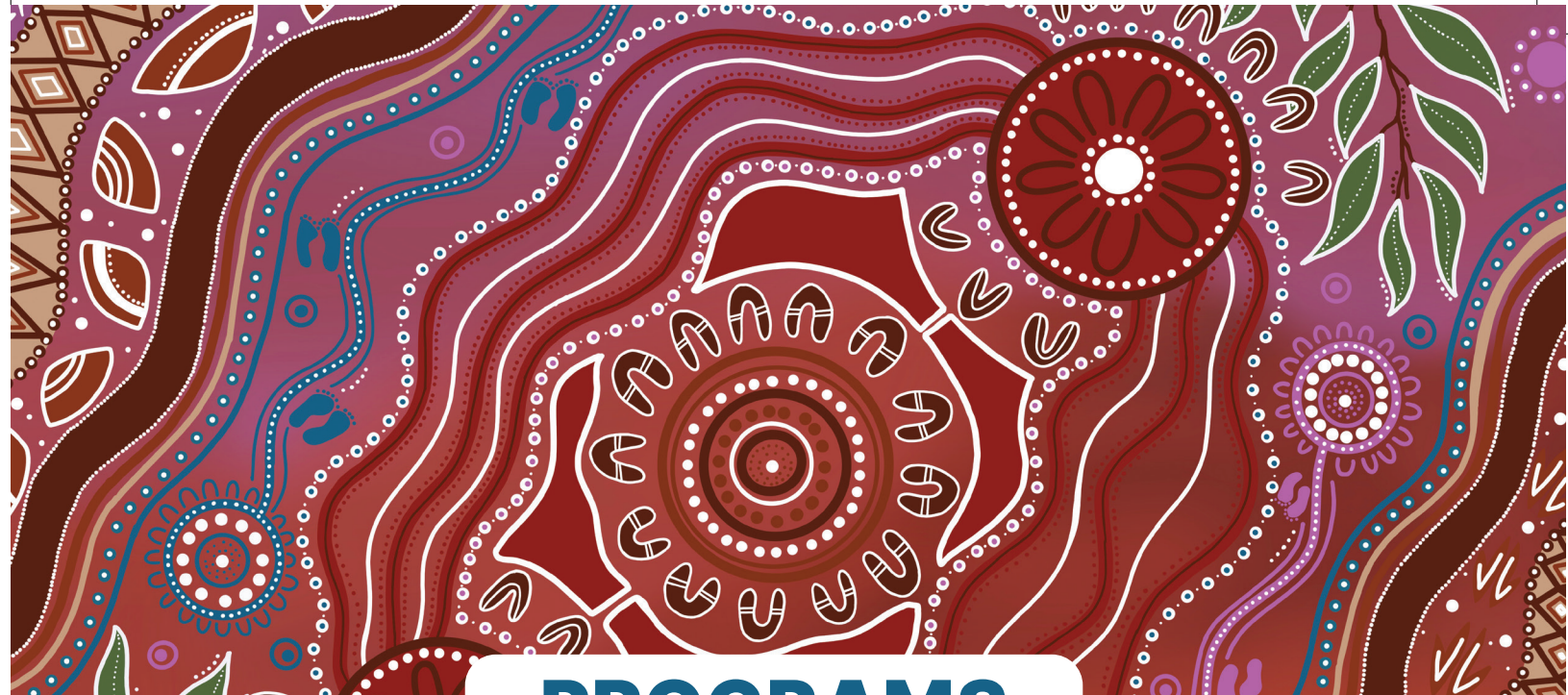
Feedback from our clients reflects the high standard of care provided through the CFEP survey:

*"The clinic offers a range of services that are helpful. Staff are consistently kind and approachable, and same-day appointments are often available, which is especially convenient for working individuals."*

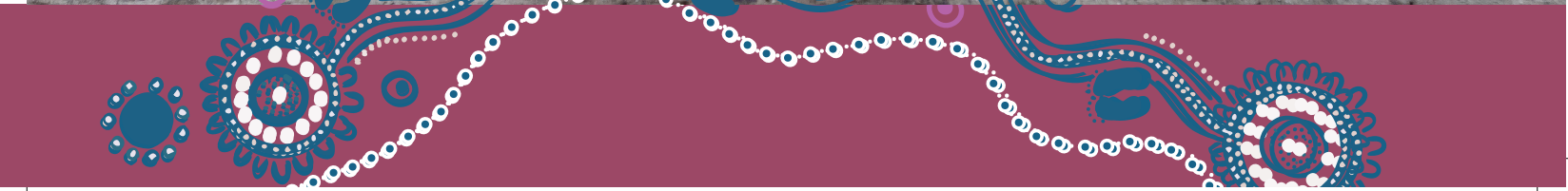
*"The staff and doctors go above and beyond to care for my children. I am grateful to have access to a clinic I can depend on."*

*"Keep up the good work."*





# PROGRAMS



# ABORIGINAL MATERNAL INFANT HEALTH SERVICE

## STAFF DETAILS

**Kate Jones** - Midwife

**Delya Smith** - Aboriginal Health Worker

**Peter Fletcher** - Obstetrician

## OVERVIEW OF SERVICE/PROGRAM

AMIHS program provides culturally safe antenatal and postnatal care to Aboriginal women during their pregnancy journey. At six weeks post-partum mum and bub is referred to the Child and Family Team. The program also offers support and encouragement in a trusting environment that is non-judgemental when clinic and home visits. AMIHS footprint area is north to Stuarts Point, west to Bellbrook and around the local communities in Kempsey.

## KEY ACHIEVEMENTS

- Due to the arrival of the coolamon's clients are completing their Health Assessment and by 35 weeks they are given a coolamon with a photo taken.
- Antenatal Respiratory Syncytial Virus (RSV) vaccine well received by the pregnant women.
- Early attendance before 12 weeks has improved.
- Improved birth weights
- Reduction in several premature births (priority to 37 weeks).

## STATISTICS AND OUTCOMES

Number of clients served: 84 Aboriginal and non-Aboriginal clients with Aboriginal partners.

## KEY PERFORMANCE INDICATORS OR OUTCOMES ACHIEVED:

Our clients improved wellbeing during their antenatal and postnatal care in the clinic or home visits.

## CHALLENGES AND LEARNINGS

- **What challenges did your team face?**

Dealing with clients not attending appointments such as antenatal checks, ultrasounds, pathology, drug and alcohol services.

- **What did you learn or improve upon?**

Ongoing reminders by phone or text to inform clients the importance of their appointments for their baby's up to date and ongoing health journey.

Improved communication/education with our clients during antenatal and postnatal visits.

## COMMUNITY ENGAGEMENT

- NAIDOC: Durri organised a Community Barbeque after the NAIDOC March.
- Durri Collaborated with Schools in their footprint.
- Burran Dalai Out of Home Care Community Family Fun Day.
- Durri organised a community luncheon supporting our Elders.
- Durri's New Website Promotion.

## STAFF HIGHLIGHTS

- Aboriginal Health Worker all most completed certificate III in Aboriginal Health Community Care.

## QUOTES OR STORIES

Maternal Health Client after receiving the Coolamon

*"I was so pleased to receive this; my baby can sleep in the coolamon, so I don't roll on baby and the stuff inside the coolamon really helped".*



# ABORIGINAL DISABILITY LIAISON OFFICER

## STAFF DETAILS

**Debra Morris** - Aboriginal Disability Liaison Officer (ADLO)



## OVERVIEW OF PROGRAM

The ADLO program role is to provide outreach to First Nations People of all ages in a culturally sensitive manner by breaking down barriers for potential NDIS clients to access the NDIS Program and be able to assist participants of all ages to access services under the NDIS program by:

- Liaising and assisting First Nations families and communities to link in with following services such as Primary Health Team, Early Childhood services, Social Emotional and Wellbeing and Families and Young Persons services has been established and continuing.
- Established linkages with Blue Sky Local Area Coordinator (PITC), external service providers and other organisations to assist participants with their community planning and referrals for NDIS.
- Continue to advocate for NDIS participants to access community, social and recreational activities.
- Participate in the development of NDIS promotions and education strategies ensuring feedback from the community is incorporated into planning is ongoing.

## KEY ACHIEVEMENTS

- ADLO Conference – August 2024 – participation and contributing to the NACCHO ADLO Program Evaluation Report November 2024 with 12 Recommendations.
- Initiating of a Culturally safe environment for NDIS potentials client – NDIS Yarn ups held fortnightly began in March 2025 with Blue Sky Local Area Coordinator First Nations worker.
- Community participation, advocating for NDIS by attending events pertaining to events of significance of Health and Wellbeing to the Dunghutti Nation and the wider community.

## STATISTICS AND OUTCOMES

### Number of clients served:

In 2024 -2025, more than 70 plus NDIS potential participants were referred by internal, external, and self-referrals and assisted by the ADLO.

### Key performance indicators or outcomes achieved:

Of the 70 plus NDIS Potentials clients, they are now able to attend the NDIS Yarn ups and their application process is less complicated and can submit their applications quicker and receive a NDIS number until their application is determined by the NDIS.

## CHALLENGES AND LEARNINGS

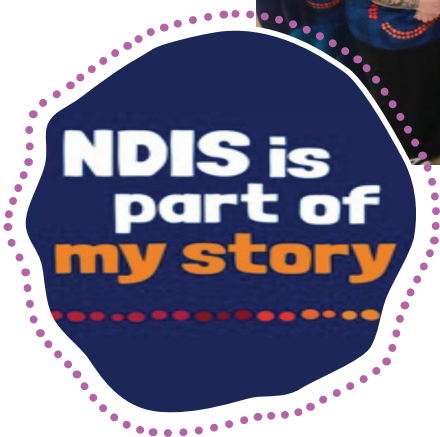
- Learning to navigate the NDIS process and supporting NDIS potential participants to be able access NDIS packages.
- First NDIS Potential Participant registered has a NDIS client and receiving their package. This was a long process due to NDIS Access Request requiring original Birth certificates complex family, health and medical issues has barriers.
- With the support of Durri staff, attending NACCHO ADLO Community of Practice and engaging of a Blue-Sky Local Area Coordinator First Nations worker, ADLO able to learn and improve navigating the ADLO role.

## COMMUNITY ENGAGEMENT

International Women's Day, April Falls Day, Shady Ladies Health and Wellbeing Project, NAIDOC events, Recognition of ATSI Health Workers and Practitioners Day, Babaang Baluwa Elders Care Support Group, SEWB Mother's Day event, Dalaigur Pre-School and Pathfinders National Aboriginal Birth Certificate event, Yuwa Nyinda Dream Academy and Durri Celebration of Durri 49th Birthday.

## STAFF HIGHLIGHTS

- 2024 - 3 Webinars - Dementia Training Australia, The Memory Study – Dementia Demystified Understanding - Mild Cognitive Impairment and Dementia in Regional NSW – The University of Newcastle.
- 2024 QAAMS – Certificate of Training and Competency in Point-of-Care Testing
- Mandatory workplace certificates current e.g., First Aid
- AMSED E-Learning courses completed:
  1. People with co-occurring Mental Health conditions and AOD use disorders in Primary Care,
  2. Suicide risk assessment of Primary care with co-occurring MH conditions and AOD disorders and
  3. Caring for patients with acute, potentially substance-induced psychosis in primary care.



## QUOTES

### ADLO Conference – Cairns August 2024 Evaluation Report

#### Impact of ADLO support

*“ADLO clients and their families who were interviewed provided consistent accounts of the value of the program to them. All spoke positively about their interactions with ADLOs, regardless of whether they had been accepted into the NDIS, and stated they would recommend the ADLO program to others. In fact, clients described the ADLO program as lifesaving – often in the face of high stress or struggling with mental health concerns and self-harm. It offers a positive and supportive connection and helps to increase understanding of disability, ease the burden clients face of living with a disability or managing the disability of a child or family member, and managing their access to or relationship with the child or family member, and managing their access to or relationship with the NDIS.*

#### Holistic

*“Needs are not siloed in the way that sectors commonly operate. When clients meet ADLOs, they are often dealing with multiple complexities and challenges. ADLOs and ADLO Managers described taking a holistic view of clients, i.e. viewing the client, rather than only focusing on disability, and determining functional capacity. Truly getting to know the client can enable linkages into other services and supports, such as connections to PITC, allied health and general practitioners, transport, mental health, and both individual and group options for social and emotional wellbeing (SEWB) support.*



# AUSTRALIAN FAMILY PARTNERSHIP PROGRAM

## STAFF DETAILS

**Irene Weiss** - Nurse supervisor (NS)

**Martina Rosas** - Nurse Home visitor (NHV)

**April Collins** - Nurse Home visitor (NHV)

**Tahlia Duroux-Lancaster** - Family partnership worker (FPW)

**Justine Green** - Family partnership worker (FPW)

**David Fernando** - Family partnership worker (FPW)

**Christine Dixon** - Admin Officer



## OVERVIEW OF PROGRAM

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.

## KEY ACHIEVEMENTS

We worked hard to strengthen relationships with our external stakeholders and raise awareness of the program within both the stakeholder network and the community. We also collaborated with the broader maternal and child and family health teams to streamline referral processes to enable us to work better as a team. This has resulted in an increase in referrals of 47%, something we are very proud of.

We spent more time in the community, listening, showing up, and building trust.

We created a welcoming space during this period; we created this space to ensure it felt more like a home than a clinical environment. This has had amazing benefits and has allowed us to deliver visits in a homely, safe, warm environment in cases where a clients living circumstances may prevent us from otherwise doing so.

## STATISTICS AND OUTCOMES

### Number of clients served:

We received 29 referrals during this period and 24 of these clients joined the program (83%).

## KEY PERFORMANCE INDICATORS OR OUTCOMES ACHIEVED

- Women feel confident in their ability to participate in the planning of their care.
- All women involved with AMIHS (Aboriginal Maternal and Infant Health Service) have a 715 Health Assessment completed.
- 100% of children seen through the child and family health team are immunized as per the National Immunisation program schedule and have all age-appropriate health checks completed.

## CHALLENGES AND LEARNINGS

### What challenges did your team face?

- Changes within the National leadership team and a data transition leading to data quality and reliability concerns.
- Booking visits and having clients attend them can be challenging. There are numerous factors that can influence this such as having a broken or shared phone or not having credit. Our clients often have numerous challenges in their lives, sometimes leading to crisis, this can affect home visiting schedules and our ability to deliver content.

### What did you learn or improve upon?

- We have developed methods to collate data at a site level.
- We have learnt to be more flexible in our delivery of care and deliver health education opportunistically when appropriate.

## COMMUNITY ENGAGEMENT

Our staff participated in many events and activities. These include:

- Men's cultural camp
- Men's group
- Mother's Day events
- Freedom ride
- Children's day
- Community pamper day
- AFPP open day
- AFPP Christmas party,
- Community Christmas party
- Flood relief assistance
- Saltwater Freshwater Festival
- NAIDOC
- MAPS celebration
- Ready Solid Quit
- Yuwa Nyinda Dream Academy
- International Women's Day
- Women's health week

## STAFF HIGHLIGHTS

- All staff completed circle of security training.
- Staff attended face to face get togethers and the biannual AFPP conference.
- Some members of our team enrolled in their certificate III in Aboriginal and Torres Strait Islander Health Care.
- Some members of our team completed their Mental Health First Aid course and are now accredited.

## QUOTES OR STORIES

*“One of our mum’s heart’s desires at the beginning of the program was to acquire her own housing and to get her driver’s licence before her baby turned 12 months old.*

*With much encouragement and self-determination, mum managed to acquire her own accommodation by the time baby was 9 months old.*

*Having achieved one of her hearts desires she concentrated on acquiring her driver’s licence; Again, with encouragement and determination she managed to acquire her driver licence by the time her baby was 13 months old.*

*Her new heart’s desire is to obtain employment by the time her baby turns 2. She has already begun working towards new qualifications to make sure she has better opportunities for a future career.*

*As her nurse home visitor, I often convey to her she can achieve anything she puts her mind to by reminding her of what she has already accomplished. I remind her that these achievements were accomplished due to her efforts and self-determination.”*

Written by NHV Rosas



# CHILD AND FAMILY HEALTH

## STAFF DETAILS

**Kim Wright** (CNC, RN, CFHN, Paediatric Nurse)

**Tracey Houston** (RN, CFHN)

**Kylie Shearer** (RN, CFHN, Paediatric Nurse)

**Bronwyn Smith** (AHW)

**Dorothy Cohen** (AHW)



## OVERVIEW OF SERVICE/PROGRAM

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

## KEY ACHIEVEMENTS

- Commenced the new “*Connected Beginnings*” program at Durri – Durri implements the health partner component of the Broader Connected Beginnings Program in partnership with Dalaigur and Scribbly Gum Preschool. The Program commenced in May 2025 at Durri and 48 children have had their Connected Beginnings school ready ATSI Health Assessments since commencement.
- Worked in collaboration with Durri’s generalist AHWs to provide a comprehensive health assessment and immunisation program for 67 Clontarf boys aged 12years to 18 years.
- Provided 896 vaccinations for clients within the ages of 6 months to 14 years old and the Durri Flu Vaccination Campaign.

## STATISTICS AND OUTCOMES

- Number of clients served: 2,596.
- Provided 634 health assessments for Babies, Children and Teens 0-14 years age.
- Provided 458 Blue Book checks for Babies 6wks to 4 years.
- Provided 896 vaccinations for clients within the ages of 6 months to 14 years old and the Durri Flu Vaccination Campaign.

## CHALLENGES AND LEARNINGS

- **What challenges did your team face?**

Increased workload to enable comprehensive service capacity for the families and children to access our services this is a impact of the increased community utilisation of the service over the past 12 months.

- **What did you learn or improve upon?**

The team is now one of the only AMS's CFHT to utilise the ASQ-Trak culturally appropriate screening tools for blue book checks. The entire CFHT are now certified practitioners.

## COMMUNITY ENGAGEMENT

- Clontarf Health Assessments Kempsey and Melville High School
- NAIDOC
- Aboriginal and Torres Strait Islanders Children's day
- Nurturing Connections – Partnership
- Building stronger foundations – Partnership
- Extensive community engagement evidenced by the ever increasing number of clients utilising the service.

## STAFF HIGHLIGHTS

The team is now one of the only AMS's CFHT to utilise the ASQ-Trak culturally appropriate screening tools for blue book checks. The entire CFHT are now certified practitioners.

## QUOTES OR STORIES

*"My Children have seen Tracey and Aunty Bron for years, they are friendly and professional, if you don't understand they explain it better and they are great with kids and make it easier to bring in the kids as they understand."*





# ELDER CARE SUPPORT

## STAFF DETAILS

**Marcia Holten** - Elder Care Coordinator

**Deborah Wright** - Elder Care Connector

## OVERVIEW OF PROGRAM

The program is initiative funded by National Aboriginal Community Controlled Health Organisation (NACCHO). The purpose of our Elder Care Service is to provide, connect and advocate for our Elders in our communities, to help them transition and understand how their home care package can benefit them while still living independently. We also provide ongoing culturally support ensure they feel comfortable in a trusting environment this also help reduce barriers through their age care journey. We also link in with other service/partnerships to help connect and achieve positive outcomes for the individual and their families in a respectful cultural manner.

The Elder Care Program footprint covers north to Nambucca Heads, Bowraville, Macksville and around the local community in Kempsey.

## KEY ACHIEVEMENTS

- Attended the Elder Care Support Yarning Circle Conference – 28th April to 2nd May 2025 in Adelaide, South Australia, to Network and engage with other Elder Care Providers from all over Australia. The conference provided our team the opportunity to represent both Durri and our community while connecting and engaging with other Elder Care Programs from all over Australia. We will be looking forward to establishing new partnership and connection with fellow Elders Care Program and hope to represent our communities at this conference annually.
- Durri Elder Care Hosted the NAIDOC Elder Luncheon at the Elders Complex in partnership with both Annecto & Booroogen Djungan LTD on the 8th of July 2025. The aim and purpose of the event was to celebrate our elders and recognise their contribution to our community. This event was attended by approximately 100 elders from the Kempsey community which included the Bellbrook and South West Rocks Communities.
- My 12-month anniversary as the Elder Care Coordinator will be on the 25th of September 2025 and I am look forward to continuing this program alongside my Elder Connector Worker Deborah Wright.

## STATISTICS AND OUTCOMES

**Number of clients served:** Elder Care have supported and referred Elders to other providers. Over 50 In the community have been enlisted since 2024 – 2025 and have successfully connected and referred to other Aged Care Providers.

**Key performance indicators or outcomes achieved:** 85% of clients reported to be able to maintain to live at home with the support from their Commonwealth Home Support Program (HSP) & Home Care Support Package (HCSP), help them to maintain independent and to continue with everyday life and socialisation in the community.

## CHALLENGES AND LEARNINGS

### What challenges did your team face?

Adopting and Completed the My Aged Care Online Training module was challenging at first training module was completed as an individual activity.

Acknowledging the new changes coming on the 1st of November 2025, for both HCP & CHSP clients and how that will impact on their aged care journey.

## What did you learn or improve upon?

Understanding and Acknowledge the New Changes coming in November for our Elders and the need for further education and collaboration to help them to understand, the changes how it will affect their packages and quality of life.

Improving pathways and partnerships with other key stakeholders who also work and collaborate in the aged care sector.

## COMMUNITY ENGAGEMENT

- Babaang (Grandfather) & Baluwa (Grandmother) Elder Group running every Tuesday fortnight till 7th October 2025, with different activities, each fortnight. We are hoping this will be an ongoing group to support all our elders with isolation and aloneness.
- Developing our Elders program which are held every fortnight to provide a safe cultural creative space, we implemented various activities for our elders to utilise and create and provide lunch and morning tea. Yarning Group held in Bellbrook every Wednesday fortnight till further notice. Support the Elders group with isolation in the Bellbrook community, empowering and encouraging Elders to participate in everyday life skills, partnership with Many Rivers Family Violence Prevention Legal Service.
- Attended the East Coast Indigenous over 50's master golf tournament series for men & women to promote our Elders Care Program.
- Site visit coming up in September 2025 to Bullinah Aboriginal Health Service & Orange Aboriginal Medical Service to gain more experience and share knowledge based on our own self efficient program.

## STAFF HIGHLIGHTS

- Ongoing staff development and training
- Certificate 3 in Aboriginal Health
- Diploma in counselling 2 block release
- First Aid & Fire Awareness and Extinguisher Certificate

## QUOTES OR STORIES

- Client mentions that they are very happy to have support in their home and it makes them more independent and secure.
- "Awesome program and should of have been included through their home care package while at other service previously." Client.
- "My home is always nice and clean with the support of my Home Care Package and support workers". Client



Marcia Holten & Deborah Wright - Elders Care Coordinators

# HEARING AND EYE HEALTH

## STAFF DETAILS

**Theresa Silva** - Hearing and Eye Health

## OVERVIEW OF SERVICE/PROGRAM

To provide hearing and eye health care to our Aboriginal and Torres Strait islander patients within the Durri ACMS Footprint. This is a multifaceted process that includes coordinating clinics with multiple visiting specialists. The eye and ear health program are part of a multidisciplinary care delivery service that aims at early intervention and improves the quality of life to our patients. Our program also helps our patients to complete and lodge surgery forms,



## KEY ACHIEVEMENTS

- **ENT clinic** has had a good outcome with numbers up over 50% in attendance from 2023-2024
- Around 15+ surgery forms completed and patients on a waitlist
- **Hearing clinic** numbers are up from last financial year
- **Eye clinic** numbers up from last financial year

## STATISTICS AND OUTCOMES

Number of clients served:

- **Eye clinic Durri ACMS:** 180 patients have been seen
- **Eye clinic Darrimba Maarra health clinic:** 84 patients have been seen
- **Hearing clinic Durri ACMS:** 81 patients have been seen 2 clinics was cancelled due to Audiologist being unwell and due to floods in area
- **ENT clinic Durri ACMS:** 37 patients have been seen with about 15+ patients on waitlist for surgery at port Macquarie and Maitland hospitals

## KEY PERFORMANCE INDICATORS OR OUTCOMES ACHIEVED:

ENT clinic has had a good outcome with numbers up over 50% in attendance from 2023-2024 financial year

- Around 15+ surgery forms completed and patients on a waitlist
- There has been around 10 plus surgeries completed across port Macquarie and Maitland hospitals

## CHALLENGES AND LEARNINGS

I found that there has been a few fail to attend within the hearing and eye clinic's however reached out to the patients and said that it is important to get these tests done and that we only have them visit every month and it seems to be doing a lot better now.

## COMMUNITY ENGAGEMENT

- Naidoc at Melville high school, Aldavilla primary school, south Kempsey primary school
- Durri play group PCYC
- Signed a new partnership agreement between hearing Australia and Durri ACMS

## STAFF HIGHLIGHTS

- Employee of the month for July 2025
- Completed Certificate III in Aboriginal and or Torres Strait Islander Primary Health Care.

# SOCIAL AND EMOTIONAL WELLBEING

## STAFF DETAILS

**Simone Smith** - Team leader  
**Tenneale Clarke** - Social Worker  
**Peter Bodell** - Psychologist  
**David Frederick** - Youth AOD  
**Richard Davis** - Youth AOD  
**Bert Gray** - Youth AOD  
**Allan Hoskins** - AOD  
**Victoria Tremble** - Mental health  
**David Cutmore** - Mental Health  
**Victor Dixon** - Wellbeing Support Worker  
**Kristy Caldwell** - Wellbeing Support Worker  
**Rena Kennedy** - Wellbeing Support Worker (current)  
**Colean Sines** - DFV Support Worker  
**Walter Villaflor** - DFV Support Worker



## OVERVIEW OF SERVICE/PROGRAM

Our team is a multidisciplinary unit dedicated to supporting the social and emotional wellbeing of Aboriginal individuals, families, and communities. We deliver a wide range of culturally responsive programs and services that address key areas impacting community wellbeing.

### Our team includes:

- **Alcohol and Other Drug (AOD) Support Workers** – providing tailored support to both youth and adults experiencing substance use challenges.
- **Wellbeing Workers** – delivering individual and group-based wellbeing programs aimed at promoting mental, emotional, and cultural resilience.
- **Suicide Prevention/Wellbeing Workers** – offering early intervention and crisis support to Aboriginal youth at risk of suicide, including one-on-one support and community engagement.
- **Social Worker** – providing clinical support, counselling, and therapeutic group work to address complex social and emotional needs.
- **Domestic and Family Violence Support Worker** – supporting Aboriginal women experiencing domestic or family violence, through both individual advocacy and culturally safe group-based healing programs.

Together, our team works collaboratively to empower clients, reduce stigma, promote healing, and strengthen cultural identity and connection across the community. Our approach is grounded in cultural safety, trauma-informed care, and community-led practice.

## KEY ACHIEVEMENTS

### Domestic and Family Violence

- One of our standout achievements in the domestic and family violence space has been the professional development and community networking efforts of our dedicated worker. She successfully attended a Skills-Based Training Workshop focused on building capacity to respond to co-occurring mental health conditions in alcohol and other drug treatment settings. This training has significantly enhanced her ability to provide trauma-informed, integrated support tailored to the complex needs of those experiencing DFV.
- In addition to upskilling, she has made substantial progress in building and strengthening her professional network, creating vital partnerships with local service providers and community groups. This expanded network has bolstered community ties and enhanced collaborative responses to domestic and family violence, supported strongly by her role within our team.
- Another key highlight is her leadership in developing and structuring a healing program specifically designed for women affected by family and domestic violence. Recognizing the high incidence and impact of violence in our local community, this program was co-designed through multiple women's gatherings and community consultations. The healing program is scheduled to launch in mid-September 2025, aiming to provide culturally safe, empowering spaces for women to recover and rebuild.

### Alcohol and other Drugs

- **Aboriginal Men's Cultural Healing Camp – Men's Health Week, June 2025**  
A major highlight in the Men's Alcohol and Other Drug (AOD) space this year was the successful delivery of an Aboriginal Men's Cultural Healing Camp, held in June during Men's Health Week. Hosted on Dunghutti Country, the camp brought together Aboriginal men engaged with Durri ACMS for a powerful and culturally grounded healing experience. The camp provided a safe space for men to connect to culture, share stories, strengthen identity, and engage in meaningful discussions around health, healing, and recovery. Facilitated by culturally experienced staff and supported through our AOD program, the camp fostered brotherhood, resilience, and a strong sense of connection to Country. Feedback from participants was overwhelmingly positive, with many expressing the value of being supported in a space that honoured their cultural identity while addressing challenges such as substance use, mental health, and social pressures. This camp stands as a key achievement in our ongoing commitment to culturally safe, community-led healing for Aboriginal men.
- **Establishment of Healing Yarns the Dunghutti Way – Men's AOD Support Group**  
Another significant achievement in our Men's Alcohol and Other Drug (AOD) support space has been the successful establishment of the Healing Yarns the Dunghutti Way group. This culturally grounded support group runs weekly every Thursday and offers a safe, welcoming space for Aboriginal men who are currently navigating AOD challenges, as well as those who have walked that path and come out the other side. The group was developed in direct response to the need for a culturally safe, non-judgemental setting where men can yarn openly, share experiences, and support one another through healing and recovery. The name Healing Yarns the Dunghutti Way was intentionally chosen to reduce stigma and ensure cultural appropriateness, making it more accessible for our community members. Since its launch, the group has been running consistently and is proving to be a much-needed and valued part of our local AOD and wellbeing support offerings for Aboriginal men.

- **Ongoing Delivery of Culturally Safe Addiction Clinic**

A vital ongoing service within our Alcohol and Other Drugs (AOD) space is the Addiction Clinic was delivered in partnership between our AOD Addiction Specialist and our Aboriginal Male Worker. This clinic provides much-needed support and treatment options for Aboriginal community members facing addiction-related challenges, particularly those who experience barriers accessing mainstream services. By embedding this clinic within Durri ACMS, we ensure that community members receive culturally safe, respectful, and accessible care that recognises the unique experiences and needs of Aboriginal people. The clinic offers a non-judgemental, wrap-around model of support that goes beyond clinical treatment, incorporating cultural connection, trust, and a holistic approach to recovery. This service continues to be a critical pathway for those seeking help, and plays a key role in our broader commitment to addressing addiction in a culturally responsive and community-led way.

## **Suicide Prevention**

### **Promoting Mental Health Awareness and Cultural Healing – May 2025**

A major achievement for the SEWB team this year was our leadership in promoting mental health awareness while embedding cultural healing practices within our workplace and community.

As part of Mental Health Month, we hosted a dedicated staff event that brought our team and broader workforce together to reflect, connect, and yarn about mental health and wellbeing. The day included:

- A smoking ceremony to acknowledge Sorry Day and Reconciliation Week,
- Guest speakers who shared insights on mental health and cultural resilience, and
- Yarning circles to foster open conversations about supporting one another in the workplace.

This event created a culturally safe space for staff to reflect on how we support mental health collectively, while also recognising the importance of reconciliation and honouring those who came before us.

Importantly, this initiative not only raised awareness but also strengthened internal team support, encouraged open dialogue around mental health, and reinforced the importance of working together through trauma, grief, and healing. It stands as a key example of how we're working to normalise mental health conversations and embed culturally grounded approaches to wellbeing across our organisation.

### **Engagement with Schools via 715 Health Assessments**

We partnered with local schools to deliver 715 health checks, which provided an important opportunity to gauge the level of understanding and literacy around suicide among students. This day of engagement allowed us to check in on each young person's wellbeing and suicide risk, fostering open yarns and creating safe spaces for mental health conversations.

### **Supporting Youth Programs for Girls and Boys**

Our ongoing commitment to suicide prevention includes building strong relationships and rapport with young Aboriginal kids in group settings. Through community football nights and weekly youth girls programs, we have increased awareness, provided education around suicide prevention, and informed young people about the supports available to them in this area.

## STATISTICS AND OUTCOMES

Number of clients served:

- SEWB – 250
- AOD – 60

## KEY PERFORMANCE INDICATORS OR OUTCOMES ACHIEVED

Over the past year, the SEWB program supported 250 clients, with 85% reporting improved wellbeing as a result of their engagement with our services. Among clients accessing Alcohol and Other Drug (AOD) support, 30% reported a reduction in substance use. These outcomes highlight the positive impact of our holistic, culturally responsive approach in supporting community wellbeing and recovery.

## CHALLENGES AND LEARNINGS

### Alcohol and other Drugs

- **What challenges did your team face?**

One of the ongoing challenges our team has faced is consistent engagement with community members experiencing alcohol and other drug (AOD) issues. While we have established strong programs and culturally safe spaces, motivation among some clients to attend clinics or support groups can fluctuate. This can make it difficult to maintain steady attendance and continuity of care. Factors such as stigma, shame, past negative experiences with services or personal readiness for change all contribute to this challenge.

- **What did you learn or improve upon?**

In response, our team has recognised the need to increase education and awareness within the community about the services we offer and the importance of accessing culturally safe AOD support. We've also begun looking at ways to engage directly with community members who are facing these challenges—through conversations, informal yarning, and surveys—to better understand the barriers and motivators that impact their willingness to access support. This feedback will help us improve how we promote and deliver services, ensuring they remain relevant, welcoming, and grounded in community needs.

### Domestic and Family Violence:

- **What challenges did your team face?**

Working in the domestic and family violence (DFV) space has been particularly challenging due to the stigma and shame within our community, which makes it very hard for women to openly seek help or access support services. This cultural barrier creates a significant obstacle in building trust and engagement with those who need assistance. Additionally, the DFV worker role was only filled recently earlier this year, which has posed challenges in building awareness, establishing a presence, and developing relevant programs from the ground up. Given the sensitive nature of domestic and family violence, developing appropriate and effective programs requires time, careful planning, and cultural safety considerations.

- **What did you learn or improve upon?**

Attending targeted training, such as the skills-based workshop on responding to co-occurring mental health conditions and substance use, has been invaluable in enhancing our ability to navigate the complexities of this space. These learning opportunities have helped improve confidence, deepen understanding, and build practical skills to better support women experiencing DFV. Through this journey, we've learned that patience, ongoing professional development, and building strong community connections are essential. Developing culturally safe and trauma-informed programs requires continuous reflection and adaptation, which ultimately strengthens our capacity to meet the community's needs and fulfill the role's expectations.

## Suicide Prevention:

- **What challenges did your team face?**

One of the biggest challenges our team faced in suicide prevention is the persistent stigma surrounding suicide within our community. This stigma often makes it difficult for individuals to openly discuss their feelings or seek help, which limits early intervention and support. Additionally, there is still a lack of education and literacy around suicide prevention, making it harder to identify warning signs or have informed conversations. Despite our efforts, the community continues to experience tragic losses to suicide, which can be emotionally overwhelming and difficult to navigate for both the team and community members.

- **What did you learn or improve upon?**

Through ongoing mental health training, our team has improved its capacity to handle the complexities of suicide prevention with greater confidence and skill. These trainings have equipped us to better support young people and families, and to foster safer, more open conversations around suicide. We have also learned the importance of internal support and self-care, with assistance from our in-house psychologist, Pete, as well as our program manager and team leaders. Their guidance has been instrumental in helping us manage the emotional toll, maintain resilience, and ensure we continue to provide effective support to the community while looking after our own wellbeing.

## COMMUNITY ENGAGEMENT

### Social and Emotional Wellbeing (SEWB) Team

Over the 12-month period from July 2024 to June 2025, the SEWB team has demonstrated a strong, culturally grounded commitment to improving the social, emotional, and spiritual wellbeing of our community. Through events, partnerships, outreach, and targeted programs, our team has continued to foster healing, resilience, and connection.

## KEY COMMUNITY ENGAGEMENT ACTIVITIES

### 1. Cultural & Community Events

- **NAIDOC Week**

Actively participated in and supported NAIDOC Week celebrations, promoting cultural pride and connection through yarning circles, traditional activities, and community events.

- **International Women's Day & Mother's Day Celebrations**

Hosted culturally safe and supportive gatherings to honour and uplift women and mothers within the community. These events provided opportunities for connection, recognition, and access to wellbeing services.

- **Men's Cultural Healing Camp**

Facilitated a culturally safe healing space for Aboriginal and Torres Strait Islander men to engage in storytelling, cultural practices, and holistic healing. The camp supported emotional resilience, identity strengthening, and peer support.

## 2. Health Promotion & Preventative Outreach

- **World No Tobacco Day (in partnership with Ready Quit Solid)**

Delivered a culturally tailored health promotion campaign focused on tobacco harm reduction. This included community education, smoking cessation support, and collaboration with local services to provide ongoing support.

- **715 Health Checks & Immunisations**

Delivered 715s and immunisations in collaboration with local high schools, NASCA, and Clontarf Foundation. These outreach efforts targeted Aboriginal youth to improve access to preventative healthcare and promote long-term wellbeing.

- **Flood Relief Support to Community**

In response to flooding events, the SEWB team provided on-the-ground emotional, cultural, and logistical support, ensuring affected community members had access to resources, mental health care, and culturally appropriate referrals.

## 3. Youth & Wellbeing Programs

- **Staying Well, Keeping Well – Youth Girls Program**

Established and launched this program to empower young Aboriginal girls through self-development, cultural connection, and emotional wellbeing education. The program has created safe spaces for youth to explore identity, relationships, and mental health.

## SUMMARY

From **July 2024 to June 2025**, the SEWB team has played a vital role in strengthening community connections and supporting social and emotional wellbeing through:

- Consistent engagement in **culturally safe, community-led events**
- Delivery of **targeted health interventions and youth programs**
- Strong partnerships with local organisations and schools
- Rapid response to **community crises**, such as flood relief

These initiatives reflect our ongoing dedication to holistic, culturally informed care that empowers our community to stay strong, stay connected, and stay well.

## STAFF HIGHLIGHTS

**Colean – DFV:** Completed training in SAMS, Skills-Based Training Workshop to respond to co-occurring mental health conditions in alcohol and other drug treatment settings, Tidda Time Facilitators Course

**Victoria – Wellbeing:** Certificate in Alcohol and Other Drugs, Mental Health, Aboriginal Health Practitioner

**Allan – AOD:** Men's cultural camp June 2025

**Victor – Suicide prevention:** Youth Mental Health First Aid



# TARGETED EARLY INTERVENTION

## STAFF DETAILS

**Tahnia Brown** - TEI (Targeted Early Intervention)



## OVERVIEW OF SERVICE/PROGRAM

As a Targeted Intervention Worker (TEI), my role is to support Aboriginal children, and families through culturally safe and holistic services. The focus is on strengthening family wellbeing, preventing challenges, and encourage strong cultural identity and resilience. The purpose of the program is to:

- Provide early support to families to reduce risks and improve long term outcomes.
- Deliver programs and interventions that are culturally appropriate, community driven, and strengths based.
- Support connections to health, education, and social services to address barriers impacting Aboriginal families.
- Promote healing and empowerment.

This role plays a vital part in ensuring Aboriginal children and families in Kempsey and surroundings areas have the right support.

## KEY ACHIEVEMENTS

- Established the Jumping Dalai's Playgroup
- Increased referrals and engagement
- Facilitated the Durri Movie Day Kids during school holidays

## STATISTICS AND OUTCOMES

- Number of clients served: 7
- Key performance indicators or outcomes achieved:

80% of clients have started to engage on a week-to-week basis and enjoying the playgroup. Other than the 20% that was engaging at the start of my commencement of my position as the TEI worker. Still working towards the goal of 100% engagement.

## CHALLENGES AND LEARNINGS

- **What challenges did your team face?**

A challenge I faced within my program was getting engagement from some of the families I'm currently working with. I addressed this by approaching the families on a weekly basis with check-ins and invitations to the playgroup, as well as listening to the struggles of what the families were facing and offered support and guidance to whatever avenue they needed support from e.g., Durri SEWB team or Kempsey Neighbourhood Centre.

- **What did you learn or improve upon?**

I learnt and improved on networking outside of our organisation and building relationships with other organisations and their programs.

## COMMUNITY ENGAGEMENT

### Events, partnerships, or outreach activities:

- NAIDOC 2025
- School NAIDOC Stall Activities
- NAIDOC Opening March 2025
- Children National ASTI Day
- PCYC Funday
- Freedom rides 2025
- Kids Movie Day school holidays x 4 Sessions
- Dalaigur 60th Anniversary Family Fun Day
- Jumping Dalais Playgroup (every Thursday)

### STAFF HIGHLIGHTS

The Jumping Dalais Playgroup has been a big success not only to my clients but other community mothers & dads, we discuss health and other issues like wellbeing every fortnight. The mums and bubs love gathering each week, chatting, having morning tea and creating friendships sharing laughs and stories.

### QUOTES OR STORIES

*"I really appreciate all you've done for me and my boys, it means a lot to know people are supportive and care. Thank you for everything sis".*

Program participant

# CORPORATE SERVICES



# EXECUTIVE OFFICER CORPORATE SERVICES

## STAFF DETAILS

**Kayla Bennett** - Executive Officer Corporate Services

## OVERVIEW OF SERVICE/PROGRAM

The primary purpose of the role is to provide leadership and direction for Corporate Services functions to ensure the best contemporary standards are in place for business services, and financial management, including audit, risk, probity and reporting activities, and for the development, implementation and enhancement of communication and engagement, human and IT strategies across the organisation.

The position supports the CEO in achieving the key accountabilities of the role to drive organisational efficiency through developing, implementing and continuously improving business systems and processes and examining strategic options to ensure that corporate services functions effectively meet the needs of a growing organisation. It drives a wide range of strategic and critical initiatives to improve delivery of organisational and workforce practices and performance, ensuring alignment with overall vision and objectives.

## KEY ACHIEVEMENTS

- Led the design and development of a modern, user-centric website that enhanced the organisation's digital presence, improved user engagement, and streamlined access to key services.
- Successfully led the update of the organisation's motor vehicle fleet, improving operational efficiency, safety, and cost-effectiveness.
- Successfully implemented branded vehicle wraps across the organisation's fleet, enhancing visibility, professionalism, and community recognition.

## STATISTICS AND OUTCOMES

Updating the organisation's website resulted in a range of positive outcomes, including a significantly improved user experience through enhanced navigation, faster load times, and mobile responsiveness. Engagement increased as users spent more time on the site and interacted more frequently with key services and resources. Operational efficiency was boosted by reducing support queries and enabling easier content management. The refreshed design also strengthened the organisation's professional image and credibility. Additionally, the update ensured compliance with accessibility standards and improved data tracking capabilities, providing valuable insights to inform future decisions and service improvements.

Updating the motor vehicle fleet delivered several key outcomes, including improved operational efficiency, reduced maintenance and fuel costs, and enhanced safety for staff. By replacing older vehicles with newer, fit-for-purpose models, the organisation experienced lower servicing expenses. Staff satisfaction increased due to improved reliability and comfort, and the fleet now better aligns with organisational needs and asset management strategies.

The implementation of branded vehicle wraps resulted in increased organisational visibility and strengthened brand recognition within the community. The consistent and professional presentation of the fleet enhanced public awareness of services and contributed to a more unified and credible image. Staff reported a greater sense of pride in representing the organisation, and the wraps served as a mobile communication tool, promoting the organisation wherever vehicles were in use.



## CHALLENGES AND LEARNINGS

- **What challenges did your team face?**

The 2024–2025 financial year has been a period of both resilience and renewal for Durri Aboriginal Corporation Medical Service. As Executive Officer Corporate Services, I am proud to reflect on the progress we have made in strengthening our internal systems, supporting our workforce, and responding to the evolving needs of our community.

Despite the ongoing challenges posed by natural disasters and increasing demand for services, our commitment to cultural safety, community engagement, and operational excellence has remained persistent.

This year, we continued to recover from the compounding impacts of the October 2023 bushfires and the severe flooding and cyclone damage in the Nambucca Valley in May 2025. These events have placed significant pressure on our infrastructure, staff, and service delivery.

### In response, we:

- Strengthened our disaster recovery and business continuity planning.
- Advocated for and secured emergency funding to support affected communities.
- Prioritised staff wellbeing and flexible work arrangements during crisis periods.

## COMMUNITY ENGAGEMENT

Community engagement initiatives led to stronger relationships between the organisation and local stakeholders, increased public trust, and more inclusive decision-making. Through targeted communication, events, and consultation processes, the organisation gained valuable insights into community needs and priorities. This resulted in more responsive services, higher participation in programs, and a greater sense of shared ownership and collaboration across the region.

## STAFF HIGHLIGHTS

Over the past year, the Corporate Services team has focused on:

**Governance and Compliance:** Strengthening internal policies and risk management frameworks.

**Digital Transformation:** Supporting the successful launch of our new website [www.durri.org.au](http://www.durri.org.au), improving community access to information and services.

**Financial Management:** Ensuring transparency and accountability in budgeting, procurement, and reporting.

**Workforce Development:** Investing in training, recruitment, and retention strategies to build a culturally safe and skilled workforce.

## COMMUNITY AND CULTURAL ENGAGEMENT

We have continued to embed cultural safety across all areas of our organisation.

This includes:

- Supporting initiatives to address lateral violence and promote healing and connection.
- Partnering with local Elders and community leaders to guide service delivery.
- Hosting community events and health promotion activities that reflect our values and traditions.

# HUMAN RESOURCES

## STAFF DETAILS

**Stuart Cohen** - Human Resources Manager

**Mary Edwards** - Human Resources Officer

**Kathleen Everson** - Human Resources Officer

**Indiana Teerman** - Medicare Officer



## OVERVIEW OF SERVICE/PROGRAM

Durri Aboriginal Corporation Medical Service (Durri ACMS) continues to deliver culturally safe, community-led healthcare and support services across the Macleay Valley region. As a key provider of Aboriginal health services, Durri ACMS remains committed to improving health outcomes through holistic, person-centred care that respects the traditions, values, and lived experiences of Aboriginal and Torres Strait Islander peoples.

The Human Resources function plays a critical role in supporting the organisation's strategic goals by ensuring the workforce is skilled, engaged, and aligned with Durri's values. Over the past year, HR has focused on strengthening workforce capability, enhancing recruitment and retention strategies, and fostering a culture of inclusion and wellbeing. These efforts have been instrumental in enabling service delivery across clinical, community, and outreach programs.

Durri ACMS continues to grow in response to community needs with new initiatives and partnerships expanding the scope of services. The HR team has supported this growth by adapting workforce planning, investing in professional development, and promoting leadership pathways for Aboriginal staff.

## KEY ACHIEVEMENTS

- **Launch of AMSED Online Learning Platform**

Durri ACMS successfully implemented the Aboriginal Medical Services Education & Development (AMSED) online learning platform, providing staff with accessible, culturally relevant training opportunities. This initiative supports continuous professional development and strengthens workforce capability across all service areas.

- **Recruitment and Workforce Expansion**

In response to increasing community needs and service demand, the HR team led a focused recruitment drive that resulted in a notable expansion of the workforce. As of June 2025, Durri ACMS employs 102 staff members, including 59 Aboriginal employees — maintaining a strong Aboriginal representation of 58%. New positions were successfully filled across clinical, administrative, and outreach areas, with a continued emphasis on attracting Aboriginal candidates and strengthening local workforce capacity.

- **Staff Development and Cultural Safety Initiatives**

A series of workshops and training sessions were delivered to promote cultural safety, address lateral violence, and reinforce the organisation's Code of Conduct. These initiatives have contributed to a more respectful, inclusive, and supportive workplace culture, aligned with Durri ACMS's values and commitment to Aboriginal health leadership.

## STATISTICS AND OUTCOMES

Total Workforce: 102 employees

Aboriginal Staff: 59 employees (58% representation)

Recruitment Growth: 20 new hires

Training Participation: 85%

University of Sydney: 8 Dental Therapists

Charles Sturt University: 4 Trainee General Practitioners

3 GP Registrars

Brien Holden Foundation: 2 Practitioners

Newcastle University: 2 Speech Pathology Students

## CHALLENGES AND LEARNINGS

Recruitment and retention in regional areas remain a challenge, particularly for clinical roles. Increased service demand has placed pressure on existing staff, highlighting the need for continued investment in workforce planning and wellbeing.

## FUTURE DIRECTIONS

- Strengthen the Aboriginal Employment Strategy including targeted outreach, mentoring, and career pathway development for local youth and community members.
- Expand the Workforce Development Program with the introduction of leadership pathways, succession planning, and enhanced support for emerging leaders.
- Enhance Staff Engagement through improved internal communications, recognition programs, and feedback loops.
- Improve HR Systems and Processes to ensure streamlined onboarding, compliance tracking, and performance management.

HR will play a key role in workforce planning for new facilities in Kempsey and Nambucca Heads, ensuring staffing aligns with service expansion.

## STAFF HIGHLIGHTS

### Preferred Provider for Workforce and Training Partnerships

Durri ACMS has continued to strengthen its reputation as a preferred service provider among recruitment agencies and training institutions. Our consistent cohort of locum doctors reflects the organisation's strong clinical governance, supportive work environment, and commitment to culturally safe practice. Many locums return regularly, citing Durri ACMS as a trusted and rewarding placement.

We are also recognised as a preferred host organisation for training Dental Therapists, Speech Pathologists, and trainee General Practitioners. Our collaborative approach to supervision, exposure to diverse clinical experiences, and emphasis on Aboriginal health make Durri ACMS an ideal setting for emerging health professionals to develop their skills.

Retention across key roles remains strong, supported by targeted onboarding, professional development opportunities, and a workplace culture that values respect, inclusion, and community connection.

# CONTINUOUS QUALITY IMPROVEMENT

## STAFF DETAILS

**Renee Gardiner** - Quality and Compliance Officer

## OVERVIEW OF SERVICE/PROGRAM

The Quality & Compliance role works collaboratively with senior management, clinical and non-clinical staff to:

- Monitor compliance with health, safety, and accreditation standards.
- Lead internal audits, risk assessments, and incident reviews.
- Coordinate RACGP Accreditation and maintain readiness for external assessments.
- Support policy and procedure development and reviews.
- Implement tools and systems to measure service quality and patient experience.
- Drive a culture where staff are engaged in quality activities and informed about best practice.



## KEY ACHIEVEMENTS

### Implementation of 12 Internal Audits

Twelve internal audits were designed and delivered across all service areas (clinical, administrative, governance, and cultural safety). These audits ensured compliance with relevant health, safety, and accreditation standards.

### Policy and Procedure Review

A structured schedule for policy and procedure review was maintained, ensuring documents remain current, culturally appropriate, and aligned with legislative and accreditation standards.

### Adoption of Tools to Support Quality & Accreditation

CFEP Practice Accreditation and Improvement Survey (PAIS): Implemented to collect patient feedback and support quality initiatives, providing insights into patient experience and areas for improvement.

LogicQMs Register: Established as a centralised platform for managing external feedback, complaints, incident, issues, and information requests. This system promotes accountability, transparency, and timely resolution.

## STATISTICS AND OUTCOMES

- Improved accuracy and completeness of patient records, including allergies, emergency contacts, and social/family histories.
- Enhanced infection control and Work Health & Safety compliance through systematic observation, audits and reporting.
- Greater staff awareness of RACGP requirements and organisational policies.
- Commercial CFEP tool: Used to benchmark services against RACGP standards, informing targeted improvements and ensuring alignment with accreditation requirements.
- CQI activities have been embedded into everyday operations through:
  - Regular staff education on quality standards and patient safety.
  - Monthly reporting of audit outcomes and action plans.
  - Ongoing monitoring of indicators such as infection control, patient feedback, and documentation quality.

## RACGP ACCREDITATION

Durri remains fully accredited under the RACGP Standards for General Practice (5th edition). Preparations for upcoming onsite assessments include:

- Review of self-assessment tools and evidence register.
- Sharing accreditation resources (checklists, example questions) with all staff.
- Incorporating findings from CFEP surveys and internal audits into quality improvement plans.

## CHALLENGES AND LEARNINGS

Implementing LogicQMS and building the system from the ground up presents several organisational challenges, particularly when learning how to navigate the various registers and configure them to reflect the organisation's structure. Developing a framework that aligns policies, procedures, and compliance requirements with the platform can be time-consuming and requires a clear understanding of both operational workflows and the software's capabilities.

Addressing these issues will be essential for strengthening a culture of quality, improving staff engagement, and ensuring the effective use of systems that support compliance and patient safety.

## PRIORITIES FOR THE COMING YEAR

- Expand internal audit scope to include environmental sustainability and cultural safety measures.
- Strengthen data quality in Communicare to support clinical decision-making and reporting by regular audits.
- Enhance the visibility of quality outcomes through staff newsletters and team meetings.
- Continue to refine feedback management processes and promote learning from complaints, incidents and adverse events.

This year has seen significant progress in strengthening Quality and Compliance systems at Durri ACMS. The successful delivery of 12 internal audits, adoption of commercial tools (CFEP & PAIS), and the launch of the LogicQMs register have positioned the organisation to sustain excellence in patient care and meet ongoing accreditation and safety standards.

Durri ACMS remains committed to a culture of learning, accountability, and continuous improvement, ensuring high-quality, culturally safe services for our community.



# MAINTENANCE

## STAFF DETAILS

Raymond Carberry - Maintenance Officer

## OVERVIEW OF SERVICE/PROGRAM

The Maintenance Officer plays a vital role in ensuring the safety, functionality, and presentation of all facilities across the organisation. This includes routine inspections, repairs, groundskeeping, and responding to urgent maintenance requests to support a safe and productive environment for staff and clients.



## KEY ACHIEVEMENTS (JULY 2024 – JUNE 2025)

- Car Parking lines and spaces allocated
- Garden improved resulting in a much more welcoming environment
- Area cemented near front entrance ramp, creating a healthy, hygienic and safe environment for patients and staff.
- Assisted in flood recovery efforts to ensure our buildings are operational and hygienic.

## STATISTICS AND OUTCOMES

Created a more welcoming environment for our staff and community.

## CHALLENGES AND LEARNINGS

- **What challenges did you face?**
  - Utilising the computer and printing
  - Working across multiple locations
- **What did you learn or improve upon?**
  - Computer skills improved and I can print and email with ease.

## COMMUNITY ENGAGEMENT

Supported setup and pack-down for community events including NAIDOC Week and Youth Wellness Expo and Men's group BBQs.

Collaborated with local tradespeople for minor works, supporting local employment.

## STAFF HIGHLIGHTS

Recognised as employee of the month for outstanding service and responsiveness.

Received excellent feedback from staff and community.

## QUOTES OR STORIES

On a personal note, I am happy to be in a position and work for an organisation where I can make a difference to my community.



# DUNGHUTTI-NGAKU ABORIGINAL ART GALLERY

## STAFF DETAILS

**Alan Guihot** - Gallery Coordinator

**Rachel Cross** - Acting Gallery Coordinator

**Christine Vonk** - Volunteer

## OVERVIEW OF SERVICE/PROGRAM

- 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.

## SNAPSHOT

**DNAAG Artists** - 24

**Artworks Sold** - 39

**Prints Sold** - 383

**Other Artist Mediums Sold** (T-shirts, mugs, weaving clothing, homewares etc) - 124

**Merchandise Sold** (clothing, personal care products, gifts etc) - 558

## ARTWORK SALES

**Total Art and Print Sales** - \$28,238.50

**Total paid to artists** - \$23,145.50

**Total Art & Print Sales 2023-2024** - Total \$54,394.50 | Paid to Artists \$44,585.00

## KEY ACHIEVEMENTS

**Exhibitions** - 5

**Visitors** - 2315

**Group Visits** - 22

**Website:**

**Online Sales** - 5

**Blogs Posted** - 14

**Subscribers** - 118

You may visit our Art Gallery at: [dnaag.com.au](http://dnaag.com.au)

## FUTURE GOALS

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.
3. Promote the gallery and our artists by using free online social media platforms such as Facebook and Instagram.  
Continue to grow our social media followers.
4. Streamline and update the procedures and sales systems within the gallery, making them more efficient and time saving.

## NEW ARTISTS

### Aaron Murray

*"I am a Dunghutti man, and I was born and bred both on the South Coast, Shellharbour, and Burnt Bridge on the Mid North Coast, New South Wales, Australia.*

*I started painting at the age of 16 at the C.D.E.P Windang and start making a name for myself around 2011 after the birth of my first born.*

*I have painted murals around the South Coast and selling many many artworks both locally and internationally.*

*As well as painting footy boots, carved, painted and wood burnt cultural artifacts and designed jerseys over the years for NAIDOC matches and celebrations*

*I also like to compose, record and produce music but that's another story."*

### Erica Blanch

As a proud Gomeri descendant, a granddaughter of a long line of strong women, and now a young mother herself, Erica believes it is part of her life path to ensure that culture remains of high importance throughout family life and to also be shared within the wider community.

Erica's connection to her culture and strong ancestral line has shown through her creative endeavours; hands on healing therapy, song and movement and visual art.

These are ways of connecting and sharing her story, where and who she comes from.

*"Culture and community is the most important part of our life, without it, you can feel lost. To me art brings me back home to my country and myself."*

### Cecily Lardner-Smith

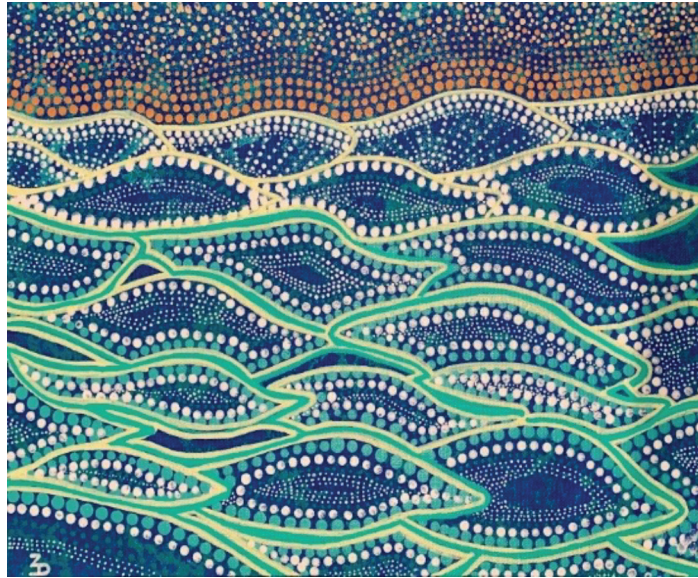
*"My name is Cecily Lardner-Smith, and I am an artist who specialises in weaving and timber work.*

*I am a Dunghutti Gumbaynggirr woman from the area around Kempsey in New South Wales.*

*Weaving keeps me grounded and connected to my country, my culture and my community.*

*I have been weaving for the last 5 years. Participating in workshops across Queensland, working with women, kids and men at schools, universities, markets and stalls."*

## FEEL GOOD STORY



Original Artwork Zalie Davison – *The Sea*

Artist Zalie Davison was contacted by a visual arts teacher from Northfield Mount Hermon, a school in western MA on the Connecticut River USA, asking permission to reference and recreate her artwork in an all-school art project during their new student orientation.

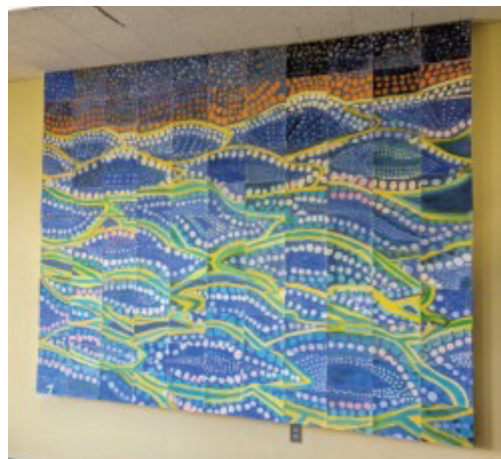
The final recreated image will be around 8 feet by 9 feet and displayed somewhere on campus.

Zalie was happy for the students to use the image of the painting “The Sea” as a reference for educational purposes.

Zalie also shared the word for sea in our local indigenous Dhanggati Language is yalaanggurr (yarlarn-gor).

The final assembled piece has been installed in the school’s library.

Below left are the students finished panels. Below right is the completed artwork mounted in the library.



Original image: *The Sea* by Zalie Davison

Recreated by students during new student orientation 2024

Prints of the original image are available for purchase through the DNAAG Dunghutti-Ngaku Aboriginal Art Gallery online.

# FINANCE

## STAFF DETAILS

**Gareth Davies** - Finance Officer

**Kerrin Schmidt** - Bookkeeper

**Natalie Pearson** - Bookkeeper

**Shanie Smith** - Administration Officer

**Mitch Johnson** - Accountant (Contractor)

## OVERVIEW OF SERVICE/PROGRAM

The Finance Team is a key corporate support unit within Durri ACMS, providing services that impact across the entire corporation.

Our core services include:

- Financial Planning & Analysis
- Cash Flow Management
- Accounting & Record Keeping
- Investment & Capital Allocation
- Budgeting & Forecasting
- Data Analysis & Decision Support
- Risk Management

We support strategic direction by providing the necessary financial information, reports and analysis to both management and the Board of directors for effective decision making.

## KEY ACHIEVEMENTS

- Review of grant agreements completed.
- Review of balance sheet items completed with auditors.
- New registers completed for all asset classes.

## FUTURE FOCUS AREAS

- The establishment of monthly review meetings between finance and managers across the corporation, focusing on budget management and analysis.
- Review the valuation and depreciation accounting policies relating to land, buildings, and motor vehicle asset classes.
- Continue work commenced on systems improvement with particular focus on purchasing and our accounting system software.



# **Durri Aboriginal Corporation Medical Service**

ABN 52 730 046 875

**ICN 27**

**Financial Report**

**For the Year Ended 30 June 2025**



**Durri Aboriginal Corporation Medical Service  
Financial Report  
For the Year Ended 30 June 2025**

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**Durri Aboriginal Corporation Medical Service  
DIRECTORS' REPORT  
For the Year Ended 30 June 2025**

Your Directors present their report on Durri Aboriginal Corporation Medical Service (the Corporation) for the financial year ended 30 June 2025.

**Directors**

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

<b>Name</b>	<b>Appointed / Resigned Date</b>
Darren Holten	Appointed 26 November 2024
Arthur Kelly	Appointed 27 November 2019
Noel Lockwood	Appointed 29 November 2022
Ivy Brown	Appointed 28 November 2023
Alison Clarke	Appointed 26 November 2024
Richard Kennedy	Appointed 26 November 2024 Resigned 7 April 2025
Patricia Ann Edwards	Appointed 25 February 2025
Sean Phillips	Appointed 25 February 2025
Beau Champion	Appointed 25 February 2025 Resigned 1 July 2025
Taylor Kelly-Scholes	Resigned 11 December 2024
Mary-Lou Buck	Resigned 26 November 2024
Rosemary Vale	Resigned 26 November 2024

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:

Connie Smith	Resigned 29 October 2024
Charleigh Kennedy	Appointed 29 October 2024, Resigned 4 May 2025
Leah Warwick	Appointed 20 May 2025

**Operating Results**

The loss of the Corporation for the financial year ended 30 June 2025 amounted to \$703,488. The operating result represented an decrease in operating performance of \$486,722 when compared to the loss of \$216,766 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 2025**

**Review of Operations**

Total revenue increased by \$1,003,390 from \$13,986,797 to \$14,990,187 for the 2025 financial year. Total expenditure increased by \$1,490,112 from \$14,203,563 in 2024 to \$15,693,675 for the 2025 financial year. Included in expenditure of the Corporation during the year ended 30 June 2025 was an amount of \$326,036 (2024: \$Nil) representing a writeback of work in progress for discontinued capital developments.

**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.

**Information on Current Directors**

**Darren Holten**

Qualifications	ORIC Corporate Governance Workshop Certificate, Certificate IV in Mentorship, Certificate II In Horticulture (Gardening & Landscaping), Aboriginal Arts & Crafts as a Business
Experience	Community-focused professional with extensive experience in indigenous support, casework, and research. Skilled in mentoring, family and elder support, property and tenancy management, and health and wellbeing programs Strong background in community engagement, advocacy and building productive relationships to improve outcomes for individuals and families.
Special Responsibilities	Chairperson

**Durri Aboriginal Corporation Medical Service**  
**DIRECTORS' REPORT**  
**For the Year Ended 30 June 2025**

**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

**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

I am a strong NGAKU woman, which is a Tribe of the Dunghutti Nation.

Experience

I am a motivated and dedicated individual with a strong background in design, fashion, and business. I have completed a Certificate III in Apparel, Fashion and Textile, a Certificate III in Business, and additional governance training through ORIC and NACCHO. I have also achieved a Certificate I in Computers, which has developed my digital and technology skills. I am passionate about creativity, teamwork, and community involvement, with a strong interest in leadership and professional growth.

My experiences in sports such as netball, rugby league, basketball, Softball, and swimming have strengthened my teamwork, communication, and time management abilities. I bring a positive attitude, reliability, and a willingness to learn to every opportunity I undertake.

**Alsion Clarke**

Qualifications

Experience

**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.

**Sean Phillips**

Qualifications

Cert IV Business Administration, Cert IV Conservation land Management

Experience

Dedicated community and corrections professional, facilitates community engagement and development initiatives. Experience in Government and organisational management. Advocating for Aboriginal Youth.

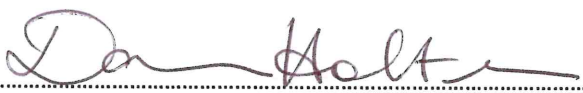
**Durri Aboriginal Corporation Medical Service  
DIRECTORS' REPORT  
For the Year Ended 30 June 2025**

**Meetings of Directors**

During the financial year, 14 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
Darren Holten	7	7	1	1
Arthur Kelly	12	6	2	1
Noel Lockwood	12	12	2	2
Ivy Brown	12	11	2	2
Alison Clarke	7	7	1	1
Richard Kennedy	6	1	0	0
Patricia Ann Edwards	4	2	0	0
Sean Phillips	3	1	0	0
Beau Champion	3	3	1	0
Taylor Kelly-Scholes	6	6	1	1
Mary-Lou Buck	5	0	1	0
Rosemary Vale	5	4	1	0

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

Director:  .....

Dated: 21 October 2025

**PARTNERS**

Paul Fahey B Bus CA  
Bart Lawler B Com CA  
Patrick Brennan B Com CA  
Alison McKinnon B Bus CA

**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 2025 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**



**Rhys McGuire**  
Registered Company Auditor

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

**Dated: 21 October 2025**



**CHARTERED ACCOUNTANTS**  
AUSTRALIA • NEW ZEALAND

T 02 6588 4444 | F 02 6583 4527 | E northcorp@northcorp.com.au | www.northcorp.com.au<sup>7</sup>  
Suites 1-3 Bourne House, 10-12 Short Street, Port Macquarie NSW 2444  
3/80 High Street, Wauchope NSW 2446 | PO Box 166, Port Macquarie NSW 2444  
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## 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 2025 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: 21 October 2025

## 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 2025, 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 2025 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.

**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**

#### **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 2025 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



**Rhys McGuire**  
Registered Company Auditor

Dated: 21 October 2025

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



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**Durri Aboriginal Corporation Medical Service**  
**STATEMENT OF COMPREHENSIVE INCOME**  
**For the Year Ended 30 June 2025**

	2025	2024
Note	\$	\$
Revenue	2 <b>14,990,187</b>	13,986,797
	<b>14,990,187</b>	13,986,797
Bad and doubtful debts	3(a) (101)	(6,192)
Contractors and consultancy	(1,722,631)	(1,911,185)
Depreciation and amortisation expense	3(a) (480,084)	(379,247)
Employee benefits expense	(8,669,722)	(7,803,567)
Expendable equipment and supplies	(170,979)	(68,826)
Insurance expenses	(282,609)	(254,848)
Motor vehicle expenses	(142,534)	(131,427)
Office, legal and administration expenses	(439,775)	(393,127)
Program, training, development and medical expenses	(2,484,134)	(1,739,927)
Repairs, maintenance and utility expenses	(689,806)	(654,575)
Unexpended grants provided	-	(600,047)
Other expenses	(285,264)	(260,595)
	<b>(15,367,639)</b>	(14,203,563)
<b>Profit/(loss) before income tax</b>	<b>(377,452)</b>	(216,766)
Income tax expense	1(b) -	-
<b>Profit/(loss) for the year</b>	<b>(377,452)</b>	<b>(216,766)</b>
<b>Other comprehensive income/(loss) for the year</b>		
Revaluation gain/(loss) on land and buildings	-	1,511,207
Writeback of Work In Progress Assets	(326,036)	-
<b>Total other comprehensive income/(loss) for the year</b>	<b>(326,036)</b>	1,511,207
<b>Total comprehensive income/(loss) for the year</b>	<b>(703,488)</b>	1,294,441
Profit/(loss) attributable to members of the Corporation	<b>(377,452)</b>	(216,766)
Total comprehensive income attributable to members of the Corporation	<b>(703,488)</b>	1,294,441

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 2025

	Note	2025 \$	2024 \$
<b>ASSETS</b>			
<b>Current assets</b>			
Cash and cash equivalents	4	1,499,294	1,406,617
Trade and other receivables	5	2,535,172	3,323,887
Other financial assets	6	4,636,699	4,442,500
Other assets	7	341,050	227,341
<b>Total current assets</b>		<b>9,012,215</b>	<b>9,400,345</b>
<b>Non-current assets</b>			
Property, plant and equipment	8	10,538,651	10,348,220
Right of use assets	9	3,538	68,888
<b>Total non-current assets</b>		<b>10,542,189</b>	<b>10,417,108</b>
<b>TOTAL ASSETS</b>		<b>19,554,404</b>	<b>19,817,453</b>
<b>LIABILITIES</b>			
<b>Current liabilities</b>			
Lease liabilities	10	8,010	50,213
Trade and other payables	11	874,732	468,194
Other liabilities	12	3,010,211	2,891,060
Short-term provisions	13	651,987	693,124
<b>Total current liabilities</b>		<b>4,544,940</b>	<b>4,102,591</b>
<b>Non-current liabilities</b>			
Lease liabilities	10	-	18,681
Long-term provisions	13	114,004	97,233
<b>Total non-current liabilities</b>		<b>114,004</b>	<b>115,914</b>
<b>TOTAL LIABILITIES</b>		<b>4,658,944</b>	<b>4,218,505</b>
<b>NET ASSETS</b>		<b>14,895,460</b>	<b>15,598,948</b>
<b>EQUITY</b>			
Reserves	16	4,915,379	4,915,379
Retained earnings		9,980,081	10,683,569
<b>TOTAL EQUITY</b>		<b>14,895,460</b>	<b>15,598,948</b>

The accompanying notes form part of these financial statements.

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**Durri Aboriginal Corporation Medical Service**  
**STATEMENT OF CHANGES IN EQUITY**  
**For the Year Ended 30 June 2025**

**2025**

	Retained Earnings	Asset Revaluation Reserve	Total
	\$	\$	\$
<b>Balance at 01 July 2024</b>	<b>10,683,569</b>	<b>4,915,379</b>	<b>15,598,948</b>
Profit/(loss) attributable to members of the Corporation	(377,452)	-	(377,452)
Other comprehensive income/(loss) for the year	(326,036)	-	(326,036)
<b>Total comprehensive income for the year</b>	<b>(703,488)</b>	<b>-</b>	<b>(703,488)</b>
<b>Balance at 30 June 2025</b>	<b>9,980,081</b>	<b>4,915,379</b>	<b>14,895,460</b>

**2024**

	Retained Earnings	Asset Revaluation Reserve	Total
	\$	\$	\$
<b>Balance at 01 July 2023</b>	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
<b>Total comprehensive income for the year</b>	<b>(216,766)</b>	<b>1,511,207</b>	<b>1,294,441</b>
<b>Balance at 30 June 2024</b>	<b>10,683,569</b>	<b>4,915,379</b>	<b>15,598,948</b>

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 2025**

	Note	2025 \$	2024 \$
<b>Cash flow from operating activities:</b>			
Receipts from customers		16,980,264	14,347,294
Payments to suppliers and employees		(16,037,840)	(15,048,030)
Interest received		219,484	224,365
Finance costs		(2,655)	(2,832)
<b>Net cash provided by (used in) operating activities</b>		<b>1,159,253</b>	<b>(479,203)</b>
<b>Cash flow from investing activities:</b>			
Proceeds from sale of plant and equipment		385,000	40,000
Acquisition of property, plant and equipment		(1,196,493)	(2,035,871)
Proceeds from / (purchase of) other financial assets		(194,199)	(164,497)
<b>Net cash provided by (used in) investing activities</b>		<b>(1,005,692)</b>	<b>(2,160,368)</b>
<b>Cash flows from financing activities:</b>			
Repayment of lease liabilities		(60,884)	(49,535)
<b>Net cash provided by (used in) financing activities</b>		<b>(60,884)</b>	<b>(49,535)</b>
<b>Net increase (decrease) in cash and cash equivalents</b>		<b>92,677</b>	<b>(2,689,106)</b>
Cash and cash equivalents at beginning of financial year		1,406,617	4,095,723
<b>Cash and cash equivalents at end of financial year</b>	4	<b>1,499,294</b>	<b>1,406,617</b>

The accompanying notes form part of these financial statements.

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**Durri Aboriginal Corporation Medical Service**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**For the Year Ended 30 June 2025**

**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 21 October 2025 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 2025**

**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 2025**

**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 2025**

**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 2025**

<b>Note 2 Revenue</b>	<b>2025</b>	<b>2024</b>
	<b>\$</b>	<b>\$</b>
<b>(a) Revenue</b>		
<b>Grant Revenue</b>		
Aboriginal Health and Medical Research	18,146	6,951
AbSec	468	-
Australian Healthcare Associates	29,243	23,746
Department of Infrastructure, Transport, Regional Development and Communications	96,778	103,000
Department of Family and Community Services	157,829	89,552
Department of Health	7,435,269	6,609,668
Healthy North Coast Ltd	758,809	860,400
Mid North Coast Local Health District	154,704	151,519
National Aboriginal Community Controlled Health Organisation	711,575	802,070
NSW Aboriginal Affairs	2,727	-
NSW Ministry of Health	2,353,135	2,279,744
NSW Rural Doctors Network	393,308	424,623
Transport For NSW	3,301	-
University of Newcastle	38,670	16,573
University of NSW - Kirby Institute	28,250	-
	<b>12,182,212</b>	<b>11,367,846</b>
<b>Other Revenue</b>		
Interest received	224,632	229,134
Medicare income	2,135,476	2,010,708
Sundry income	123,452	152,262
Practice incentive payments	189,571	170,467
Wage and expenses contributions - external	15,136	48,217
Gain on sale of property, plant and equipment	119,708	8,163
	<b>2,807,975</b>	<b>2,618,951</b>
<b>Total Revenue</b>	<b>14,990,187</b>	<b>13,986,797</b>

**Durri Aboriginal Corporation Medical Service**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**For the Year Ended 30 June 2025**

<b>Note 3 Profit/(Loss) for the Year</b>	<b>Note</b>	<b>2025</b>	<b>2024</b>
		<b>\$</b>	<b>\$</b>
<b>(a) Expenses</b>			
Profit/(loss) before income tax includes the following specific expenses:			
<b>Depreciation and Amortisation</b>			
Buildings	8(b)	241,614	213,488
Plant and equipment	8(b)	173,120	116,219
Right-of-use assets - buildings	9(a)	46,271	28,727
Right-of-use assets - motor vehicles	9(a)	19,079	20,813
<b>Total Depreciation and Amortisation</b>		<b>480,084</b>	<b>379,247</b>
<b>Finance Costs</b>			
Interest on lease liabilities	9(c)	2,655	2,832
<b>Bad and doubtful debts</b>			
Trade and other receivables		101	6,192
<b>Note 4 Cash and Cash Equivalents</b>			
<b>Cash on Hand</b>		<b>253</b>	<b>1,725</b>
<b>Cash at Bank</b>			
Cash Management Account		1,147,667	1,046,408
Operating Bank Accounts		351,374	358,484
		<b>1,499,294</b>	<b>1,406,617</b>
<b>Reconciliation of Cash</b>			
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		1,499,294	1,406,617
<b>Note 5 Trade and Other Receivables</b>			
<b>Current</b>			
Grants receivables		-	403,804
Trade receivables		15,595	405,654
		<b>15,595</b>	<b>809,458</b>
Funds contributed to Department of Health for capital works project		2,500,000	2,500,000
Other receivables		19,577	14,429
Amounts receivable from related party		6,192	6,192
Provision for impairment		(6,192)	(6,192)
		<b>2,535,172</b>	<b>3,323,887</b>
<b>Note 6 Other Financial Assets</b>			
<b>Current</b>			
Financial assets at amortised cost		4,636,699	4,442,500
<b>(a) Financial assets at amortised cost comprise:</b>			
Term Deposits		4,636,699	4,442,500

**Durri Aboriginal Corporation Medical Service**  
**NOTES TO THE FINANCIAL STATEMENTS**  
For the Year Ended 30 June 2025

<b>Note 7 Other Assets</b>	<b>2025</b>	<b>2024</b>
	\$	\$
<b>Current</b>		
Prepayments	197,151	180,563
Prepaid Gift Cards	14,366	300
Deposits paid	7,830	7,830
GST receivable	121,703	38,648
	<u>341,050</u>	<u>227,341</u>
<b>Note 8 Property, Plant and Equipment</b>		
<b>Land and buildings</b>		
<b>Freehold land</b>		
Land at cost	60,000	60,000
Land at independent valuation - 2021	-	-
Land at independent valuation - 2024	1,450,000	1,450,000
<b>Total freehold land at valuation</b>	<u>1,510,000</u>	<u>1,510,000</u>
<b>Buildings and freehold improvements</b>		
Buildings at cost	2,618,399	2,770,145
Buildings at independent valuation - 2021	-	-
Buildings at independent valuation - 2024	5,250,000	5,250,000
Less accumulated depreciation	(395,015)	(153,401)
<b>Total buildings and freehold improvements</b>	<u>7,473,384</u>	<u>7,866,744</u>
<b>Total land and buildings</b>	<u>8,983,384</u>	<u>9,376,744</u>
<b>Plant and equipment</b>		
Plant and equipment at cost	2,164,528	1,722,025
Less accumulated depreciation	(609,261)	(750,549)
<b>Total plant and equipment</b>	<u>1,555,267</u>	<u>971,476</u>
<b>Total property, plant and equipment</b>	<u>10,538,651</u>	<u>10,348,220</u>

**(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
	\$	\$	\$	\$
<b>Opening Balance at 1 July 2024</b>	1,510,000	7,866,744	971,476	10,348,220
Additions	-	174,290	1,022,203	1,196,493
Disposals	-	(326,036)	(265,292)	(591,328)
Depreciation expense	-	(241,614)	(173,120)	(414,734)
Revaluation gain/(loss)	-	-	-	-
<b>Closing Balance at 30 June 2025</b>	<u>1,510,000</u>	<u>7,473,384</u>	<u>1,555,267</u>	<u>10,538,651</u>

**Durri Aboriginal Corporation Medical Service**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**For the Year Ended 30 June 2025**

**Note 9 Right of Use Assets**

<b>Non-Current</b>	<b>2025</b>	<b>2024</b>
	\$	\$
Leased buildings	67,500	67,500
Accumulated amortisation	<u>(63,962)</u>	<u>(17,691)</u>
	<b>3,538</b>	<b>49,809</b>
Leased plant and equipment	60,706	60,706
Accumulated amortisation	<u>(60,706)</u>	<u>(41,627)</u>
	<b>-</b>	<b>19,079</b>

	<b>Leased Buildings</b>	<b>Leased Plant and Equipment</b>	<b>Total</b>
	\$	\$	\$
<b>(a) Movement in carrying amounts</b>			
<b>Opening Balance at 1 July 2024</b>	49,809	19,079	68,888
Additions to right-of-use assets	-	-	-
Amortisation charge	<u>(46,271)</u>	<u>(19,079)</u>	<u>(65,350)</u>
<b>Closing Balance at 30 June 2025</b>	<b>3,538</b>	<b>-</b>	<b>3,538</b>

**(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:

	<b>2025</b>	<b>2024</b>
	\$	\$
Interest expense on lease liabilities	(2,655)	(2,832)
Amortisation of right-to-use assets	<u>(65,350)</u>	<u>(49,540)</u>
	<b>(68,005)</b>	<b>(52,372)</b>

**Durri Aboriginal Corporation Medical Service**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**For the Year Ended 30 June 2025**

**Note 10 Lease Liabilities**

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

	Note	2025 \$	2024 \$
<b>Current</b>			
Lease liabilities		<u>8,010</u>	<u>50,213</u>
<b>Non-Current</b>			
Lease Liabilities		<u>-</u>	<u>18,681</u>
		<u>8,010</u>	<u>68,894</u>

**Note 11 Trade and Other Payables**

<b>Current</b>			
<b>Unsecured liabilities</b>			
Trade and other payables		<u>874,732</u>	<u>468,194</u>

**Note 12 Other Liabilities**

<b>Current</b>			
Unexpended grants	12(a)	<u>3,010,211</u>	<u>2,891,060</u>

**Durri Aboriginal Corporation Medical Service**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**For the Year Ended 30 June 2025**

**Note 12 Other Liabilities (cont.)**

**(a) Unexpended grants/contributions**

The Corporation is contractually obliged to provide services in subsequent reporting periods in relation to grants received from the following funding bodies. The amounts recorded represent unexpended grants at the end of the reporting period.

<b>Funding Body</b>	<b>Program</b>	<b>2025</b>	<b>2024</b>
		<b>\$</b>	<b>\$</b>
AbSec – NSW Child, Family and Community Peak Aboriginal Corporation	Combined Community Response	-	468
Aboriginal Health and Medical Research	Mental Health	<b>4,791</b>	4,791
	Nicotine Replacement Therapy	<b>13,025</b>	31,171
Australian Healthcare Associates	QUMAX	-	10,728
Department of Communities and Justice	Early Childhood Education	-	21,939
	Family Support	-	64,919
Department of Health	Air Conditioning Replacement	-	1,373
	Australian Family Partnership Program	<b>238,630</b>	497,976
	Elbow St Development-Kempsey Capital	<b>314,572</b>	332,941
	Indigenous Australians Health Program	-	70
Department of Infrastructure, Transport, Regional Development and Communications	COVID-19 Artist Support	-	32
	Art Gallery	<b>6,254</b>	-
	IT Project	<b>3,691</b>	3,691
Mid North Coast Local Health District	Drug and Alcohol	-	1,046
	Youth Alcohol-Drug Prevention	<b>136,447</b>	133,315
National Aboriginal Community Controlled Health Organisation	Aboriginal Disability Liaison Officer	<b>86,663</b>	102,915
	Cancer Care	<b>34,163</b>	-
	Elder Care	<b>106,771</b>	90,268
	Flood Recovery	<b>222,287</b>	305,680
	HIV Awareness	-	727
	Vaccine Support	<b>98,010</b>	-
	The Voice - Mental Health	<b>42,555</b>	3,405
NSW Ministry of Health	AMIHS	-	30,652
	Short St Upgrade	<b>242,720</b>	-
	COVID-19 Vaccination Promotion	<b>23,710</b>	40,120
	Dental Equipment Upgrade	-	350,678
	Drug and Alcohol	<b>116,345</b>	142,335
	Drug and Alcohol Youth	<b>151,407</b>	-
	Justice Health	<b>490,000</b>	-
	Suicide Prevention	<b>365,856</b>	391,165
NSW Rural Doctors Network	HEBHBL	-	5,731
	MOICDP	<b>100,086</b>	105,853
Primary Health Network	COVID Isolation Support	-	15,715
	Integrated Team Care	-	155,558
	Mens Group	-	4,364
	Wellbeing	<b>189,459</b>	-
The Benevolent Society	Communities Program	<b>9,879</b>	9,879
Transport for NSW	Child Restraints	-	3,305
University Of Newcastle	UON Study	<b>12,890</b>	-
University of NSW - Kirby Institute	Walkabout Barber	-	28,250
		<b>3,010,211</b>	<b>2,891,060</b>

**Durri Aboriginal Corporation Medical Service**  
**NOTES TO THE FINANCIAL STATEMENTS**  
**For the Year Ended 30 June 2025**

<b>Note 13 Provisions</b>	<b>Employee Benefits</b>	<b>Total</b>
	\$	\$
<b>Opening Balance at 1 July 2024</b>	<b>790,357</b>	<b>790,357</b>
Additional provisions	899,633	899,633
Amounts used	(923,999)	(923,999)
<b>Closing Balance at 30 June 2025</b>	<b>765,991</b>	<b>765,991</b>
<b>Analysis of Total Provisions</b>		
<b>Employee Benefits</b>	<b>2025</b>	<b>2024</b>
	\$	\$
Current	651,987	693,124
Non-current	114,004	97,233
	<b>765,991</b>	<b>790,357</b>

**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 2025 (30 June 2024: 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 2025**

**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:

	2025	2024
	\$	\$
Short-term employee benefits	757,643	785,031
Post-employment benefits	84,027	73,888
	<b>841,670</b>	<b>858,919</b>

**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 (2025: \$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:

<b>Financial Assets</b>			
Cash and cash equivalents	4	1,499,294	1,406,617
Trade and other receivables	5	2,535,172	3,323,887
Term deposits	6	4,636,699	4,442,500
<b>Total Financial Assets</b>		<b>8,671,165</b>	<b>9,173,004</b>
<b>Financial Liabilities</b>			
Financial liabilities at amortised cost:			
Lease liabilities	10	8,010	68,894
Trade and other payables	11	874,732	468,194
<b>Total Financial Liabilities</b>		<b>882,742</b>	<b>537,088</b>

**(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 2025**

**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	2025 \$	2024 \$
<b>Recurring fair value measurements</b>			
Non-financial assets:			
Property, plant and equipment			
Freehold land	8, 16(a)	1,510,000	1,510,000
Freehold buildings	8, 16(a)	5,250,000	5,250,000
		<u>6,760,000</u>	<u>6,760,000</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**

<b>Remuneration of the auditor for:</b>		
Auditing the financial statements	49,250	50,250
Other assurance related services	<u>11,250</u>	<u>11,250</u>
	<u>60,500</u>	<u>61,500</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





**Durri**

Aboriginal Corporation Medical Service

PO Box 136  
Kempsey NSW 2440  
P: 02 6560 2300  
F: 02 6562 7069