



CWAATSICH

Charleville and Western Areas Aboriginal and Torres Strait Islander
Community Health Limited



CWAATSICH

Annual Report

2018/2019

IAS- SOCIAL & EMOTIONAL WELL-BEING PROGRAM WOMEN'S GROUP PROGRAM- RIVER WALK



Contents

Contents.....	3
About CWAATSICH Ltd.....	4
Chairperson Annual Report 2018/19.....	7
CWAATSICH Ltd Directors Profile.....	9
Organisational Structure	10
CWAATSICH CEO Report 2018/19.....	11
IAS-Children & Schooling Report.....	15
IAS- Social & Emotional Well-Being Report	16
Deadly Choices Report.....	17
Primary Health Care Access Manager Report.....	18
Organisational Health Check	22
Corporate Services Manager Report.....	24
2018/2019 Financial Statements.....	25

About CWAATSICH Ltd

Charleville and Western Areas Aboriginal and Torres Strait Islander Community Health Limited, facilitates the culturally appropriate and community sensitive participation and access of Aboriginal and Torres Strait Islander people to quality health services.

Our Vision

Within a generation, Aboriginal and Torres Strait Islander people live in inclusive communities that deliver equality in health, well-being and life expectancy outcomes.

Our Mission

Our mission is to deliver holistic, culturally appropriate health services that improve health and well-being outcomes for Aboriginal and Torres Strait Islander people in our communities.

Our Values

The traditional values of Caring, Sharing and Respect form the foundation for our organisation.

We care for the physical, spiritual, cultural, emotional and social well-being of our people.

We share our passion, time, resources, skills and knowledge to optimise health outcomes for our people.

We respect the cultural integrity, diversity, rights, views, values and expectations of our people.

Guiding Principals

Our guiding principals support and guide our holistic approach toward the provision of quality health services for Aboriginal and Torres Strait Islander people.

About CWAATSICH Ltd

Cultural Responsiveness

We will deliver our services in a culturally responsive manner.

Holistic Approach

We maintain the use of best practice health models, programs and services that heal the physical, spiritual, cultural, emotional and social well-being of clients.

Working Together

We commit to working in collaboration and partnership with our communities, government and non-government partners to optimise Aboriginal and Torres Strait Islander people's participation and access to quality primary, secondary and tertiary health services.

Good Governance Practices

We acknowledge our organisational and clinical governance responsibilities and commit to maintaining professional, honest and transparent management, planning and decision making practices.

Promoting Good Health

We commit to the sector-wide promotion of healthy options and choices that lead to responsible, independent and healthy lifestyles among Aboriginal and Torres Strait Islander people and communities.

Building Capacity

We commit to strengthening our organisational capacity and performance

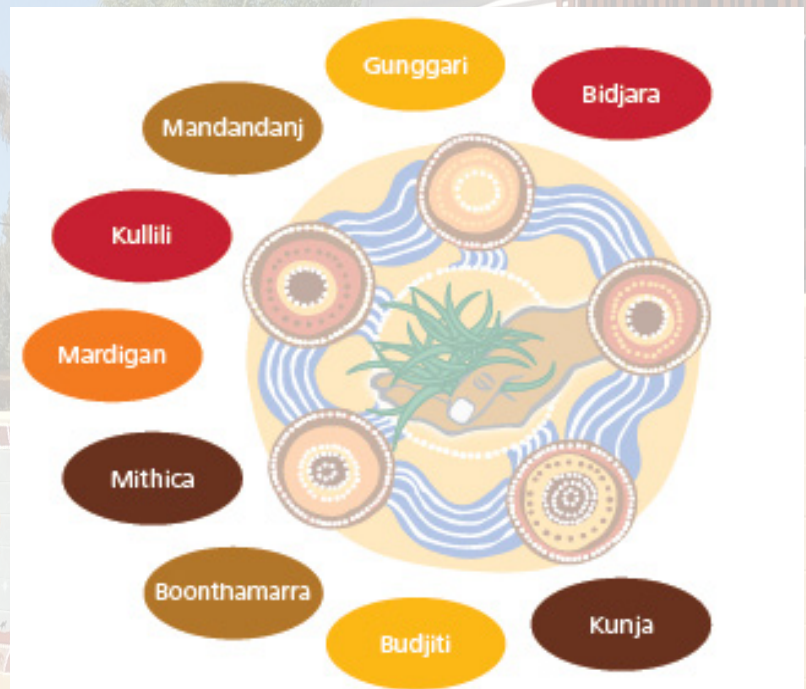
Workforce Excellence

We commit to maintaining a culturally competent and highly skilled workforce and sustaining the viability of the organisation.

Innovation & Continuous Improvement

We commit to maintaining an innovative and continuous improvement focus to meet new challenges, influence positive change, inform best practice and add value for money.

Our region encompasses the traditional lands of the following Aboriginal people



Our Communities

Our organisation operates across the Roma Regional Council, Balonne, Quilpie and Murweh Shire Council boundaries and provides services to communities in the near south west and far south west Queensland Aboriginal and Torres Strait Islander Health Partnership Community of interest profile areas.

There are members of a number of additional traditional Aboriginal people living throughout our region, and all have access to the services provided by our organisation.

With our head office in Charleville and offices in Mitchell, Roma and Quilpie, we also provide outreach services to Aboriginal and Torres Strait Islander people living in Surat, Windorah and surrounding areas.

Chairperson Annual Report 2018/19



CWAATSICH has been in operation since April 1994 and was incorporated to facilitate the participation of Aboriginal and Torres Islander people in culturally appropriate health services in our region.

Our head office is based in Charleville with offices in Mitchell, Roma, and Quilpie. Our organisation provides outreach services to Surat, Windorah and surrounding areas.

In the first 5 years of operations, a staff of 4 provided primary health care to clients and since then we have seen a growth to 40 staff who are professional and qualified in their own right as Aboriginal Health Workers/Practitioners, EN's, GP's, Administration staff, SEWB, Children and Schooling, Deadly Choice Workers.

In 1994 CWAATSICH received a budget of \$650 000, 25 years later our budget is approximately \$7.194m. Our current assets of owning our 4 Aboriginal Health services, Charleville, Roma, Mitchell and Quilpie office are around \$9million. However, this would not have been possible over the past years, if not for the funding from Dept of Health and various other funding bodies.

Therefore, I would like to acknowledge QATSIH, WQPHN, PM&C NDIS and Qld health. In recognition of the need for Aboriginal Community Controlled Services throughout the region.

I also would like to acknowledge the founding members and past Board of Management and staff who have struggled to maintain our community controlled health service over the last 25 years of operation.

Our principal activities of Charleville and Western Areas Aboriginal and Torres Strait Islanders Community Health Limited during the financial year 2018-2019 were to work in collaboration and in partnership with our communities, government and non government partners.

During this time, CWAATSICH lead the implementation of Comprehensive Culturally Appropriate Primary Health Care, best practice models, solutions, programs and services to genuinely close the gap and increase life expectancy.

This was achieved by building and sustaining the spiritual, cultural, clinical health and social and emotional wellbeing of Aboriginal and Torres Strait Islander Australians.

The most significant changes in the nature of the principal activities were

- Continued client access to increased number of General Practitioners and Allied Health Services.
- Finalisation of the capital works extension program to Charleville clinic.

Short term objectives

The company's short- term objectives were to:

- Maintain our Information Technology and Communication systems for improved effective and efficient communication processes between staff, directors and communities.
- Develop best practice Operational Manuals to support workforce and succession planning.
- Rollout of the Child and Maternal Healthy Outback Children program

Long term objectives

The Company's long-term objectives are to:

- Maintain system quality improvements for accreditation, pathways and performance benchmarking.
- Employ & sustain a strong skilled accredited multi tasked workforce in a competitive workplace market.
- Become the lead agency for co-commissioning of primary health care services ie Allied Health services.

Strategy for achieving the objectives

To achieve these objectives, the company has adopted the following strategies:

- Reviewing and implementing workforce succession planning.
- Regular in-service and professional development.
- Review and update policy and procedures in line with risk management strategies.
- Implement quality improvements activities and cycles embeded in every day practice.

Subjected to the provisions of the Corporations Laws and with the approval of the governing committee, some of these duties may be delegated to the CEO.

During the financial year, 7 meetings of directors (including committees of directors) were held. Attendances by each director during the year were as follows:

Directors' Meetings

	No. eligible to attend	Number attended
Norman Burns	7	6
Janet Gaulton	7	7
Annette Holley	7	6
Dorothy Newby	3	2
Veronica Holland	7	6
John Maris	7	7
Michael McGuane	7	7

I certainly thank and acknowledge the Board, the Staff and Senior Management Teams for their great efforts this year and the commitment to implementing our action plans. The commitments from everybody involved with CWAATSICH over the past 25 years have provided quality leadership and governance that has stabilised and maintained our health service delivery to be where we are today and for the future.

We, as CWAATSICH are again committed to continuous improvements and look forward to any challenges we face. I can say all our staff and Board Members have strived to promote Cultural Respect, Holistic Health Approach, Accountability, Caring, Sharing and Promoting good health outcomes for the 2018 – 2019 year.

Yours in the Struggle

Norman Burns

CWAATSICH Ltd

Directors Profile



Norman Burns
Chairperson

Norman has been a Board of Director since 11th October 2008



Veronica Holland
Director

Veronica has been a Board of Director since 2007



Janet Gaulton
Director

Janet has been a Board of Director for over 16 years



Michael McGuane
Director

Michael has been a Board of Director since 06th May 2017



John Maris
Director

John has been a Board of Director for over 20 years



Annette Holley
Director

Annette has been a Board of Director since 10th October 2015

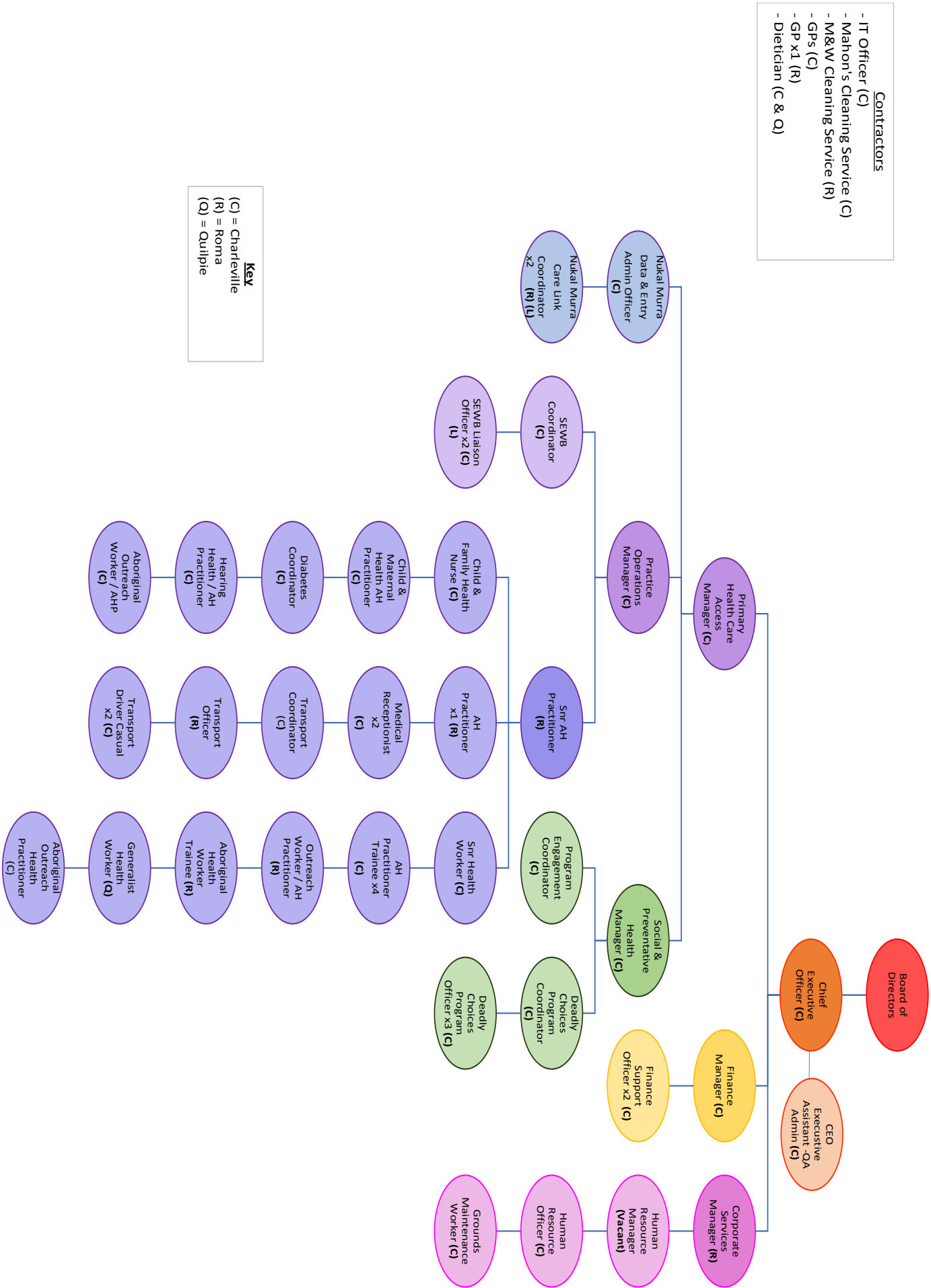


Dorothy Newby
Director

Dorothy has been a Board of Director for over 19 years, and we would like to thank Dorothy for all her valuable time and commitment during her time as a Board of Director

CWAATSICH Organisational Chart

CWAATSICH Organisational Structure



CWAATSICH CEOs Report 2018/2019



In presenting the CEO Report 2018-2019 to the members I would like to reflect on CWAATSICH's Strategic Plan 2014-2019 which is coming to a close this year.

The table attached highlights the goals and strategies that we benchmarked our service delivery on and the performance measures of what we have achieved across the span of the Strategic Plan. I am proud of the performance measures achieved by the Board and Staff and these achievements will be highlighted throughout the annual report. Also, I would like to acknowledge the following QATSIH, WQPHN, PM&C NDIS and Qld health, in recognition of the need for Aboriginal Community Controlled Services throughout the region.

This financial year, we as an Aboriginal Community Control Service have been flexible in providing innovative preventative and multi-disciplinary teamwork for health promotion within the context of a culturally appropriate primary health care model to improve frontline services and integrate coordinated health care to our communities with other sectors of the community.

The next 5 years Strategic Plan 2019-2023 will see our teams striving to maintain the benchmark set and work to improving on our goals and standards to ensure we deliver the best possible continuum of care to meet the needs of our communities.

In closing, I would like to thank staff, community members, allied health services and our partners for working with CWAATSICH as we continue to work together to achieve our goals. I would like to take this opportunity to thank the Board of Directors for their leadership, time and energy in ensuring our health service continues to work towards closing the gap in Aboriginal Torres Strait Islander Health.

Sheryl Lawton
CEO

CWAATSICH Strategic Plan 2014-19

Strategic Goal 1	Strategic Goal 2	Strategic Goal 3	Strategic Goal 4	Strategic Goal 5
Robust leadership and accountable governance	Business viability, efficiency and sustainability	Holistic primary health care services	Culture and Cultural capability	Strategic sustainable partnerships

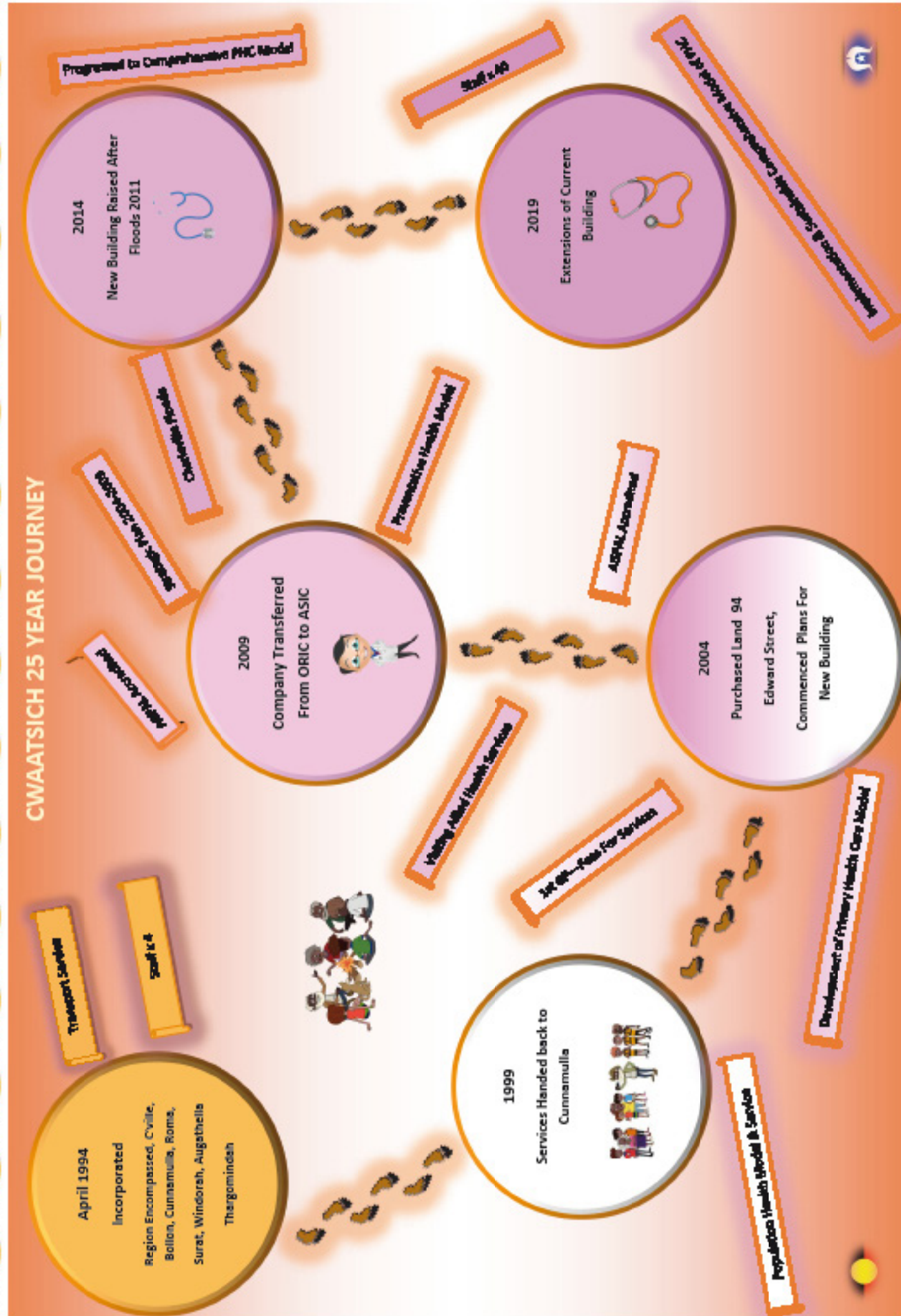
Strategies

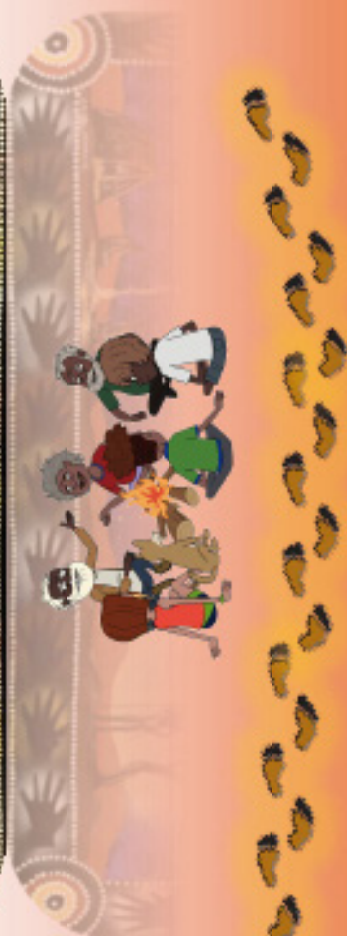
<p>Accountable and transparent governance and leadership</p> <p>Managing risk and compliance</p> <p>Financial performance and accountability</p> <p>Strategic planning & monitoring</p>	<p>Asset, infrastructure, equipment and systems management</p> <p>Continuous quality improvement and risk management</p> <p>Efficient financial benchmarking, controls and monitoring systems</p> <p>A learning organisation with a workforce committed to excellence</p> <p>Integrated multidisciplinary primary health care services and healthy lifestyle & tobacco programs to Close the Gap</p>	<p>Evidence based holistic primary health care through:</p> <ul style="list-style-type: none"> - Clinical primary care - Chronic disease management - Prevention and early detection - Maternal and Child Health <p>Health checks, screening and follow-up care provided in-clinic and in the home</p> <p>Effective patient journey pathways within CWAATSICH, with secondary, tertiary health and related services</p>	<p>Individual, group, and whole of community healthy lifestyle and social wellbeing programs for:</p> <ul style="list-style-type: none"> - Children and families - Young people - Adults - Elders <p>Effective patient journey pathways within CWAATSICH with related social services</p> <p>Maintain culture, support healing, and protect heritage</p>	<p>Contribute to the economic development of the Aboriginal and Torres Strait Islander community</p> <p>Effective stakeholder partnerships</p> <p>Effective community engagement</p>
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Performances

<ul style="list-style-type: none"> • Quality standards • Policies, systems, practices and procedures • Legislative and regulatory compliance • Financial & capital growth 	<ul style="list-style-type: none"> • Sustainable facilities management • Accreditation • Increased income generation and grant revenue • Professional development and performance management • Evaluation of CWAATSICH services and programs 	<ul style="list-style-type: none"> • Increased MBS income generation • Improved KPI and OSR outcomes • Increased access to CWAATSICH services 	<ul style="list-style-type: none"> • Increased access to social wellbeing programs • Improved OSR outcomes • Improved social and emotional wellbeing 	<ul style="list-style-type: none"> • Participation in Aboriginal and Torres Strait Islander affairs environment • Increased health and wellbeing outcomes • Increased participation and community self-reliance
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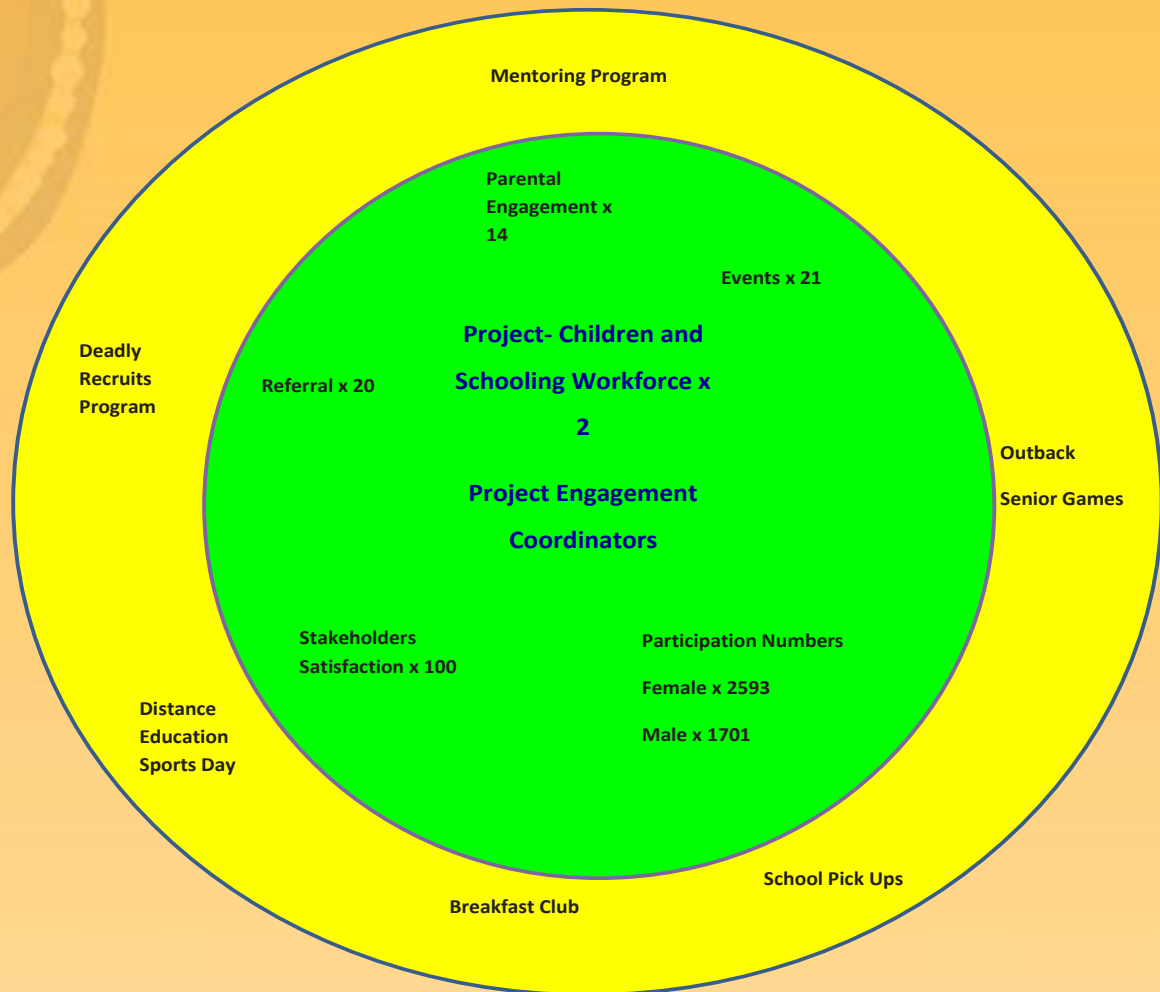
CWAATSICH 25 YEAR JOURNEY





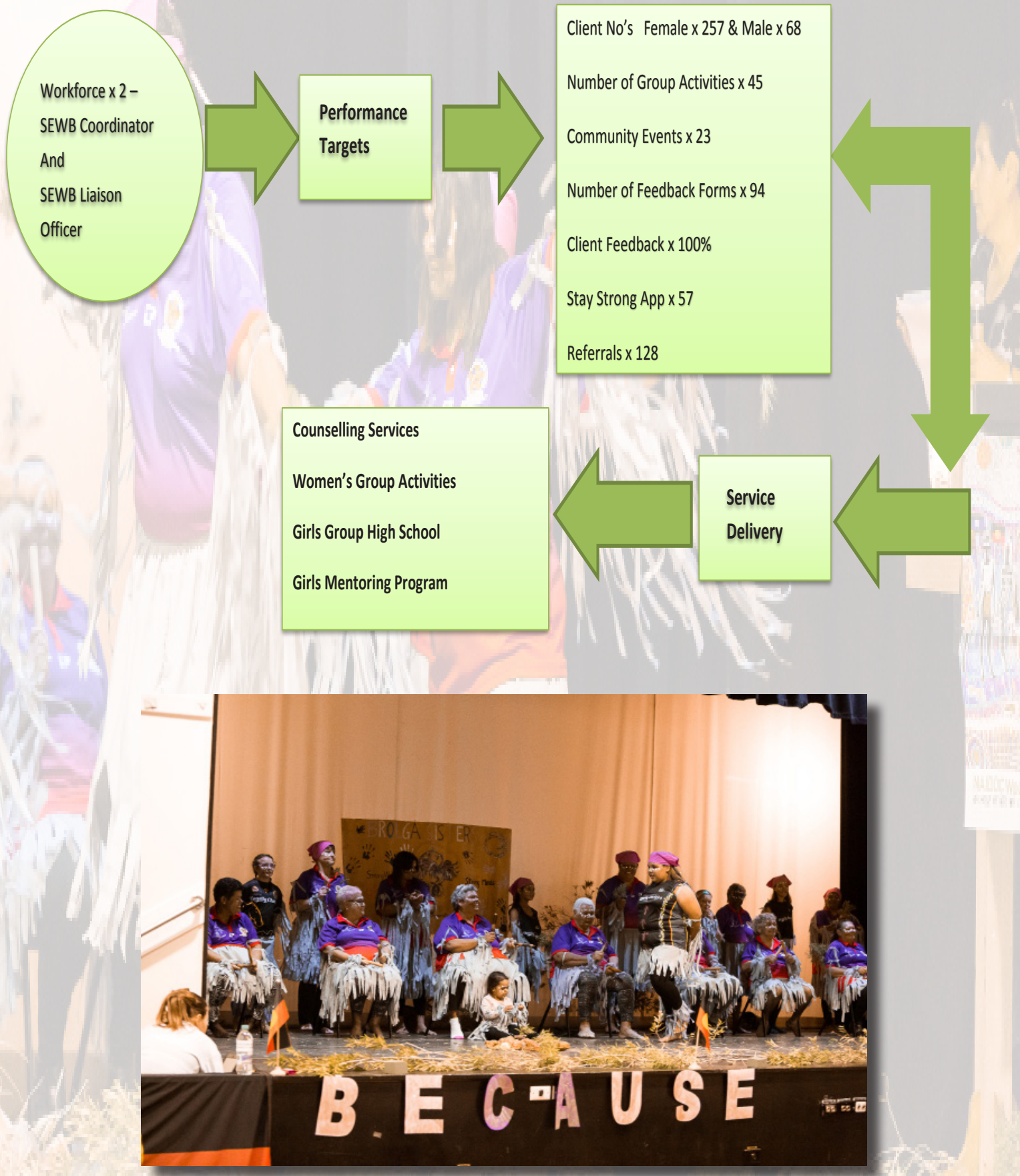
PRIME MINISTER AND CABINET PROGRAM

CHILDREN AND SCHOOLING PROGRAM



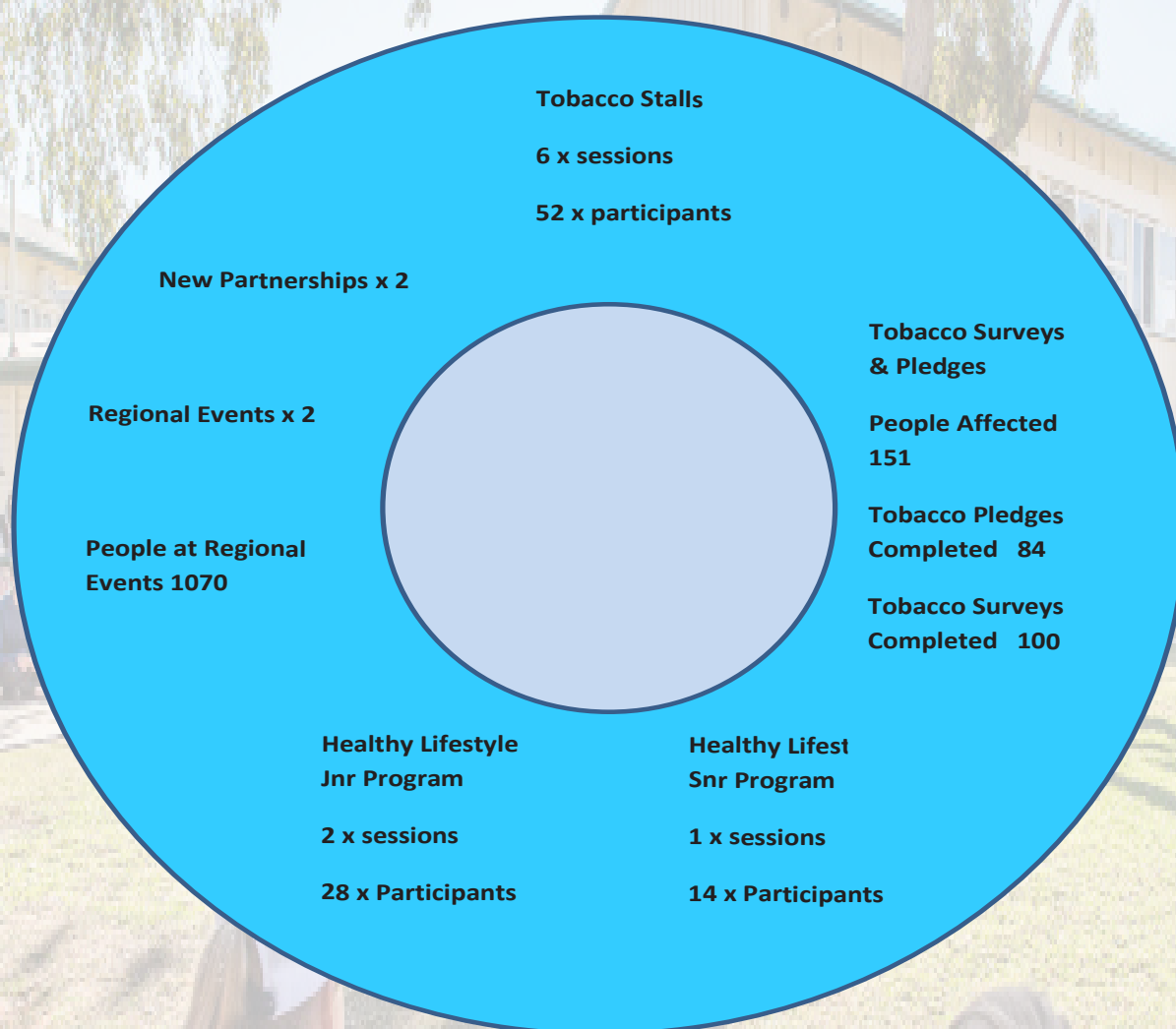
PRIME MINISTER AND CABINET & WESTERN QUEENSLAND PRIMARY HEALTH NETWORK

SOCIAL & EMOTIONAL WELL-BEING PROGRAM



DEADLY CHOICES PROGRAM

REPORT





Primary Health Care Access Manager Maleeta Richards

Welcome to CWAATSICH's report on Service Delivery and Clinic Program updates for 2018-2019. There have been major milestones in achieving positive outcomes in communication linkages, integration, enhancing team approaches and continuous quality improvement approaches to optimise efficiency and maximise patient access.

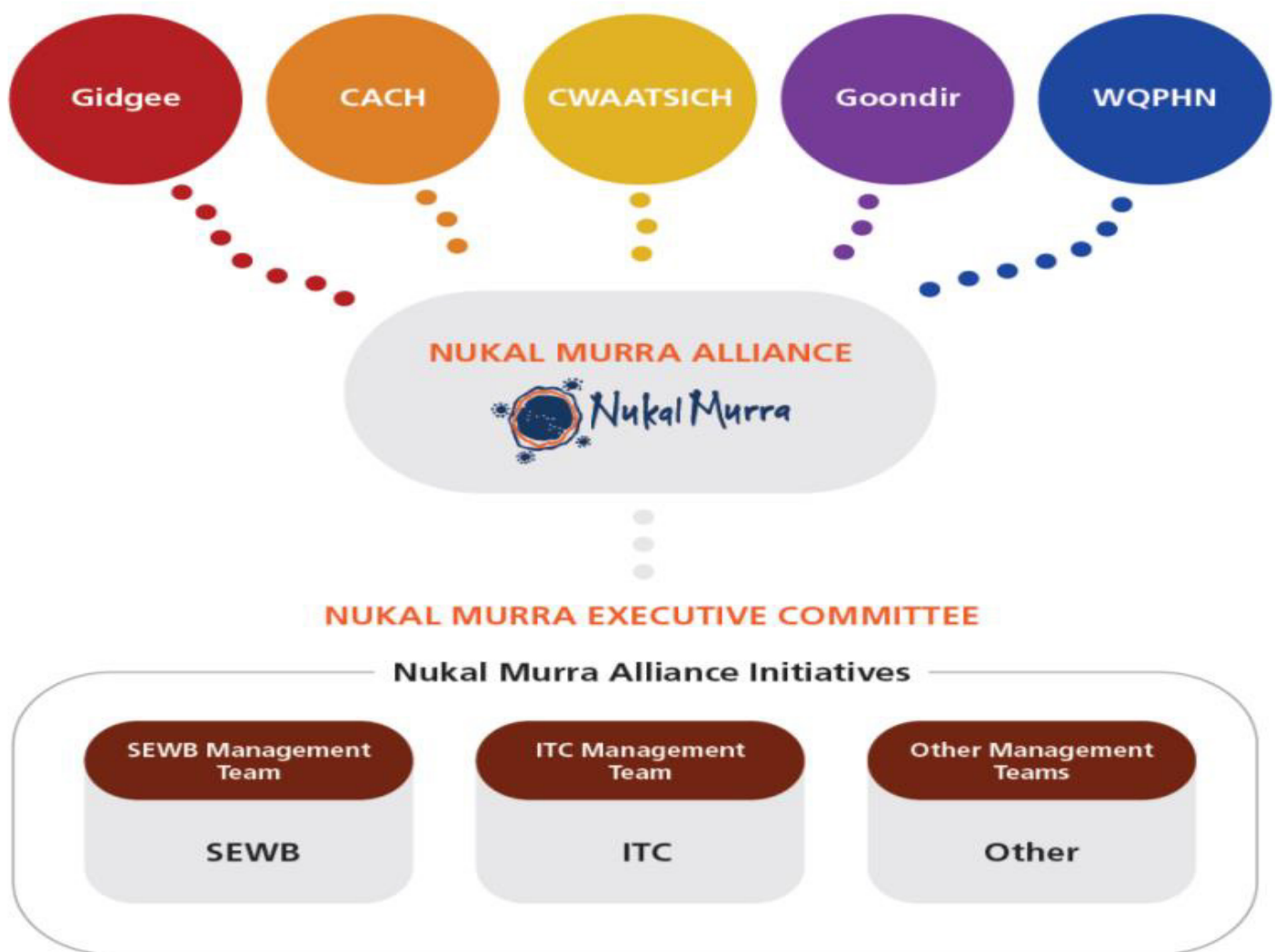
Identified below are the organisations achievements and success stories over the past 12 months in various areas of program, clinical and service initiatives across the region.

Success stories and achievements for CWAATSICH over the past 12 months include:-

1. **Charleville CWAATSICH Clinic:-** Dr. Zowie Bailey - Full-time GP, Dr. Julia Fielding – 3 weeks on 1 week off, Dr. Victor Pillay – 2 weeks on 2 weeks off. Over the next 12 months CWAATSICH will also provide a Locum Pool of three (3) GP's – Dr. Julia Carr, Dr. Beom Koh and Dr. Peter Ryder. All GP's continue to provide a great service to the whole community in the CWAATSICH region.
2. **Roma CWAATSICH Clinic:-** Permanent Part-time GP service in Roma CWAATSICH clinic – Dr Rachael Moulden – 2 days per week
3. **Mitchell:-** Clients travel to Roma weekly to access GP Service with a transport service provided by an Aboriginal Health Worker
4. **Quilpie:-** Clients are seen on a monthly visiting service by Dr. Julia Fielding
5. **Ongoing delivery of Allied Health Services in CWAATSICH clinics** across the clinic sites of Charleville, Quilpie, Mitchell and Roma continues with services provided by IUIH and Vital Health
6. **Child and Maternal Health Program–** CWAATSICH has now completed the refurbishment of the Child & Maternal Health Room which is based in the Charleville CWAATSICH building. The team continues to work in collaboration with the community other clinics and the Western Queensland Primary Health Network to provide a service collective model of child care in the Charleville district and surrounds.
7. **SEWB –** CWAATSICH continues to provide Psychology services from our Charleville clinic. Staff and Board welcomed Mr Ed Mosby who is an Indigenous Psychologist and provides a culturally appropriate service to our people.
8. **CWAATSICH continues to be part of the Dreamt Dementia program** with the commencement of screening community members and clients for signs of dementia from 45years of age. Total screened to date = 38 with a total of 143 eligible clients to be screened. Three (3) Health Workers have been trained to conduct the screening clients.
9. **CWAATSICH continues to participate in the LEAP Project** supported by the Western Queensland Primary Health Network (WQPHN). The aim of the project is to develop a set of tools for Chronic Disease Prevention and Management in Community Controlled Health Services.
10. **Prime Minister & Cabinet Funded IAS Program** continues to deliver the Children and Schooling and SEWB Programs within the Charleville community with ongoing support from other teams.

- The Nukal Murra Alliance brings together the Western Queensland Primary Health Network (WQPHN) and the Aboriginal and Torres Strait Islander Community Controlled Health Services (AICCHS) in a regionally focused, culturally informed partnership to improve the health, social and emotional wellbeing of our communities
- Nukal Murra , meaning ‘plenty hands’ in local language, reflects our joint aspirations to create greater service alignment, integration and consumer engagement to improve the health outcomes of Aboriginal and Torres Strait Islander people in western Queensland.
- Provides for an alliance contract to support innovation and co-commissioning of mental health and chronic disease support services
- \$ 2.2m in PHN funding under the Alliance PA, including an additional \$2m through other funding. In many cases this investment is being matched through \$ for \$ and in-kind.

Nukal Murra Alliance Structure



2018-2019 Full Year

CWAATSICH Cluster Demographics

Total Patients

253

Total Referrals

467

Male

106
(41.9%)

Female

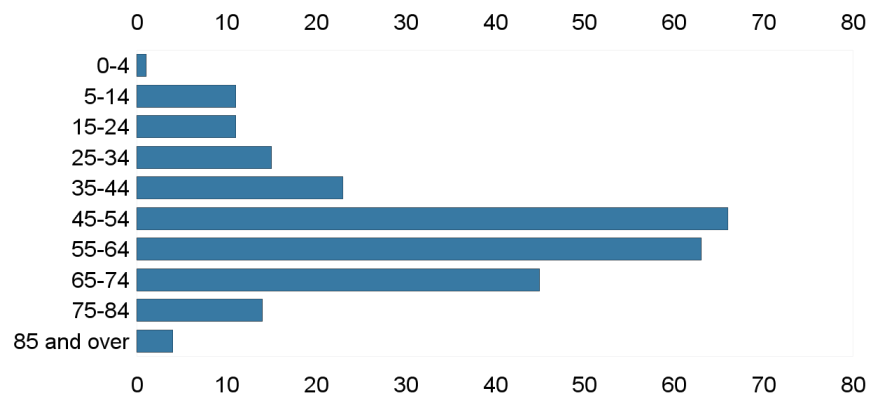
146
(57.7%)

With Health Care Cards
33 (13%)

Pension Cards
155 (61.3%)

Smoker
99 (39.1%)

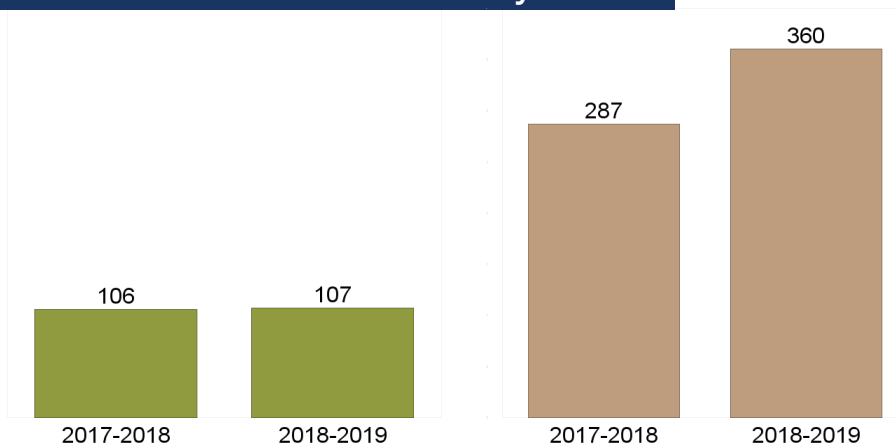
Age Breakdown



Chronic Disease Prevalence

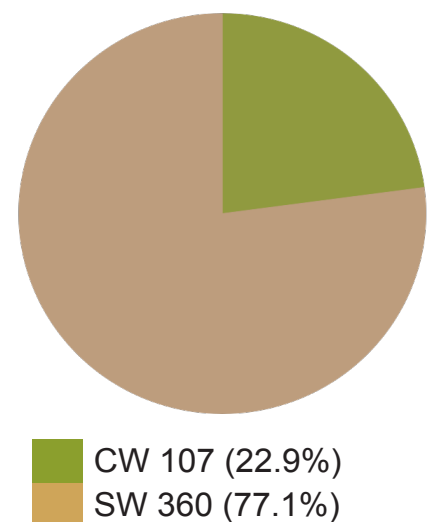
Cancer	CVD	CKD	Diabetes	Mental Health	Respiratory
22 (8.7%)	87 (34.4%)	28 (11.1%)	102 (40.3%)	55 (21.7%)	79 (31.2%)

Referral volume history



Central West

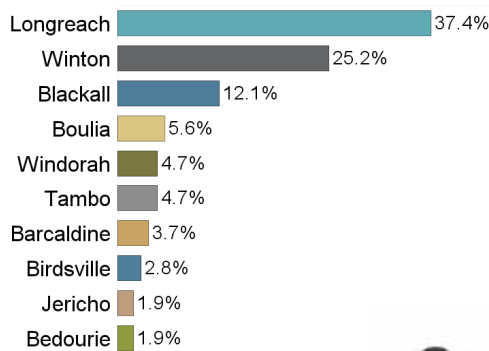
South West



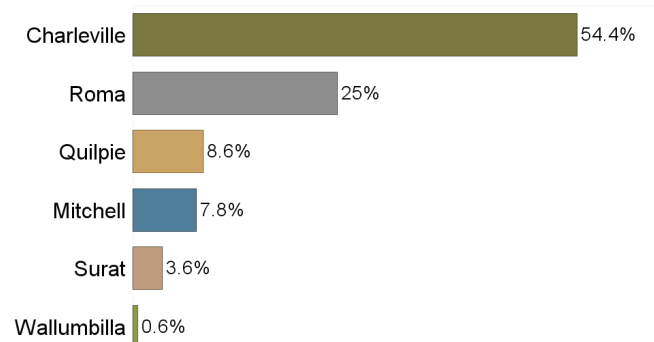
Referrals by Communities

* Communities in which the support services are required

Central West



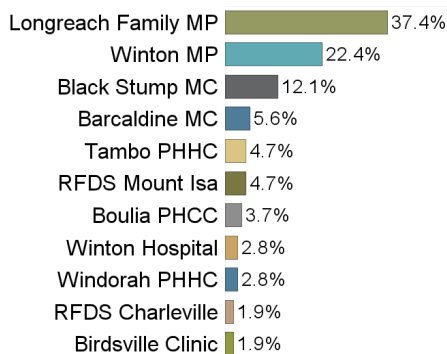
South West



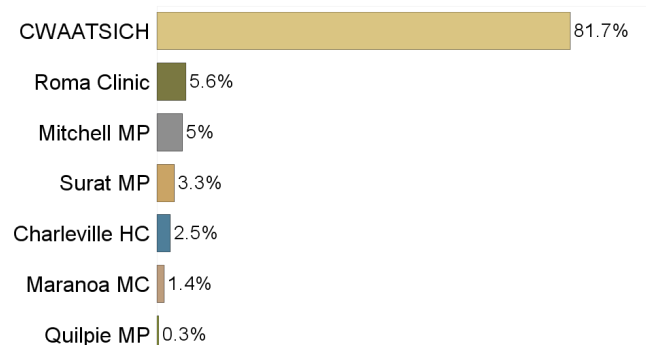
Referral Sources



Central West



South West

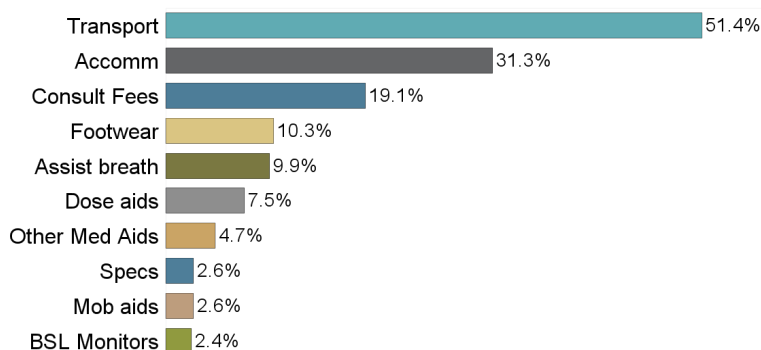


% Referrals Received from Non-AMS Referral Sources

Central West
107 (100%)

South West
66 (18.3%)

Reasons for Referrals



Med Aids
\$61,039
(50.3%)

Transport
\$41,329
(34%)

Other
\$19,102
(15.7%)

Phone: 1800 653 339 Fax: 07 4409 4510

Email: support@nukalmurra.com

phn
WESTERN QUEENSLAND
An Australian Government Initiative

Nukal Murra is supported by funding from the Australian Government under the PHN Program.

CWAATSICH

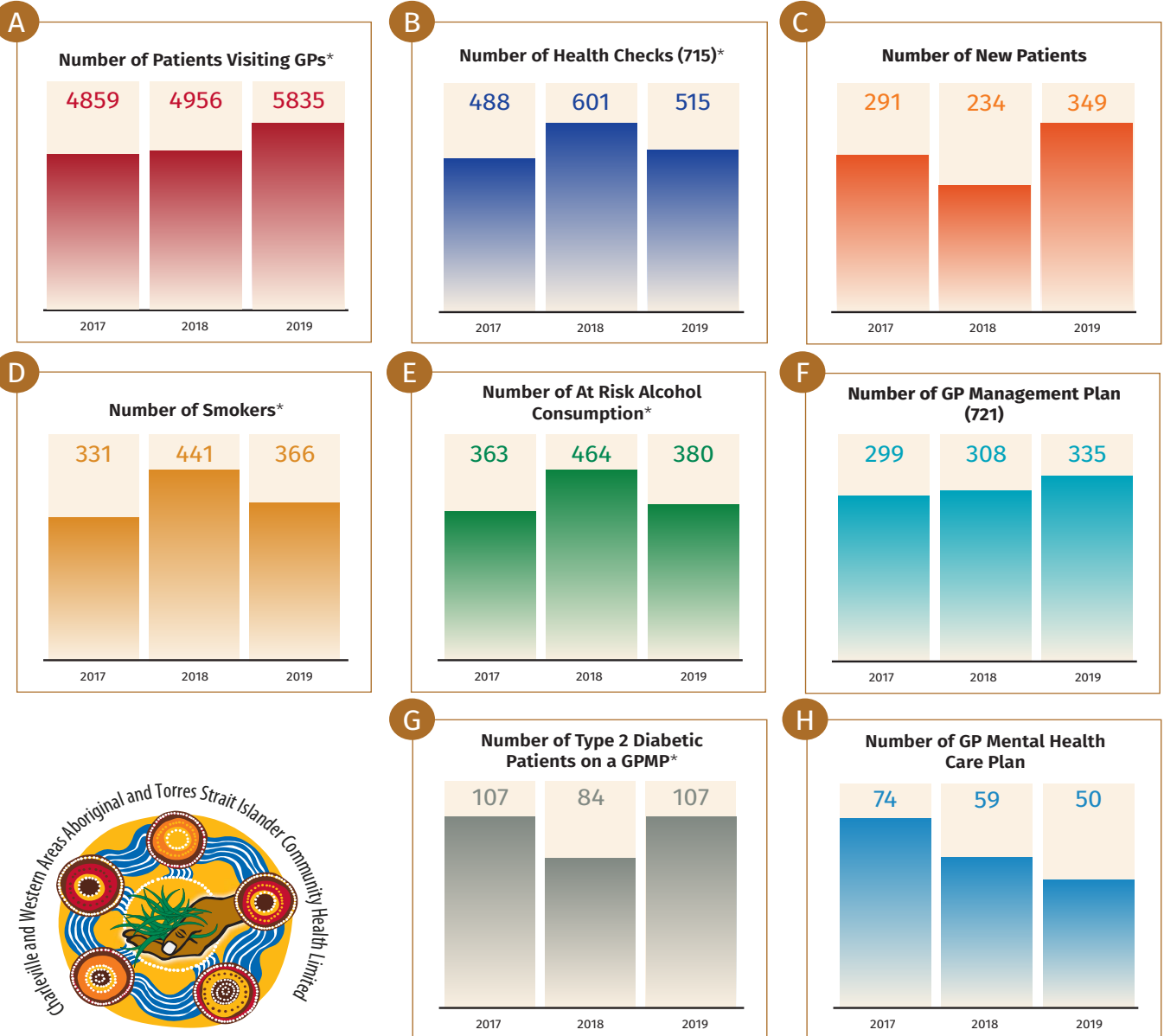
REPORT CARD

Organisational Health Check

Service Outcomes and Performance Summary 2017–2019

Like everyone who has a regular health check, at CWAATSICH we are committed as an organisation to our own health checks to let you know how we have been going over the past two years.

Clinical Services



CWAATSICH

Charleville and Western Areas Aboriginal and Torres Strait Islander Community Health Limited

Source: QAIHC Practice Aggregation Tool Clinical Audit Tool (PATCAT) and CWAATSICH Medical Director (extracted July 2019). PATCAT Extracts for July 2017, 2018 and 2019 audit month. Completed: 18 September 2019. Prepared by: Health Information Team, QAIHC.
*Regular patients: A patient who had three or more visits in the last two years, with one visit being in the last 6 months prior to the date of extraction and submission.



Charleville (Head Office)
94 Edward Street
Ph: (07) 4654 3277

Mitchell
46 Cambridge Street
Ph: (07) 4623 1011

Roma
60A Charles Street
Ph: (07) 4622 4237

Quilpie
49 Brolga Street
Ph: (07) 4656 1391



Corporate Services Manager Leah Wyman

WORKFORCE

With so many years in the business everything we do is tailored to a regional perspective and ensuring we have a high-quality health workforce. The company employs 41 staff.

An analysis of our workforce demographics suggests that we have an aging workforce.

Our succession plan ensures the company has the capacity to deal with workforce changes and we continuously review strategies to compete with the health workforce market.

The company established a partnership under the Stronger Rural Health Strategy to encourage doctors to deliver eligible primary health care services. This program recognises the difficulties faced in attracting and retaining doctors in remote areas. We currently have a registrar working in the Roma Service.

TRAINING & DEVELOPMENT

Human Resources coordinates our training and development programs to meet legislative and personal development requirements. CWAATSICH invests a substantial amount of resources to staff training and learning.

QUALITY ASSURANCE

As part of our quality management and improvement processes, we implemented AGPAL (Clinical) & QIC (Organisation) Accreditation in 2019. The company successfully met the AGPAL and QIC Accreditation standards.

I would like to thank management and staff for their pursuit of excellence, being passionate and dedicated to enhancing our services.

Leah Wyman
Corporate Services Manager



2018/2019 Financial Statements

Charleville and Western Areas Aboriginal and Torres Strait Islanders Community Health Limited

ABN: 84 826 588 748

Concise Financial Statements

30 June 2019

This concise financial report is an extract from the full financial report of Charleville and Western Areas Aboriginal and Torres Strait Islanders Community Health Limited. The financial statements and specific disclosures included in this concise financial report have been derived from the financial report. The concise financial report cannot be expected to provide as detailed an understanding of the financial performance, financial position and financing and investing activities of Charleville and Western Areas Aboriginal and Torres Strait Islanders Community Health Limited as the full financial report. A copy of the full financial report and auditor's report will be sent to any member, free of charge, upon request.

Charleville and Western Areas Aboriginal and Torres Strait Islanders Community Health Limited

ABN: 84 826 588 748

Contents

For the Year Ended 30 June 2019

	Page
Financial Statements	
Discussion and Analysis	1
Independent Audit Report	2
Directors' Declaration	4
Statement of Profit and Loss and Other Comprehensive Income	5
Statement of Financial Position	6
Statement of Changes in Equity	7
Statement of Cash Flows	8
Notes to the Financial Statements	9

Charleville and Western Areas Aboriginal and Torres Strait Islanders Community Health Limited

ABN: 84 826 588 748

Discussion and Analysis

30 June 2019

As required by Accounting Standard AASB 1039: *Concise Financial Reports*, the Directors bring the following matters to the members' attention.

Statement of Profit or Loss and Other Comprehensive Income:

- Revenue has increased by \$1,220,884 as a result of:
 - Increased operational funding of \$1,095,663;
 - Increased Medicare revenue of \$110,633; and,
 - Increases to other revenue balances of \$15,316.
- Other revenue of \$25,000 includes capital grants for consulting rooms.
- Expenditure has increased by \$1,226,835 mainly due to increased costs as a result of additional operational funding.
- Increase in surplus for the year of \$5,951 to a total surplus of \$554,060.

Statement of Financial Position:

- Current assets increased by \$1,062,910. This has been impacted by:
 - Increase in unspent funding held of \$340,181 to a total balance of \$1,536,106;
 - An increase in property, plant and equipment of \$391,898 which was funded by the company; and,
 - The surplus for the year.
- The increase in non-current assets of \$149,083 mainly relates to the finalisation at the Charleville building, less depreciation for the year.
- Current liabilities have increased by \$637,863 to a balance of \$2,349,908 mainly due to an increase in unspent funding.
- The company has a surplus of cash held over total liabilities held of \$2,746,848.

Statement of Cash Flows:

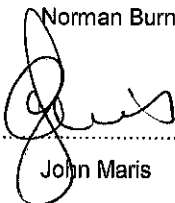
- Cash provided by operating activities has decreased by \$492,933, mainly due to additional operational funding received during the year
- Cash used by investing activities is a total of \$431,088, mainly due to the finalisation at the Charleville building.
- Cash increased by \$943,242 over the financial year.

The Board reiterates to members that the financial statements, specific disclosures and other information included in the concise financial report are derived from, and are consistent with, the full financial report of Charleville and Western Areas Aboriginal and Torres Strait Islanders Community Health Limited. The concise financial report cannot be expected to provide as detailed an understanding of the financial performance, financial position and financing and investing activities of Charleville and Western Areas Aboriginal and Torres Strait Islanders Community Health Limited as the full financial report. A copy of the full financial report and auditor's report will be sent to any member, free of charge, upon request.

Dated 25 September 2019

Director.....

Norman Burns

Director.....

John Maris

The accompanying notes form part of these financial statements.

Charleville and Western Areas Aboriginal and Torres Strait Islanders Community Health Limited

ABN: 84 826 588 748

Independent Audit Report to the members of Charleville and Western Areas Aboriginal and Torres Strait Islanders Community Health Limited

Report on the Concise Financial Report

Opinion

We have audited the accompanying concise financial report of Charleville and Western Areas Aboriginal and Torres Strait Islanders Community Health Limited, which comprises the statement of financial position as at 30 June 2019, the statement of comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, and related notes, derived from the audited financial report of Charleville and Western Areas Aboriginal and Torres Strait Islanders Community Health Limited for the year ended 30 June 2019 and the discussion and analysis.

In our opinion the concise financial report of Charleville and Western Areas Aboriginal and Torres Strait Islanders Community Health Limited for the year ended 30 June 2019 complies with Accounting Standard AASB 1039: *Concise Financial Reports*.

Basis for Auditor's 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 Company in accordance with the auditor independence requirements of the *Australian Charities and Not-for-profits Commission Act 2012* and the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 *Code of Ethics for Professional Accountants* (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.

Concise Financial Report

The concise financial report does not contain all the disclosures required by the Australian Accounting Standards in the preparation of the financial report. Reading the concise financial report and the auditor's report thereon, therefore, is not a substitute for reading the audited financial report and auditor's report thereon.

The Financial Report and Out Report Thereon

We expressed an unmodified audit opinion on the financial report in our report dated 25 September 2019.

Directors' Responsibility for the Concise Financial Report

The directors of the Company are responsible for the preparation of the concise financial report in accordance with AASB 1039: Concise Financial Reports and the *Corporations Act 2001* and the *Australian Charities and Not-for-profits Commission Act 2012*, and for such internal control as the directors determine is necessary to enable the preparation of the concise financial report.

Charleville and Western Areas Aboriginal and Torres Strait Islanders Community Health Limited

ABN: 84 826 588 748

Independent Audit Report to the members of Charleville and Western Areas Aboriginal and Torres Strait Islanders Community Health Limited

Auditor's Responsibilities for the Audit of the Concise Financial Report

Our responsibility is to express an opinion on the concise financial report, in all material respects, complies with AASB 1039: *Concise Financial Reports* and whether the discussion and analysis complies with AASB 1039: *Concise Financial Reports* based on our procedures, which were conducted with Auditing Standard ASA 810: *Engagements to Reporting on Summary Financial Reports*.



Benjamin Horner
Chartered Accountant; Registered Company Auditor
Director
McConachie Stedman Audit and Assurance Pty Ltd

Toowoomba

25 September 2019

**Charleville and Western Areas Aboriginal and Torres Strait Islanders
Community Health Limited**

ABN: 84 826 588 748

Directors' Declaration

The directors of the Company declare that:

1. The concise financial statements for the year ended 30 June 2019 is in accordance with the *Corporations Act 2001*, the *Australian Charities and Not-for-profits Commission Act 2012* and *AASB 1039 Concise Financial Reports*; and
2. The financial statements and specific disclosures included in this concise financial report have been derived from the full financial report for the year ended 30 June 2019.

This declaration is made in accordance with a resolution of the Board of Directors.

Director
Norman Burns

Director
John Maris

Dated 25 September 2019

Charleville and Western Areas Aboriginal and Torres Strait Islanders Community Health Limited

ABN: 84 826 588 748

Statement of Profit and Loss and Other Comprehensive Income For the Year Ended 30 June 2019

		2019	2018
	Note	\$	\$
Revenue	2	6,864,501	5,642,889
Other revenue	2	25,000	25,728
Employee benefits and related expenses	3	(4,012,770)	(3,392,708)
Auditor's remuneration		(35,170)	(32,560)
Depreciation and amortisation expense		(230,866)	(149,778)
Repairs, maintenance and vehicle running expenses		(229,851)	(208,774)
Service providers		(503,177)	(283,613)
Medical supplies		(361,587)	(266,491)
Health Promotion programs		(112,826)	(105,483)
Travel		(287,403)	(240,764)
Board expenses		(61,128)	(57,301)
Electricity and water		(47,796)	(46,395)
Insurance		(50,159)	(54,718)
Rental expenses		(47,415)	(47,826)
Cleaning expenses		(93,313)	(72,658)
Other expenses		(261,980)	(149,537)
Surplus for the year		554,060	560,011
Other comprehensive income:			
Revaluation changes for property, plant and equipment		-	-
Total comprehensive income for the year		554,060	560,011

The accompanying notes form part of these financial statements.

Charleville and Western Areas Aboriginal and Torres Strait Islanders Community Health Limited

ABN: 84 826 588 748

Statement of Financial Position

As At 30 June 2019

	Note	2019 \$	2018 \$
ASSETS			
CURRENT ASSETS			
Cash and cash equivalents		5,263,957	4,320,715
Trade and other receivables		229,029	134,120
Other assets		60,846	36,087
TOTAL CURRENT ASSETS		5,553,832	4,490,922
NON-CURRENT ASSETS			
Property, plant and equipment		4,469,449	4,320,366
TOTAL NON-CURRENT ASSETS		4,469,449	4,320,366
TOTAL ASSETS		10,023,281	8,811,288
LIABILITIES			
CURRENT LIABILITIES			
Trade and other payables		449,254	232,829
Employee benefits		364,548	283,291
Other liabilities	4	1,536,106	1,195,925
TOTAL CURRENT LIABILITIES		2,349,908	1,712,045
NON-CURRENT LIABILITIES			
Employee benefits		167,201	147,131
TOTAL NON-CURRENT LIABILITIES		167,201	147,131
TOTAL LIABILITIES		2,517,109	1,859,176
NET ASSETS		7,506,172	6,952,112
EQUITY			
Retained earnings		7,506,172	6,952,112
TOTAL EQUITY		7,506,172	6,952,112

The accompanying notes form part of these financial statements.

Charleville and Western Areas Aboriginal and Torres Strait Islanders Community Health Limited

ABN: 84 826 588 748

Statement of Changes in Equity

For the Year Ended 30 June 2019

2019

	Retained Earnings	Total
	\$	\$
Balance at 1 July 2018	6,952,112	6,952,112
Surplus for the year	554,060	554,060
Balance at 30 June 2019	7,506,172	7,506,172

2018

	Retained Earnings	Total
	\$	\$
Balance at 1 July 2017	6,392,101	6,392,101
Surplus for the year	560,011	560,011
Balance at 30 June 2018	6,952,112	6,952,112

The accompanying notes form part of these financial statements.

Charleville and Western Areas Aboriginal and Torres Strait Islanders Community Health Limited

ABN: 84 826 588 748

Statement of Cash Flows For the Year Ended 30 June 2019

	2019 \$	2018 \$
CASH FROM OPERATING ACTIVITIES:		
Receipts from customers	953,612	730,795
Receipt from grants	6,668,880	6,330,476
Other receipts	53,958	44,003
Payments to suppliers and employees	(6,348,299)	(5,301,614)
Interest received	46,179	63,603
Net cash provided by (used in) operating activities	<u>1,374,330</u>	<u>1,867,263</u>
CASH FLOWS FROM INVESTING ACTIVITIES:		
Proceeds from sale of plant and equipment	-	500
Payment of property, plant and equipment	(431,088)	(1,716,950)
Net cash used by investing activities	<u>(431,088)</u>	<u>(1,716,450)</u>
CASH FLOWS FROM FINANCING ACTIVITIES:		
Proceeds from borrowings	-	-
Net cash used by financing activities	<u>-</u>	<u>-</u>
Net increase (decrease) in cash and cash equivalents held	943,242	150,813
Cash and cash equivalents at beginning of year	4,320,715	4,169,902
Cash and cash equivalents at end of financial year	<u>5,263,957</u>	<u>4,320,715</u>

The accompanying notes form part of these financial statements.

Charleville and Western Areas Aboriginal and Torres Strait Islanders Community Health Limited

ABN: 84 826 588 748

Notes to the Financial Statements

For the Year Ended 30 June 2019

The financial report covers Charleville and Western Areas Aboriginal and Torres Strait Islanders Community Health Limited as an individual entity. Charleville and Western Areas Aboriginal and Torres Strait Islanders Community Health Limited is a Company limited by guarantee.

1 Summary of Significant Accounting Policies

Basis of preparation of the Concise Financial Report

(a) Compliance with Prescribed Requirements

The concise financial report is an extract from the full financial report for the year ended 30 June 2019. The concise financial report has been prepared in accordance with Accounting Standard AASB 1039: Concise Financial Reports, and the *Corporations Act 2001* and the *Australian Charities and Not-for-profits Commission Act 2012*.

The financial statements, specific disclosures and other information included in the concise financial report are derived from, and are consistent with, the full financial report of Charleville and Western Areas Aboriginal and Torres Strait Islanders Community Health Limited. The concise financial report cannot be expected to provide as detailed an understanding of the financial performance, financial position and financing and investing activities of Charleville and Western Areas Aboriginal and Torres Strait Islanders Community Health Limited as the full financial report. A copy of the full financial report and auditor's report will be sent to any member, free of charge, upon request.

(b) The Reporting Entity

The Company does not control other entities. The financial statements include the value of all income, expenses, assets, liabilities and equity for the Company as an individual entity.

(c) Underlying Measurement Basis

The historical cost convention is used unless otherwise stated.

(d) Other Presentation Matters

Currency and Rounding

Amounts included in the financial statements are in Australian dollars and are rounded to the nearest dollar.

Comparatives

Comparative information reflects the audited 2017-18 financial statements.

Current / Non-Current Classification

Assets and liabilities are classified as either 'current' or 'non-current' in the Statement of Financial Position and associated notes. Assets are classified as 'current' where their carrying amount is expected to be realised within 12 months after the reporting date. Liabilities are classified as 'current' when they are due to be settled within 12 months after the reporting date, or the Company does not have an unconditional right to defer settlement to beyond 12 months after the reporting date. All other assets and liabilities are classified as non-current.

Charleville and Western Areas Aboriginal and Torres Strait Islanders Community Health Limited

ABN: 84 826 588 748

Notes to the Financial Statements

For the Year Ended 30 June 2019

1 Summary of Significant Accounting Policies

Basis of preparation of the Concise Financial Report

(e) Accounting Standards Issued but not yet Effective and not been Adopted Early by the Company

AASB 15 Revenue from Contracts with Customers

This standard replaces AASB 118 Revenue, AASB 111 Construction Contracts and some revenue related Interpretations and:

- establishes a new revenue recognition model;
- changes the basis for deciding whether revenue is to be recognised over time or at a point in time;
- provides new and more detailed guidance on specific topics (e.g. multiple element arrangements, variable pricing, rights of return, warranties and licensing); and
- expands and improves disclosures about revenue.

The Company undertook a review of the future effect of the adoption of AASB 15 Revenue from Contracts with Customers. When this Standard is first adopted for the year ending 30 June 2020, there will be no material impact on the transactions and balances recognised in the financial statements.

AASB 1058 Income of Not-for-Profit Entities

AASB 1058 clarifies and simplifies the income recognition requirements that apply to not-for-profit (NFP) entities, in conjunction with AASB 15 Revenue from Contracts with Customers. These Standards supersede all the income recognition requirements relating to private sector NFP entities, and the majority of income recognition requirements relating to public sector NFP entities, previously in AASB 1004 Contributions.

Under AASB 1058, the timing of income recognition depends on whether a NFP transaction gives rise to a liability or other performance obligation (a promise to transfer a good or service), or a contribution by owners, related to an asset (such as cash or another asset) received by an entity.

This standard applies when a NFP entity enters into transactions where the consideration to acquire an asset is significantly less than the fair value of the asset principally to enable the entity to further its objectives. In the latter case, the entity will recognise and measure the asset at fair value in accordance with the applicable Australian Accounting Standard (e.g. AASB 116 Property, Plant and Equipment).

Upon initial recognition of the asset, AASB 1058 requires the entity to consider whether any other financial statement elements (called 'related amounts') should be recognised, such as:

- contributions by owners;
- revenue, or a contract liability arising from a contract with a customer;
- a lease liability;
- a financial instrument; or
- a provision.

These related amounts will be accounted for in accordance with the applicable Australian Accounting Standard.

The Company undertook a review of the future effect of the adoption of AASB 1058 Income of Not-for-Profit Entities. When this Standard is first adopted for the year ending 30 June 2020, there will be no material impact on the transactions and balances recognised in the financial statements.

Charleville and Western Areas Aboriginal and Torres Strait Islanders Community Health Limited

ABN: 84 826 588 748

Notes to the Financial Statements

For the Year Ended 30 June 2019

1 Summary of Significant Accounting Policies

Basis of preparation of the Concise Financial Report

(e) Accounting Standards Issued but not yet Effective and not been Adopted Early by the Company

AASB 16 Leases

AASB 16:

- replaces AASB 117 Leases and some lease-related Interpretations;
- requires all leases to be accounted for 'on-balance sheet' by lessees, other than short-term and low value asset leases;
- provides new guidance on the application of the definition of lease and on sale and lease back accounting;
- largely retains the existing lessor accounting requirements in AASB 117; and,
- requires new and different disclosures about leases.

The Company undertook a review of the future effect of the adoption of AASB 16 Leases.

Based on the Company's assessment, it is expected that the first-time adoption of AASB 16 for the year ending 30 June 2020 will have a material impact on the transactions and balances recognised in the Financial Statements, in particular:

- lease assets and financial liabilities on the Statement of Financial Position will increase by \$54,905 and \$54,905 respectively (based on the facts at the date of the assessment);
- operating cash outflows will be lower and financing cash flows will be higher in the Statement of Cash Flows as principal repayments on all lease liabilities will now be included in financing activities rather than operating activities. Interest can also be included within financing activities.

(f) New and Revised Standards that are effective for these Financial Statements

First time mandatory application of Australian Accounting Standards and Interpretations

AASB 9 Financial Instruments was applied for the first time in 2019. This standard introduces new categories for the classification of financial assets and new impairment rules that focuses on expected credit losses rather than incurred losses. The new standard does not impact on the classification of the Company's financial assets (cash and receivables), which will continue to be measured at amortised cost. Due to the value of receivables at 30 June 2018, any impact on adoption of AASB 9's new impairment model would not be considered material to the accounts of the Company.

Comparative figures for 2018 have not been restated for AASB 9.

Charleville and Western Areas Aboriginal and Torres Strait Islanders Community Health Limited

ABN: 84 826 588 748

Notes to the Financial Statements

For the Year Ended 30 June 2019

2 Revenue and Other Income

	2019	2018
	\$	\$
Recurrent grants received	5,796,656	4,700,993
Medicare refunds	783,665	673,032
HIC/PIP/CIR incentives	130,003	129,914
Other patient fees	28,362	21,624
Interest received	63,462	64,196
Rental income	1,473	4,909
Donations	1,818	-
Work Cover	4,034	2,211
Health assessments	1,070	2,007
Other revenue	53,958	44,003
Total Revenue	6,864,501	5,642,889

	2019	2018
	\$	\$
Other Income		
Capital grant received	25,000	25,728
Total Other Income	25,000	25,728

3 Employee benefits and related expenses

	2019	2018
	\$	\$
Wages and salaries	2,440,139	2,130,686
Workers compensation	19,551	19,903
Superannuation contributions	229,356	196,866
Staff training	54,569	66,562
Provision for employee entitlements	101,326	69,061
Doctors/Clinician	1,167,829	909,630
Total Employee benefits and related expenses	4,012,770	3,392,708

Charleville and Western Areas Aboriginal and Torres Strait Islanders Community Health Limited

ABN: 84 826 588 748

Notes to the Financial Statements

For the Year Ended 30 June 2019

4 Other Liabilities

	2019	2018
	\$	\$
DOHA - PHC Safety Support	193,595	-
WQPHN - Dietetic Support Program	3,000	-
WQPHN - Child Family Health	66,542	-
TIS & DC Healthy Lifestyle	87,989	-
DPMC - Children and Schooling	-	125,000
JCU GMT - Consultation Rooms	-	49,272
NDIS	739,123	555,000
UQ - Dreamt Project	-	23,233
Nukal Murra - Gidgee Healing	-	79,685
Nukal Murra - CACH	29,833	36,928
Nukal Murra - Goondir	2,453	23,301
Nukal Murra - Brokerage	80,000	-
Nukal Murra - SEWB	333,571	303,506
	1,536,106	1,195,925

5 Other Information

Goods and services tax (GST)

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

Receivables and payable are stated inclusive of GST.

The net amount of GST recoverable from, or payable to, the ATO is included as part of receivables or payables in the statement of financial position.

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

Critical Accounting Estimates and Judgments

The directors make estimates and judgements during the preparation of these financial statements regarding assumptions about current and future events affecting transactions and balances.

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

Income Tax

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

Charleville and Western Areas Aboriginal and Torres Strait Islanders Community Health Limited

ABN: 84 826 588 748

Notes to the Financial Statements

For the Year Ended 30 June 2019

5 Other Information

Dividends

There were no dividends paid or declared during the current or previous financial year.

Events Occurring After the Reporting Date

The financial report was authorised for issue on 25 September 2019 by the Board of Directors.

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



CWAATSICH

Charleville and Western Areas Aboriginal and Torres Strait Islander
Community Health Limited

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