



HEALTH SERVICE
ABORIGINAL CORPORATION

Annual Report

2023-2024



VISION STATEMENT

That Aboriginal and Torres Strait Islander people have the opportunity to live a healthy life.

For us this means connection to culture, family and community.

It means access to culturally appropriate, holistic primary and allied health care; social and emotional wellbeing services; and education that supports and sustains a healthy lifestyle.

MISSION STATEMENT

Wirraka Maya Health Service Aboriginal Corporation (WMHSAC) aims to promote the individual and community health assessments, education and primary health care. The service appreciates the role of the Aboriginal community members in caring for the health of their immediate and extended families, and are aware of and respect the diversity of Aboriginal culture within our service area.

WMHSAC recognises and acknowledges the important contribution that Aboriginal traditional healers make in improving the health and wellbeing outcomes of the community it serves; and strives to make the organisation responsive to cultural customs and traditions. The organisation also values the skills and experience of Aboriginal people in respect of the knowledge and local history they bring to the organisation as a whole.

Organisational Values



Respect

We treat everyone with courtesy and have regard for their dignity



Integrity

We always act with honesty and are accountable for our actions



Innovation

We encourage new and better ways of doing things



Leadership

We display and model positive influence towards others



Customer Focus

Our stakeholders are at the core of everything we do



Teamwork

We develop relationships which enable us to help one another

We continued to emphasise the importance of our organisational values by working from the agreed How We Work Together model.

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Chairperson and CEO Report

It is our pleasure to present the 2024FY Chairperson and CEO Report. This year has been marked by both challenge and triumph, with continued growth in services, client engagement, and organizational resilience. The following report outlines our key achievements, strategic milestones, and the ongoing challenges that we have faced as we work towards our vision of improving health outcomes for Aboriginal and Torres Strait Islander people.

Client Services: Growth and Impact

Over the past three years, we have seen a steady increase in clients seen, client contacts, and episodes of care. This growth reflects both our expanding service offering and the strong trust that our community places in our health services.

In particular, we are proud of the range of new services we've introduced, including:

- **Outreach Services to Strelley Community:** Bringing essential health care to this remote community.
- **SEWB Teams:** Providing services that span prevention to treatment, including Tackling Indigenous Smoking and mental health support in Yandeyarra and Marble Bar.
- **Dental Services:** Resuming this critical care during the reporting period.

These efforts underscore our ongoing commitment to addressing the complex health needs of our community and improving access to care for all.

Strategic Plan Achievements: 2019-2024

As we near the conclusion of our 2019-2024 Strategic Plan, we reflect on the successes across our four strategic themes:

- **Health of the Community:** We have continued to deliver high-quality services aimed at improving health outcomes for Aboriginal and Torres Strait Islander people. Our success is evident in the increased number of services we now offer, particularly in the areas of mental health and child and maternal health.
- **Workforce and Leadership:** The consistent operation of four doctors has been a significant achievement, providing much-needed continuity of care. However, workforce recruitment remains a challenge, which we have mitigated by engaging locum doctors and registered nurses.
- **Infrastructure and Systems:** Although we have faced challenges in securing funding for building expansion, we are grateful for the support we've received for the installation of solar panels at our Clinic and SEWB Centre, as well as all homes owned by WMHSAC. This sustainability initiative will reduce our electricity costs and contribute to our broader environmental goals.
- **Financial Sustainability:** Our Medicare revenue optimisation initiatives have resulted in an 18% increase in revenue, from \$747,720 in 2023 to \$882,084 in 2024. This growth underscores our focus on financial management and independence, with the recent purchase of staff housing being another testament to our financial stewardship.

New Funding Secured

We have secured new funding through the **Pilbara Aboriginal Health Alliance (PAHA) for the Culture Care Connect – Suicide Support Program** and the **Australian Family Partnership Program**. These initiatives will enhance the work of our Mental Health and Child and Maternal teams, providing additional resources to support the most vulnerable members of our community.

Challenges Faced

While we have experienced many successes, this year has not been without its challenges:

- **Recruitment:** Recruiting qualified doctors and nurses remains an ongoing issue. Despite this, we have managed to continue delivering quality care by employing locum staff when necessary.
- **Building Expansion Funding:** Despite submitting numerous applications through open funding rounds, we have yet to secure the necessary funding for our building expansion project. However, we continue to advocate for support from both state and federal governments, as well as from industry partners.

Advocacy and Stakeholder Support

Our advocacy efforts this year have intensified, as we seek further support from government and industry stakeholders. We are incredibly grateful for the funding we have secured for the solar panel installation project, which will make a lasting impact on our organization's sustainability.

Gratitude and Looking Ahead

We want to express our heartfelt thanks to our hardworking staff, who have shown unwavering commitment to the health and well-being of our clients. We are also deeply grateful to our clients for continuing to trust us with their health care needs.

As we look to the future, we remain hopeful and committed to continuing our mission to improve the health outcomes of our community. Together, with the support of our stakeholders, staff, and community, we are confident that we will face the coming years with the same strength, resilience, and determination that have brought us through this challenging but rewarding year.



Selina Stewart

Chairperson, Wirraka Maya Health Service Aboriginal Corporation



June Councillor

Chief Executive Officer, Wirraka Maya Health Service Aboriginal Corporation

Board of Directors



Selina Stewart
Chairperson



Nora Cooke
Treasurer



Alfred Barker
Vice Chairperson



Rowena Kitty Brown
Secretary



Doris Eaton
Board Member



Timothy Brahim
Board Member



Ashley Councillor
Board Member



Health Services

A dedicated team comprising of Doctors, Dentists, Nurses, ATSI Practitioners, and an Admin team (front desk staff, Liaison officers, and transport officers), all working collaboratively to meet the healthcare needs of Aboriginal and Torres Strait Islander people of Hedland and immediate surrounding communities.



New Patient Journey

In the quest to constantly improve how we deliver care to our patients, the Health Services Section's demountable beside the clinic houses two sections:

The Triage section is where all clients accessing the clinic are now required to pass through pre-consult screening before their scheduled appointment.

This involves the following vital observations such as;

- Blood pressure monitoring,
- Height and weight check,
- Glucose,
- HBA1c monitoring



As this is new and a big change for the community, not everyone coming to the clinic has embraced this change, as people don't understand why they have to pass through the screening section before their scheduled appointments.

The health services team continues to reinforce this new patient's journey with the hope that our clients will soon come to appreciate and familiarise themselves with this new patient's journey.

The Chronic Disease section has three consulting rooms, and a patient wait room for CD management. With space limitations within the clinic building affecting good chronic disease management, this space mitigates such limitations and gives the health services section the capacity to enhance chronic disease management from both the preventative aspect by championing completion of annual health checks, follow-up care and completion of GP Management plans.



General Practitioner

Meet the team of GPs who have dedicated their time to serving Hedland and its immediate surrounding communities. With only the Senior Medical Officer position recruited, the Health Services section operates on a locum model to ensure sustainability in the delivery of GP services to its client population. Despite operating on a locum model, the Health Services section has over time developed a pool of consistent locums who have made themselves available for most of this reporting period, operating at an average of four Doctors for most of this period.

Not only has maintaining a consistent pool of locum Doctors enhanced continuity of care but has also helped strengthen rapport and subsequently promoted patient engagement in scheduled appointments.

Maternal & Child Health Services

With an Aboriginal Midwife in the Maternal Health portfolio, Wirraka Maya boasts of meeting the cultural safety need in the delivery of Maternal Services across all its service delivery areas, providing comprehensive pre-conception, antenatal and postnatal care.

Postnatal care is provided from birth to 6 weeks postnatal. The Midwife works collaboratively with the General practitioners (GPs) in providing a comprehensive maternal service to Strelley and Warralong following previous adverse maternal outcomes in these outreach communities.

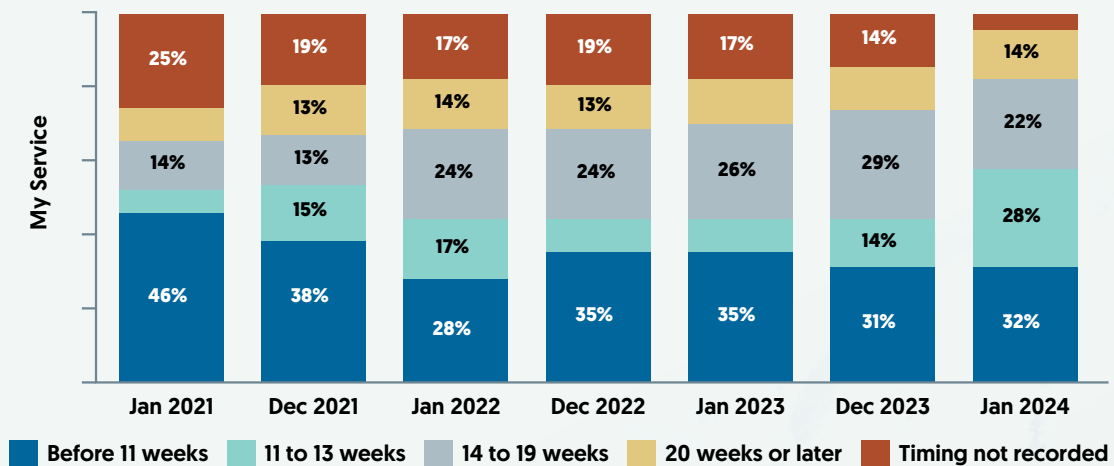
The Child Health Team works collaboratively with the Maternal team, GPs, and the visiting paediatricians from Hedland Health Campus. Child Health Services are

available to clients aged 0-16 years old. These include tracking a child's development and growth, and ensuring families are supported in their parenting journey.

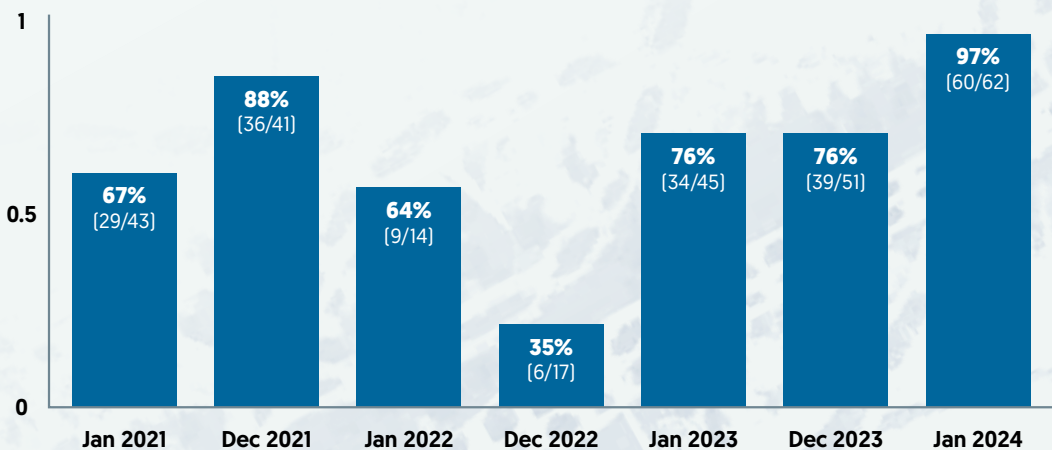
- Universal checks at 0-14 days old, 8 weeks, 4 months, 12 months, and 18 months old
- Immunisation service, following the National Immunisation Program, to ensure children receive their immunisations on time.

The Child Health team visits Warralong and Strelley, and during their outreach clinics, the team completes annual health checks, weight checks, immunisation, health education and allows the community to access a GP via telehealth if needed.

First antenatal care visit



Birth weight recorded > 1 visit



Dental Services

For a period following the height of the COVID-19 emergency, the WMHSAC dental unit was not functioning. Since the beginning of 2024, there has been a concerted effort to build the Dental Unit back up. The effort has focused on continuously staffing the unit with dentists and dental assistants, and on the acquisition of equipment and dental supplies for commonly requested procedures.

The dental unit is now active in providing services such as diagnostic dentistry, preventative care, restorative (fillings), first-stage root canals, and surgical extractions. There is a need for further expansion of dental services in the areas of periodontics, paediatric dentistry, preventive dentistry, dental health education, and the expansion of services to remote communities.



Timeslot Analysis Data

Providers	Booked Pts			Seen Pts			DNAs		
	Jun 22	Jun 23	Jun 24	Jun 22	Jun 23	Jun 24	Jun 22	Jun 23	Jun 24
GPs	8256	9104	11661	7469	7529	9703	784	875	1969
Paediatrician	245	161	123	219	138	104	26	23	19
Dental	241	0	31	230	0	25	11	0	6
Podiatrist	25	47	108	16	35	69	9	12	39
Optometrist	189	252	250	115	177	170	74	75	80
Treatment Room	3120	2996	2848	2402	2675	2398	528	321	450
Audiology	60	84	78	34	44	58	26	40	20
Physiotherapist	77	32	75	71	29	66	6	3	9
Dietitian	48	28	30	47	20	27	1	8	3
Diabetic Educator	67	13	69	64	7	54	3	6	24
Child Health	145	289	810	95	242	576	50	47	234
Maternal Health	263	117	373	234	81	276	29	36	97
Women's Health	0	0	212	0	0	172	0	0	40
Chronic Disease	359	844	672	243	627	429	126	217	243
Hospital Transport	257	300	196	110	77	25	147	223	171
Totals	13352	14262	17536	11349	11681	14152	1820	1886	3404



PATS Services

As a funded subsidiary of WACHS' Patient Assisted Travel Scheme (PATS), Wirraka Maya's PATS services provide a culturally safe and familiar environment for all its clients to seek support in this area. Faced with the challenges of accessing WACHS PATS support as there is currently no physical office where clients can go for support other than telephone support, Aboriginal and Torres Strait Islander clients find Wirraka Maya PATS services helpful in supporting them to attend their specialist appointments. Our Liaison Offer works with the clients across the entire process from completion of PATS forms to even ensuring that the patient gets on the flights to their appointment.

As of 30 June, Wirraka Maya PATS services assisted 62 attend their specialist appointment outside South Hedland and out of the assisted clients, a proportion of 96% of randomly surveyed clients reported an improved understanding of PATS.



The Transport Team

Our Transport team is the face of client engagement with their role stretched across pickups and drop-offs of all patients needing transport support to either attend scheduled appointments at Wirraka Maya or specialist clinics at Hedland Health Campus medication drop-offs for routine Webster packs or prescribed medication following telehealth appointments.

The transport team completed a total number of 2764 occasions of transport services to its clients, out of which a proportion of 89% of randomly surveyed clients reported that Wirraka Maya transport support encouraged them to attend their scheduled appointments.

Telehealth Services

As part of the transition from the COVID-19 Pandemic, telehealth has now become part of our core service delivery model, with all Drs taking a mix of face-to-face and telehealth appointments daily.

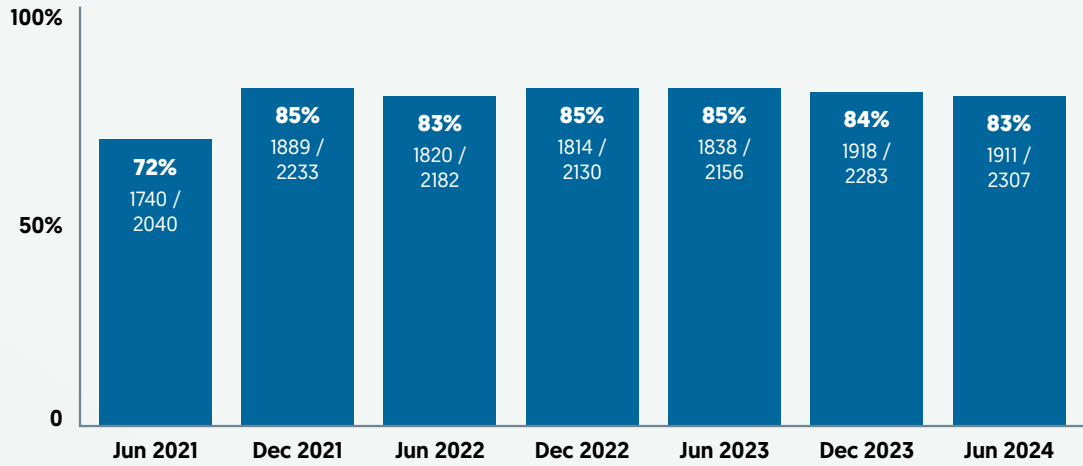
The Health Services Section has had 701 clients consulted via telehealth in this reporting period.

The Front Desk Team

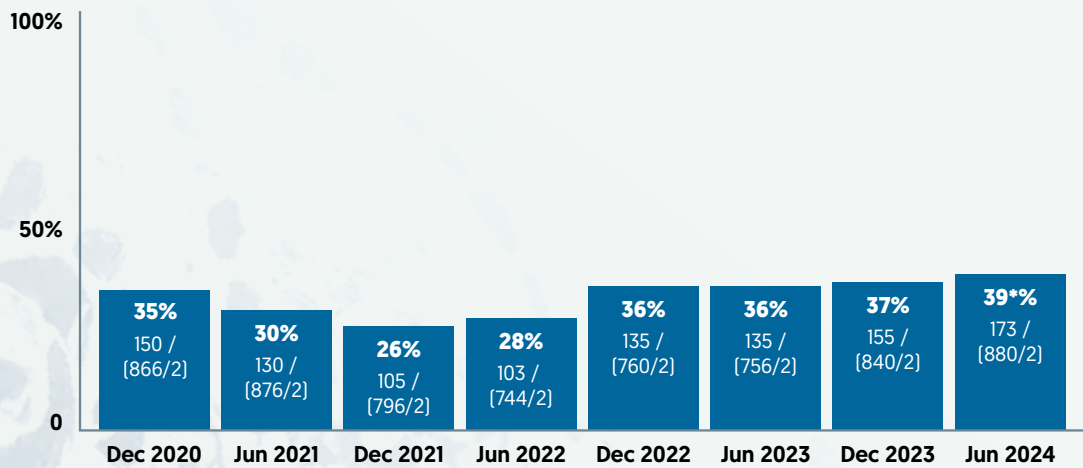
As the face of health services operations, our front desk team plays a pivotal role in coordinating the patient's journey; from appointment booking to coordinating transport and ensuring that the patients are attended to on scheduled appointment dates.

Preventative Health Summary

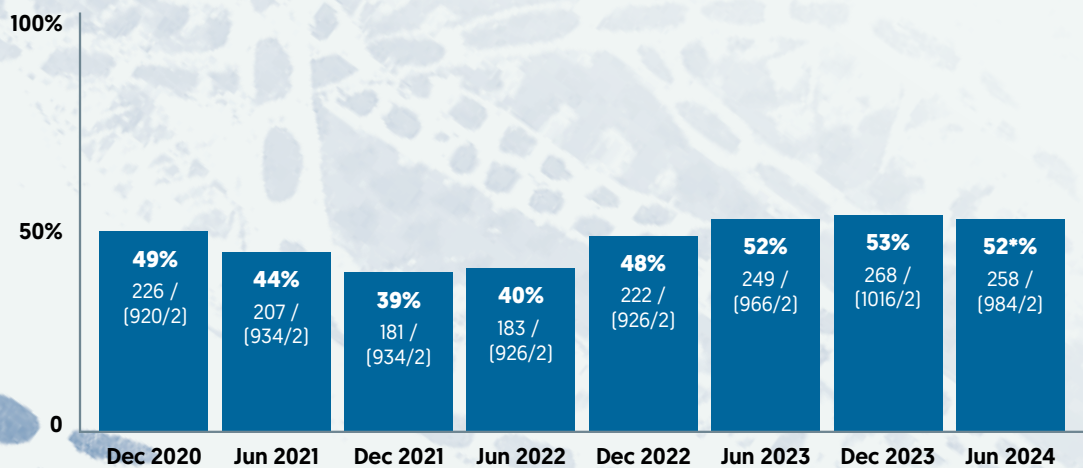
Smoking status recorded - within previous 24 months



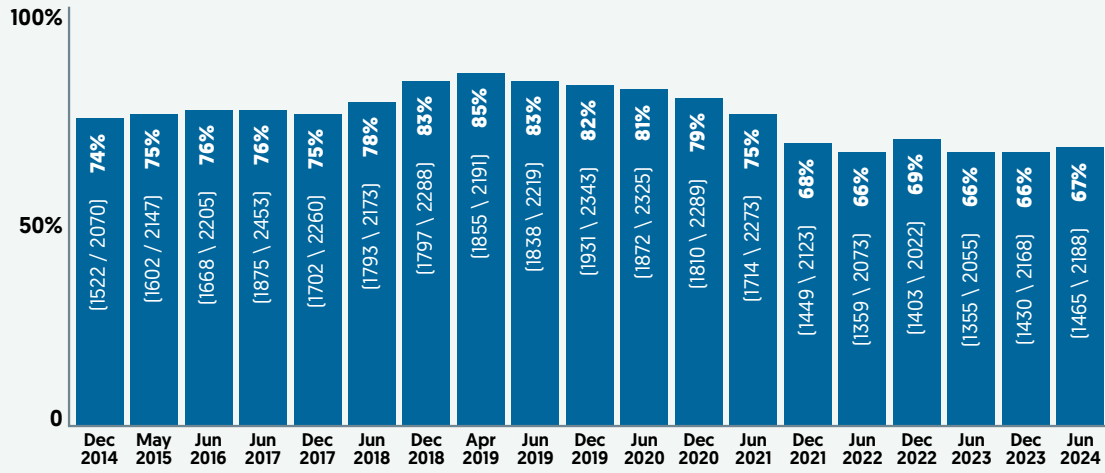
Health Assessments - 15-24 years comparison



Health Assessments - 55 years comparison

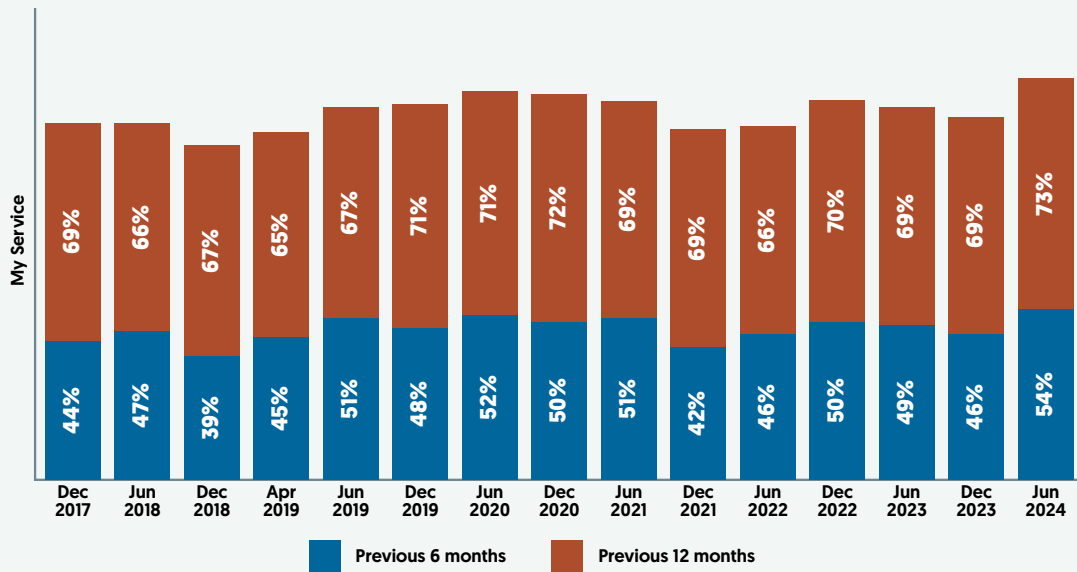


Alcohol consumption recorded



Chronic Disease Management Summary

HbA1c recorded





Social and Emotional Wellbeing (SEWB)

Wirraka Maya's SEWB offers a blend of experienced interdisciplinary social health and counseling professionals focusing on a vast range of social issues and offers tailored support to fit. We provide and teach our clients with quality care and services that reduce stress, anxiety, and depression while reinforcing effective coping skills, inner strength, and overall sense of well-being.

Our professionals actively involve our clients in solving their presenting problems and issues. Our goal is to provide targeted social services that meet the needs of the community. Supporting a healthy lifestyle both physically and mentally and making better, healthier choices.

Our well-being centre runs several social and emotional well-being health outreach programs.

SEWB Programs

Healthy Transition to Adulthood

HTTA's vision is designed to deliver a range of educational courses and workshops to increase health literacy amongst youth aged 9-24 years to improve and reduce risky behaviours related to drugs, alcohol, and tobacco use, their social well-being, and their connection to culture.

Good News Stories

HTTA School holiday programs have helped school children increase their knowledge of social and emotional well-being factors and how to implement them into their lives whilst building confidence, teamwork skills, and resilience.

HTTA has delivered 50 group sessions and reached 303 clients as of June 2023-2024, with a total of 435 attendees proven to have increased knowledge of positive behaviour.

Tackling Indigenous Smoking

- TIS Support workplaces and homes to be smoke & vape free
- Provide education sessions at local schools & community groups
- Raise awareness around tobacco & vaping use.

- Our target audience is pregnant mums, young people & remote communities.
- Promote the TIS program at community events
- Smoking cessation referrals are directed to the clinic
- Collaborate with SEWB Programs & events as well as external stakeholders.
- Referrals to Quitline for individuals to help and support to quit smoking

TIS has delivered the following group sessions in 2023-24

Tum to Tots Sessions	21
Yaandina workshop	45
Pop up stalls	11
Collaborations	22
Community Event hosted and run	1
School Education Sessions	3

Good News Stories

Visits to Karlarra House received positive feedback from all the staff and residents at Karlarra House Aged Care Facility and were beneficial to the residents.



Community Outreach Wellbeing

- Liaise with Aboriginal & Torres Strait Islander people in South Hedland and surrounding communities (Warralong, Marble Bar, Goodabinya & Yandeyarra)
- Advocate for clients of the community
- Provide mentoring, and social & emotional support including grief
- Involvement in healing practices (e.g. yarning circle, Women & Men's business)
- Community Engagement & Health Promotion
- Liaise with internal and external stakeholders where appropriate.

Counselling Services/ Psychologist

- SEWB Holistic Counselling services
- External & Internal referrals
- Psychosocial assessment
- Pilot counselling services to community schools & residents; Marble Bar, Warralong, and Yandeyarra
- Psychologist (Mental illness – Behavior of management) clinical & SEWB
- Referrals service with Pilbara Mental Health / Correction Services/Clinical Referrals/walk-ins.
- Counselling Service to South Hedland Communities
- Clients range from Children-Elderly

SEWB Counselling Services	Female	Male
Administration services/ assistance (including non-contact)	564	376
Individual Clients	110	70
Counselling Services	334	239
Providing support	113	18

Community Support

- Providing support letters/Housing application assistance
- Support client's needs for legal assistance support
- Referrals for other external agencies
- Assistance in completing documents for clients
- Providing transport for appointments
- Advocating for clients in the Clinic

Pilot Program

The Pilot Program (Community Wellbeing Outreach Team) has been well underway in 2023-2024 financial year. With a diverse professional team comprising an Aboriginal Liaison Officer, Aboriginal SEWB worker, two professionally trained counsellors and a project administrator, the team have expanded their reach to Yandeyarra, Warralong and Marble Bar/Goodabinya to promote positive wellbeing in the community and community schools. They have also provided support to families and individuals in the Hedland and surrounding areas with at home visits and outdoor yarns a key component of reducing access barriers.

The aim for the financial year was to provide increased access to person-centred counselling support and therapeutic yarning through education, community engagement, health promotion activities. Positive social and emotional wellbeing outcomes, supporting families to live healthier lives and thrive in the communities in which they live were key drivers for the program. Overall, the year saw a marked increase in client numbers and episodes of care.

The women's group continued this year and the men's support group is scheduled to commence in September 2024 which will incorporate a range of psychoeducation and outdoor based group activities.

The Pilot Program partnered with the Marble Bar Community Resources Centre, community schools in Yandeyarra and Marble Bar, Pilbara Mental Health (South Hedland Hospital), alcohol and other drug services, Adult Community Corrections and other agencies around Hedland to ensure wrap around care and enhance referral pathways.

The Community Wellbeing Outreach team works under the Aboriginal Community Controlled Health Service (ACCHS) social and emotional wellbeing model of care which is modelled and underpinned by eight fundamental dimensions of health and wellbeing (See Figure 1). This means that our team acknowledges the importance of connections to land, culture, spirituality, family and community on the wellbeing of Aboriginal peoples. We look forward to continuing to increase the reach and access to wellbeing support for people living in and around Hedland.



Good News Stories

The community outreach team were delighted to join and support Yandeyarra Remote Community School on their on-country excursion as part of their work in the community. Students completed language and science lessons outdoors before trying their luck at fishing. This was a great experience to support positive social skills development and healthy peer relationships through structured and unstructured play. We continue to partner with Aboriginal communities and families as well as remote schools in delivering education, therapeutic yarning and other activities that improve social and emotional wellbeing outcomes.





National Disability Insurance Scheme (NDIS)

Service Engagement

Chronic Disease Tracking

We do not track clients by chronic disease; our focus is on program participation.

NDIS Support

Assisted over 100 participants with NDIS support coordination and engaged many community members through RCC and NSPM programs, including at community events.

Success Stories

Reintegration

Participant who has successfully reintegrated back into their community in supported living accommodation. Enrolled into several TAFE courses and supported to engage in regular OT services, Positive behaviour supports and working towards becoming a mental health advocate motivational speaker.

Mobility Enhancement

A New powered wheelchair provided increased independence.

OT Services Access

Participant completed functional capacity assessment after overcoming significant barriers.

After 4 years on a waitlist and endless attempts to engage a participant in OT services, they have successfully engaged in multiple sessions and now have a completed functional capacity assessment. This is thanks to perseverance, dedication, commitment, and successful collaboration with positive relationship building with multiple providers in town.

Complex Needs Support

Developed a goal-oriented plan for a participant with complex needs, resulting in significant life improvements.

Building a strong and positive relationship with a participant who has complex needs and being able to work together to create a goal-orientated future with services and supports in place to have a positive and life-changing impact on their future moving forward.

Functional Capacity Improvement

Assisted participants in accessing services leading to improvements in independence and quality of life.

Several participants with demonstrated limitations in functional capacity have been supported to access the services that will support goal achievement, and it has been a life changing experience for the participants and their families. The participants are now being supported to regularly engage in all supports to work towards capacity building, routines and independence and there is evidence of significant improvement in these areas.

Community Support

Helped with housing, payments, and daily tasks, enhancing functional capacity.

Community members are supported with housing, payments, rehab admissions, and completing daily living tasks as required, to support increased functional capacity and independence.

Program Importance

RCC Program: Bridges gaps in NDIS conversations and support.

Specialized Coordination: Addresses complex barriers to appropriate supports.

Psychosocial Recovery Coaching: Empower individuals with mental health disabilities.

Local Coordination: Ensures participants maximize NDIS plans through personalized support.

Community Connection: Enhances access to healthcare and skill development.

NPSM Program: Provides critical support for those facing mental health challenges.

Positive Changes

Comprehensive Support: End-to-end assistance with NDIS and service coordination.

Participant Engagement: Increased acceptance and collaboration due to personalized, strengths-based support.

Service Options: More new providers offering greater choice.

Awareness and Trust: Increased community engagement and positive feedback.



Corporate Service Team

Our Corporate services department plays a vital role in providing essential support to the Health Clinic, Social & emotional well-being, NDIS, and all other staff assigned with programs. This department comprises five valuable units including Administration, Compliance & CQI, Human Resource, Health Promotion, and Finance. Each team member plays a crucial role in ensuring the smooth operation of the organisation.

Administration

Our administration officer is professionally trained staff and delivers various services, including:

- Management of vehicle maintenance, overseeing scheduled maintenance, servicing, and repairs of all WMHSAC motor vehicles.
- Collaborate with business partners & contractors regarding WMHSAC administration activities
- Management of purchase orders and stationery orders, and upkeep of the asset register for all WMHSAC equipment, alongside maintaining the key register for WMHSAC buildings and vehicles.
- Oversees property maintenance and management of all WMHSAC and privately leased properties.

Compliance & Continued Quality Improvement

Wirraka Maya Health Service Aboriginal Corporation (WMHSAC) is dedicated to delivering high-standard services to our community, supported by multiple accreditations that reflect our commitment to quality, safety, and compliance.

We hold accreditations with AGPAL, QIC, RTO, and NDIS, each of which aligns with specific standards essential to our operations.

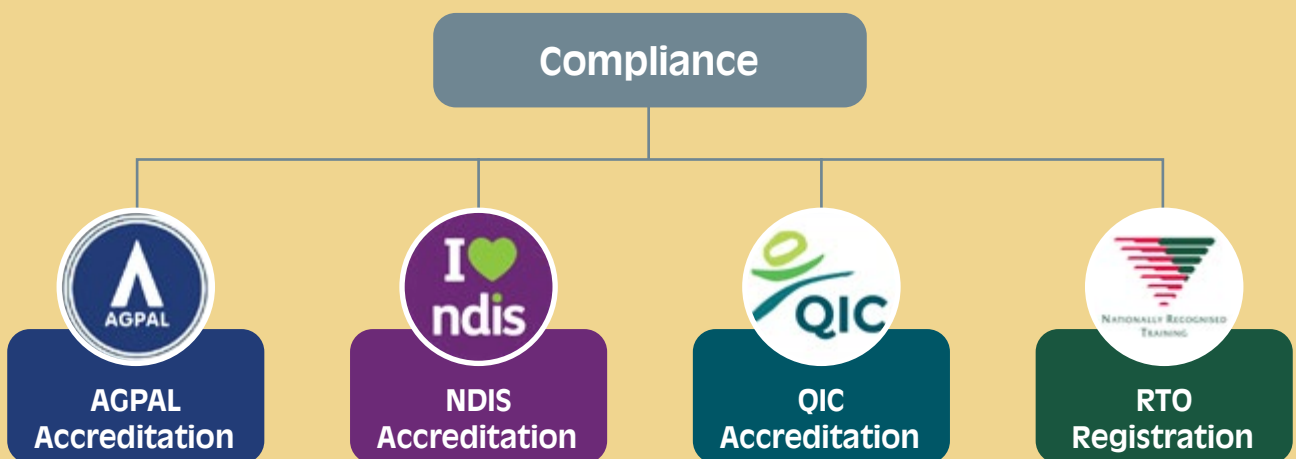
- 1. AGPAL Accreditation** – Our services are accredited against the RACGP Standards (5th edition), which ensures we meet rigorous general practice standards.
- 2. NDIS Accreditation** – We comply with the National Disability Insurance Scheme Practice Standards and Quality Indicators (2021), enhancing the support and services for individuals with disabilities.
- 3. QIC Accreditation** – Our adherence to the QIC Health and Community Services Standards (7th edition) assures the quality of our health and community service programs.

- 4. RTO Registration** – While we are not currently delivering training, our Registered Training Organisation (RTO) status enables us to provide accredited training services, and we are actively working to commence this soon.

Each accreditation requires us to undergo thorough reviews every three years. During these assessments, onsite auditors verify that we meet all mandated standards, reinforcing that WMHSAC is maintaining best practices and offering exceptional care.

Additionally, we are actively pursuing Mental Health accreditation against the National Safety and Quality Mental Health Standards for Community Managed Organisations. This new certification will further validate our commitment to mental health services within our community.

Through these ongoing accreditations, WMHSAC demonstrates our dedication to high-quality, compliant, and community-focused care, ensuring we consistently meet and exceed the standards expected of us.



Human Resources

Our HR department is responsible for managing, assisting and dealing with all employees related matters such as:

- Employment issue
- Managing and updating personnel file
- Making sure we have all the copy of require document for each employee
- Training & Development
- Maintain and help with the storing & assigning company asset to the employee
- Advertise & recruitment prosses
- Review the HR policy and make sure everyone is aware with the updated
- Requesting locum doctors

HR Department Achievements

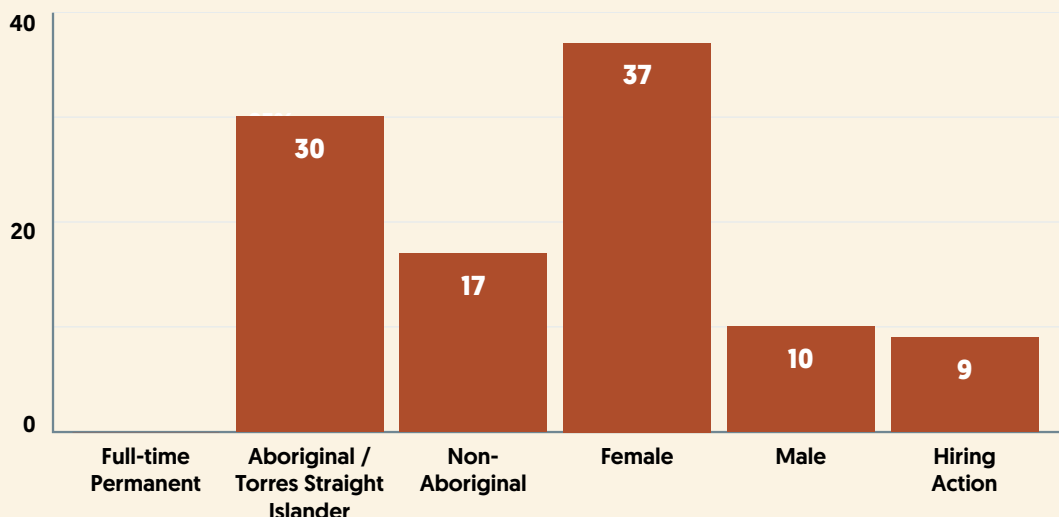
- Aligned all HR policies and employment contracts with current legislation following significant changes.
- Recruited and appointed the following vacant positions between June 2024 – October 2024:
 - TTA Project Officer x 2
 - Family Partnership Worker
 - Aboriginal Registered Nurse
 - Aboriginal Health Practitioner
 - Sexual Health Nurse
 - SEWB Manager

- Streamlined processes between HR and payroll for greater efficiency and accuracy.
- Reviewed and optimised the recruitment process, strengthening compliance, efficiency, and providing better support to senior management.
- Appointed an HR Administrator to manage day-to-day tasks, improving responsiveness and support.
- These updates have enhanced service delivery, creating a more cohesive and efficient HR function.

HR Goals for 2024/2025

- Implementing Employment Hero (EH) to digitize and automate onboarding and offboarding processes.
- EH will streamline manual tasks, enhance document management, and act as the central source of employee data.
- Prioritizing a collaborative culture, ensuring team members actively embody the company's values.
- Continuously improving HR forms to ensure a smooth onboarding, offboarding, and overall employment process.
- Expanding the Employee Assistance Program (EAP) and collaborating closely with management to achieve the goal of increasing the number of permanent staff.

Current full-time staff & recruitment progress chart as per 23rd October 2024





Health Promotion

Our Health promotion participates and facilitates a range of healthy lifestyle-related activities and information sessions. Promote well-being within the community, and raise awareness of health issues and behaviors that positively impact upon the health outcomes of the community members. This is achievable by working with the management team and working in consultation with internal stakeholders and staff to coordinate the planning, development, monitoring, and implementation of health promotion programs, strategies, and projects in the community.

HPO Accomplishments

WMHSAC Active Feeds Program	50+
Primary school engagement with Clontarf Academy in collaboration with HP WACHS	30+ students
<ul style="list-style-type: none"> • South Hedland Primary School • Baler Primary School • Cassia Primary School 	

Social media insights

Content Title	Reach	Engagement
R U OK BBQ Breakfast & Yarn Day	982	261
Men's Health	130	6
Breast Cancer awareness month	1,054	59
Men's Support Group – Fishing Trip	1,531	36
School Holiday Activities	3,063	269
Promoting overall health in collaboration with Shukr wellbeing for WMHSAC		72

Events Committee

The year 2023-24 has again been marked by multiple outstanding and wonderful successful events.

Our WMHSAC events committee has always exerted additional effort to ensure that our events are signified and presented with high quality and competency, aiming to provide the best possible outcomes for our community. Our events committee team consists of various members, with each member bringing unique ideas and resources to improve and enhance every event.

Throughout the year, we plan and organise various

awareness days as a cooperative effort to demonstrate our support for illnesses such as breast cancer, lung cancer, mental illnesses, and tobacco awareness. This initiative is aimed at showcasing our knowledge and team spirit with those facing health challenges within our community.





Breast Cancer Awareness Month

Is a global healthcare event for the awareness of Breast Cancer which is reminisced for the entire month of October each year. Our different departments within WMHSAC such as Social & Emotional Wellbeing, NDIS, and Administrative Services host the BCA each week in October in the hope of educating our women on the best prevention and increasing their knowledge of the risk factors of breast cancer.

R U OK Day

In September this year, Wirraka Maya celebrated R U OK Day and Yarn Day by cooking BBQ Breakfast for the Community at the South Hedland Town Square. This celebration has brought people together to socialize and helped the community understand their important role in looking out for their family & friends, and colleagues.



NAIDOC

Celebrating NAIDOC is our most significant annual event to celebrate history, culture, and achievement. This year was the most memorable and the best celebration we have ever hosted despite facing a few challenges. The event was well attended and appreciated by hundreds of people. NAIDOC celebration was successfully executed, and the event received a lot of positive feedback from the community. The event featured live

band and entertainment by Torres Strait Islander dancer Meriba Buay Dancers, and various activities for our children. Orontide provided free BBQ for all, EPIC and Dept of Communities, Gumala 3A learning Centre, Yaandina, Rehabilitation Centre, FMG, Mackillop Family Services, Bloodwood Tree Association, TOPH, and Elite family daycare are amongst the stall holders who supported our event.





Emma Cupps



Mel Host



Liz Pousima-Paea



Phillip Bowie



Rikki-Lee Walker



Tamara Jones

Safety Audit Risk Committee

The Safety Committee have had a busy year, aiming to increase the awareness of health and safety issues amongst Wirraka Maya staff and visitors by developing strategies to make our work environment compliant, safe and healthy.

Promoting compliance with health and safety regulations with an added focus of staff wellbeing and mental health, the team have completed psychosocial hazard training and are focusing on mitigating risks associated with psychosocial hazards and psychological harm.

We have introduced a new duress alarm system and training to provide our staff with a rapid means of calling for assistance during emergencies.

By providing a forum for employees and management to work together to solve health and safety problems we have implemented change to our carpark allocation to cater for our more vulnerable clients to easily access the new Chronic Disease Building.

The team have designed and painted the rainbow safety crosswalk to connect both SEWB and Clinic buildings to allow clients and patients safe crossing.

Our focus remains on addressing safety concerns raised

by employees, fostering a positive safety culture within the organisation and ensuring all staff feel comfortable raising safety concerns. With the implementation of regular workplace inspections and risk assessments conducted by the committee has allowed us to proactively identify potential hazards before they escalate into accidents or illness.

We have worked in collaboration with the clinic team to come up with creative solutions to increase confidentiality with consultation noise reduction, new comfortable and safe furniture and initiative ideas in our new Chronic Disease building to ensure the safety of our staff and patients.

The committee have a few exciting projects in the works to positively impact workplace culture by fostering teamwork, trust, increased collaboration and a greater adherence to safety procedures.

Inspiring Employees



Helen Edwards (19 years)

Clinic Coordinator

What are the changes at WMHSAC since you started?

I have seen Wirraka Maya grow in the many years I have been here, with our program with children and mothers. I have seen many staff come and go, but a lot more programs are good and some still developing.

What do you like about working at Wirraka Maya?

Being here for 19yrs I have met a lot of staff and good friends; and a lot of changes in the clinic. I like looking after our clients and making sure they get good health and well-being.

What are the reasons you come to work?

I love working at Wirraka Maya and working in the clinic and sharing my knowledge with other staff.

What do you hope to see in the future?

I would like to see our new building up and running. See a lot more support for our Aboriginal people in this country and more education on health issues.



Veronica "Boorie" Edgar (17 years)

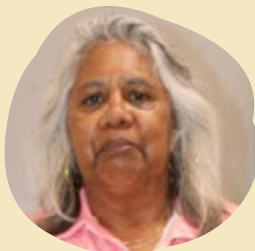
Social & Emotional Wellbeing Centre Receptionist

What are the changes at WMHSAC and what do you like about working here?

When I started in 2007 Dr. Burton was the only doctor at AMS who would see twenty-five patients a day because he knew a lot of them. But the change now is that we have more doctors. I like working at AMS getting to know a lot of people and Doctors and other specialists and making friends with a lot of them. I enjoy working and I work because I must work to survive.

What do you hope to see in the future?

I hope to see the new clinic building getting built. I would like to see local staff get more benefits rather than people who use AMS as a steppingstone for employment elsewhere. Advertise things on paper that are happening at AMS instead of advertising on social media, as a lot of people don't deal with Facebook especially people living in communities. Also, have better arrangements to see the Doctor.



Joyce Oxenham (10 years)

Tackling Indigenous Smoking Project Officer

What Do you hope to see in 3 years at WMHSAC?

I hope to see the new building

What are the changes at WMHSAC since you started?

There are more new staff since I first started since 2015.

What are the reasons you like to come to work at WMHSAC?

I like to come to a happy environment, and I love working and mingling with our Wirraka Maya staff



Jenela Bascug (14 years)

Former DA | Health Promotion Officer

What are the changes at WMHSAC since you started?

The preliminary assessment framework has advanced, and patient care has never been better because there are now more GPs, nurses, and AHPs. Scheduling appointments are now available in communicate as opposed to when I first started in 2010, patients would be in a queue, "first come first served"

Telehealth can now be performed, and electronic prescriptions are now available, safe and convenient. There are also more community engagement and outreach programs

What is your future goal?

The ultimate goal of HPO is to improve the health outcomes and wellbeing in populations and communities. Enhance a health system to prevent disease and improve early intervention. I hope to empower younger generation and communities to choose a healthy behaviour and lifestyle so they can increase their control over their health. Address and help prevent the core causes of ill health, reduce disparities and ensure everybody have equal opportunities in health so they can remain healthy for as long as possible.



Elizabeth Pousima-Paea (11 years)

Chief Operating Officer

What do you hope to see in the next five years?

As a Chief Operating Officer at Wirraka Maya Health Service, I would envision focusing on creating a robust, client-centered environment, prioritizing access to quality healthcare, and driving sustainable growth. Here are some specific areas of improvement that could set a positive course for the next five years:

Enhanced Community Engagement: Establishing deeper connections with the community to ensure that services are aligned with their evolving needs. This could involve expanding outreach programs, promoting health literacy, and incorporating more culturally informed practices in service delivery.

Operational Efficiency: Streamlining processes through technology and data analytics to make service delivery more efficient. This might involve implementing a more integrated health information system that supports real-time tracking, quality assurance, and performance management.

Continuous Quality Improvement (CQI): Building on CQI practices to consistently assess and enhance service quality. By routinely analysing performance metrics and feedback, we could identify areas for improvement and ensure that we meet or exceed compliance requirements for funding and contract obligations.

Staff Development and Retention: Cultivating a work environment that attracts and retains talented professionals, especially those with expertise in Indigenous health. This could include investing in training programs, offering clear career pathways, and ensuring our workforce reflects the diversity of our community.

Financial Sustainability and Resource Optimization: Securing diverse funding sources and managing resources effectively to support long-term sustainability. This could mean exploring grant opportunities, partnerships, or revenue-generating services to create financial stability.

Expansion of Services: Increasing the range of healthcare and social services to support holistic health, possibly expanding into mental health, family support services, and substance abuse counselling. These expanded services would enable us to address social determinants of health more effectively.

New Staff



Gita Clarke

Human Resource Officer

What do you like about working with WMHSAC?

I like to interact with people within the organisation, and I love how I get the chance to build and nurture company cultures, solves problem and learn new skill whilst on the job, and of course the most important is having a great team to work with.

What is the reason you come to work?

Because I found out that feeling professionally fulfilled is important for me, learning new things, earning respect, and being independent, at the same time helping provide for my family.

What do you hope to see in the near future?

I hope to see great teamwork, good company culture.



Nancy Tapim

ATSI Health Practitioner

What do you like about working with WMHSAC?

Going to communities like Strelley and Warralong, Meeting new families and coming to work every day

What do you hope to see in the next 3 years?

Our proposed new building.

Summary Financial Statements

For the Year Ended 30 June 2024

The attached summary financial statements and other specific disclosures are an extract of, and have been derived from the full audited financial statements of the Wirraka Maya Health Service Aboriginal Corporation ("Corporation") for the financial year ended 30 June 2022.

Other information included in the Summary Financial Statements is consistent with the full Annual Financial Report.

A copy of the Wirraka Maya Health Service Aboriginal Corporation's Annual Financial Report, including the independent Audit Report, is available to all members on the Corporation's website www.wmhsac.com

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Directors Report

30 June 2024

30 June 2024

The directors present their report on Wirraka Maya Health Service Aboriginal Corporation for the financial year ended 30 June 2024.

General information

Directors

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

Names	Position
Alfred Barker	Vice Chairperson
Nora Cooke	Treasurer
Ashley Councillor	Director
Selina Stewart	Chairperson
Rowena Brown	Director
Doris Eaton	Secretary
Timothy Brahim	Director

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

Principal activities and significant changes in nature of activities

The principal activities of Wirraka Maya Health Service Aboriginal Corporation during the financial year was provision of primary health care services and associated health programs to Indigenous communities.

There were no significant changes in the nature of Wirraka Maya Health Service Aboriginal Corporation's principal activities during the financial year.

Operating result

The profit of the Corporation for the financial year after providing for income tax amounted to \$ 1,054,955(2023: \$ 785,020).

Significant changes in state of affairs

There have been no significant changes in the state of affairs of the Corporation during the year.

Events after the reporting date

On 11 July 2024 two residential properties situated at 4 Steamer Avenue, South Hedland and 44 Dowding Way, Port Hedland were acquired for \$1,465,000

Except for the above, no other matters or circumstances have arisen since the end of the financial year which significantly affected or could significantly affect the operations of the Corporation, the results of those operations or the state of affairs of the Corporation in future financial years.

Environmental issues

Directors Report

30 June 2024

Future developments

The Corporation expects to maintain the present status and level of operations operations and hence there are no likely developments in the entity's operations.

Meetings of directors

During the financial year, 9 meetings of directors (including committees of directors) were held. Attendances by each director during the year were as follows:

Directors' Meetings		
Number attended	Number eligible to attend	
Alfred Barker	5	9
Nora Cooke	9	9
Ashley Councillor	6	9
Selina Stewart	9	9
Rowena Brown	9	9
Doris Eaton	8	9
Timothy Brahim	8	9

Indemnification

No indemnities have been given or insurance premiums paid, during or since the end of the financial year, for any person who is or has been an officer or auditor of Wirraka Maya Health Service Aboriginal Corporation .

Proceedings on behalf of corporation

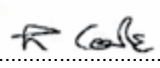
No person has applied for leave of Court to bring proceedings on behalf of the entity or intervene in any proceedings to which the entity is a party for the purpose of taking responsibility on behalf of the entity for all or any part of those proceedings.

Auditor's independence declaration

The auditor's independence declaration in accordance with section 307C of the *Corporations Act 2001* for the year ended 30 June 2024 has been received and can be found on page 3 of the financial report.

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

Director:


Director:


Dated this 28th day of October 2024

Auditor's Independence Declaration

30 June 2024

Auditor's Independence Declaration under Section 60-40 of the Charities and Not-for-profits Commission Act 2012 to the Responsible Persons of Wirraka Maya Health Service Aboriginal Corporation

I declare that, to the best of my knowledge and belief, during the year ended 30 June 2024, there have been:

- (i) no contraventions of the auditor independence requirements as set out in section 60-40 of the *Australian Charities and Not-for-profits Commission Act 2012* in relation to the audit; and
- (ii) no contraventions of any applicable code of professional conduct in relation to the audit.

[Enter place of signing]

DRY KIRKNESS (AUDIT) PTY LTD



ROBERT HALL
Director

Perth
Date: 28 October 2024

Statement of Profit or Loss and Other Comprehensive Income

For the year ended 30 June 2024

	Note	2024 \$	2023 \$
Revenue			
Grants	4	10,482,692	10,198,191
Medicare claims		886,001	747,270
Patient incentive program		32,135	118,215
Interest income		280,597	52,725
Other operating revenues		899,051	506,027
		<u>12,580,476</u>	<u>11,622,428</u>
Expenses			
Consulting and professional fees		(407,345)	(231,340)
Depreciation - PPE	9	(682,255)	(584,587)
Employee benefits expense	5	(5,559,167)	(4,836,413)
Medical supplies		(151,105)	(80,530)
Motor vehicle expenses		(153,994)	(237,907)
Other expenses		(4,281,555)	(4,671,564)
Travel - domestic		(290,100)	(195,067)
		<u>(11,525,521)</u>	<u>(10,837,408)</u>
Surplus before income tax		1,054,955	785,020
Income tax expense		-	-
Surplus after income tax		<u>1,054,955</u>	<u>785,020</u>
Other comprehensive income, net of income tax			
Total comprehensive income for the year		<u>1,054,955</u>	<u>785,020</u>

Statement of Financial Position

As at 30 June 2024

	2024	2023
Note	\$	\$
ASSETS		
CURRENT ASSETS		
Cash and cash equivalents	6 15,471,624	14,479,411
Trade and other receivables	7 1,482,128	293,907
Other assets	8 22,040	22,040
TOTAL CURRENT ASSETS	16,975,792	14,795,358
NON-CURRENT ASSETS		
Property, plant and equipment	9 10,148,664	9,773,682
TOTAL NON-CURRENT ASSETS	10,148,664	9,773,682
TOTAL ASSETS	27,124,456	24,569,040
LIABILITIES		
CURRENT LIABILITIES		
Trade and other payables	10 815,119	1,001,475
Lease liabilities	124,012	50,945
Provisions	12 259,697	235,323
Other financial liabilities	178,107	384,743
Contract liabilities	11 6,288,873	4,761,770
TOTAL CURRENT LIABILITIES	7,665,808	6,434,256
NON-CURRENT LIABILITIES		
Lease liabilities	257,118	26,411
Provisions	12 138,866	100,664
TOTAL NON-CURRENT LIABILITIES	395,984	127,075
TOTAL LIABILITIES	8,061,792	6,561,331
NET ASSETS	19,062,664	18,007,709
EQUITY		
Asset revaluation reserve	4,265,356	4,265,356
Retained earnings	14,797,308	13,742,353
TOTAL EQUITY	19,062,664	18,007,709

Statement of Changes in Equity

For the year ended 30 June 2024

2024

	Retained Earnings	Asset Realisation Reserve	Total
	\$	\$	\$
Balance at 1 July 2023	13,742,353	4,265,356	18,007,709
Surplus for the year	1,054,955	-	1,054,955
Other comprehensive income for the year	-	-	-
Balance at 30 June 2024	<u>14,797,308</u>	<u>4,265,356</u>	<u>19,062,664</u>

2023

	Retained Earnings	Asset Realisation Reserve	Total
	\$	\$	\$
Balance at 1 July 2022	12,957,333	4,265,356	17,222,689
Surplus for the year	785,020	-	785,020
Other comprehensive income for the year	-	-	-
Balance at 30 June 2023	<u>13,742,353</u>	<u>4,265,356</u>	<u>18,007,709</u>

Statement of Cash Flows

For the year ended 30 June 2024

	2024	2023
Note	\$	\$
CASH FLOWS FROM OPERATING ACTIVITIES:		
Receipts from customers	12,430,552	11,764,077
Payments to suppliers and employees	(10,965,472)	(8,318,883)
Interest received	280,597	52,725
Net cash provided by/(used in) operating activities	14(b) <u>1,745,677</u>	<u>3,497,919</u>
CASH FLOWS FROM INVESTING ACTIVITIES:		
Purchase of property, plant and equipment	(567,777)	(216,046)
Work in progress of property, plant & equipment	-	(333,280)
Net cash provided by/(used in) investing activities	<u>(567,777)</u>	<u>(549,326)</u>
CASH FLOWS FROM FINANCING ACTIVITIES:		
Lease payments	(185,687)	(163)
Net cash provided by/(used in) financing activities	<u>(185,687)</u>	<u>(163)</u>
Net increase/(decrease) in cash and cash equivalents held	992,213	2,948,430
Cash and cash equivalents at beginning of year	<u>14,479,411</u>	<u>11,530,981</u>
Cash and cash equivalents at end of financial year	14(a) <u><u>15,471,624</u></u>	<u><u>14,479,411</u></u>

Notes to the Financial Statements

For the year ended 30 June 2024

The financial report covers Wirraka Maya Health Service Aboriginal Corporation as an individual entity. Wirraka Maya Health Service Aboriginal Corporation is a not-for-profit Corporation, registered and domiciled in Australia.

The principal activities of the Corporation for the year ended 30 June 2024 was provision of primary health care services and associated health programs to Indigenous communities.

The functional and presentation currency of Wirraka Maya Health Service Aboriginal Corporation is Australian dollars.

Comparatives are consistent with prior years, unless otherwise stated.

1 Basis of Preparation

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

2 Material Accounting Policy Information

(a) Revenue and other income

Grant revenue

Grant revenue is recognised in the statement of profit or loss and other comprehensive income when the Corporation obtains control of the grant, it is probable that the economic benefits gained from the grant will flow to the entity and the amount of the grant can be measured reliably.

When grant revenue is received whereby the Corporation incurs an obligation to deliver economic value directly back to the contributor, this is considered a reciprocal transaction and the grant revenue is recognised in the statement of financial position as a liability until the service has been delivered to the contributor, otherwise the grant is recognised as income on receipt.

Wirraka Maya Health Service Aboriginal Corporation receives non-reciprocal contributions of assets from the government and other parties for zero or a nominal value. These assets are recognised at fair value on the date of acquisition in the statement of financial position, with a corresponding amount of income recognised in the statement of profit or loss and other comprehensive income.

Revenue from contracts with customers

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

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

Specific revenue streams

The revenue recognition policies for the principal revenue streams of the Corporation are:

Donations

Donations and bequests are recognised as revenue when received.

Notes to the Financial Statements

For the year ended 30 June 2024

2 Material Accounting Policy Information (continued)

(a) Revenue and other income (continued)

Specific revenue streams (continued)

Interest income

Interest revenue is recognised using the effective interest method, which for floating rate financial assets is the rate inherent in the instrument.

Medicare income

Medicare income is recognised when income is earned.

Other income

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

(b) Income Tax

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

(c) Property, plant and equipment

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

Items of property, plant and equipment acquired for nil or nominal consideration have been recorded at the acquisition date fair value.

Land and buildings

Land and buildings are measured using the revaluation model.

Plant and equipment

Plant and equipment are measured using the cost model.

In the event the carrying amount of plant and equipment is greater than its estimated recoverable amount, the carrying amount is written down immediately to the estimated recoverable amount and impairment losses are recognised either in profit or loss or as a revaluation decrease if the impairment losses relate to a revalued asset. A formal assessment of recoverable amount is made when impairment indicators are present.

Subsequent costs are included in the asset's carrying amount or recognised as a separate asset, as appropriate, only when it is probable that future economic benefits associated with the item will flow to the Corporation and the cost of the item can be measured reliably. All other repairs and maintenance are recognised as expenses in profit or loss during the financial period in which they are incurred.

Notes to the Financial Statements

For the year ended 30 June 2024

2 Material Accounting Policy Information (continued)

(c) Property, plant and equipment (continued)

Plant and equipment (continued)

WMHSAC has decided that only capital acquisitions with a value more than \$1,000 will be capitalised moving forward. All other assets with a value less than \$1,000 will be expensed in the year of acquisition through profit or loss.

Depreciation

Property, plant and equipment, excluding freehold land, is depreciated on a reducing balance basis over the assets useful life to the Corporation, commencing when the asset is ready for use.

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

Fixed asset class	Depreciation rate
Buildings	5%
Plant and Equipment	20%
Motor Vehicles	22.5%
Office Equipment	30%
Medical equipment	20%

Gains and losses on disposals are determined by comparing proceeds with the carrying amount. These gains and losses are recognised in profit or loss when the item is derecognised. When revalued assets are sold, amounts included in the revaluation surplus relating to that asset are transferred to retained surplus.

(d) Financial instruments

Financial assets

All recognised financial assets are subsequently measured in their entirety at either amortised cost or fair value, depending on the classification of the financial assets.

Classification

On initial recognition, the Corporation classifies its financial assets into the following categories, those measured at:

- amortised cost

Amortised cost

The Corporation's financial assets measured at amortised cost comprise trade and other receivables and cash and cash equivalents in the statement of financial position.

Notes to the Financial Statements

For the year ended 30 June 2024

2 Material Accounting Policy Information (continued)

(d) Financial instruments (continued)

Financial assets (continued)

Impairment of financial assets

Impairment of financial assets is recognised on an expected credit loss (ECL) basis.

The Corporation uses the presumption that an asset which is more than 30 days past due has seen a significant increase in credit risk.

The Corporation uses the presumption that a financial asset is in default when:

- the other party is unlikely to pay its credit obligations to the Corporation in full, without recourse to the Corporation to actions such as realising security (if any is held); or
- the financial assets is more than 90 days past due.

Trade receivables

Impairment of trade receivables have been determined using the simplified approach in AASB 9 which uses an estimation of lifetime expected credit losses.

The amount of the impairment is recorded in a separate allowance account with the loss being recognised in finance expense. Once the receivable is determined to be uncollectable then the gross carrying amount is written off against the associated allowance.

Financial liabilities

The financial liabilities of the Corporation comprise trade payables, bank and other loans and lease liabilities.

(e) Impairment of non-financial assets

At the end of each reporting period the Corporation determines whether there is an evidence of an impairment indicator for non-financial assets.

Where an indicator exists and regardless for indefinite life intangible assets and intangible assets not yet available for use, the recoverable amount of the asset is estimated.

(f) Leases

At inception of a contract, the Corporation assesses whether a lease exists - i.e. does the contract convey the right to control the use of an identified asset for a period of time in exchange for consideration.

This involves an assessment of whether:

- The contract involves the use of an identified asset - this may be explicitly or implicitly identified within the agreement. If the supplier has a substantive substitution right then there is no identified asset.

Notes to the Financial Statements

For the year ended 30 June 2024

2 Material Accounting Policy Information (continued)

(f) Leases (continued)

- The Corporation has the right to obtain substantially all of the economic benefits from the use of the asset throughout the period of use.
- The Corporation has the right to direct the use of the asset i.e. decision making rights in relation to changing how and for what purpose the asset is used.

Lessee accounting

The non-lease components included in the lease agreement have been separated and are recognised as an expense as incurred.

Exceptions to lease accounting

The Corporation has elected to apply the exceptions to lease accounting for both short-term leases (i.e. leases with a term of less than or equal to 12 months) and leases of low-value assets. The Corporation recognises the payments associated with these leases as an expense on a straight-line basis over the lease term.

(g) New accounting standards and interpretations issued but not yet effective

The Corporation has adopted all standards which became effective for the first time at 30 June 2024, the adoption of these standards has not caused any material adjustments to the reported financial position, performance or cash flow of the Corporation. Any new, revised, amended Accounting Standards or Interpretations that are not yet mandatory have not been early adopted.

Accounting policy information; whilst does not satisfy one of the following requirements has been removed from these financial statements:

- changes in accounting policies
- documentation of choice in the accounting standards
- an accounting policy developed in the absence of an explicit accounting standard requirement
- significant judgement or estimation
- complex transaction and accounting policy needed to explain treatment

(h) New accounting standards and interpretations issued but not yet effective or early adopted

Any new or amended Accounting Standards or Interpretations that are not yet effective have not been early adopted.

The Corporation has assessed the impact of these new or amended Accounting Standards or Interpretations most relevant to the Corporation as having no significant impact.

Notes to the Financial Statements

For the year ended 30 June 2024

3 Critical Accounting Estimates and Judgments

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

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

The significant estimates and judgements made have been described below.

Key estimates - impairment of property, plant and equipment

The 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.

Key estimates - fair value of financial instruments

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

Key estimates - employee benefit provision

Employee benefits expected to be settled more than one year after the end of the reporting period have been measured at the present value of the estimated future cash outflows to be made for those benefits. In determining the liability, consideration is given to employee wage increases and the probability that the employee may satisfy vesting requirements. Changes in the measurement of the liability are recognised in profit or loss.

Key estimates - receivables

The receivables at reporting date have been reviewed to determine whether there is any objective evidence that any of the receivables are impaired. An impairment provision is included for any receivable where the entire balance is not considered collectible. The impairment provision is based on the best information at the reporting date.

Notes to the Financial Statements

For the year ended 30 June 2024

4 Grants and contributions

	2024	2023
	\$	\$
Australian Government - Department of Health	5,429,507	5,671,928
Health Department of Western Australia	2,071,009	1,981,637
National Indigenous Australians Agency	177,106	233,221
Western Australia Primary Health Alliance	950,745	1,119,447
Puntukurnu Aboriginal Medical Service	-	306,502
National Disability Insurance Agency	389,500	325,000
Other Grants	1,464,825	560,456
	<u>10,482,692</u>	<u>10,198,191</u>

5 Employment expenses

Superannuation contributions	446,883	374,570
Salary and wages	3,864,622	3,250,187
Annual airfares	31,811	35,468
Airconditioning subsidy	55,230	60,084
Other employment expenses	1,160,621	1,116,104
	<u>5,559,167</u>	<u>4,836,413</u>

6 Cash and Cash Equivalents

Cash and cash equivalents	<u>15,471,624</u>	<u>14,479,411</u>
Restricted cash - contract liabilities	6,288,873	4,761,770
Unrestricted cash	<u>9,182,751</u>	<u>9,717,641</u>
	<u>15,471,624</u>	<u>14,479,411</u>

The unrestricted cash is used to fund the Corporation's present obligations and future projects in the next 12 months.

7 Trade and other receivables

Trade receivables	1,483,700	262,317
Other - prepayment	(1,572)	31,590
	<u>1,482,128</u>	<u>293,907</u>

The carrying value of trade receivables is considered a reasonable approximation of fair value due to the short-term nature of the balances.

The maximum exposure to credit risk at the reporting date is the fair value of each class of receivable in the financial statements. Refer to note 15.

Notes to the Financial Statements

For the year ended 30 June 2024

8 Other Assets

	2024	2023
	\$	\$
Bonds	22,040	22,040

9 Property, plant and equipment

Land and buildings

At valuation	10,886,711	10,886,711
Capital work in progress	1,233,897	782,487
Accumulated depreciation	(2,912,504)	(2,516,782)
Total buildings	9,208,104	9,152,416

Plant and equipment

At cost	713,489	628,842
Accumulated depreciation	(461,384)	(404,341)
Total plant and equipment	252,105	224,501

Motor vehicles

At cost	898,870	898,870
Accumulated depreciation	(812,629)	(793,332)
Total motor vehicles	86,241	105,538

Office equipment

At cost	783,396	756,261
Accumulated depreciation	(638,017)	(597,763)
Total office equipment	145,379	158,498

Medical equipment

At cost	427,877	423,294
Accumulated depreciation	(381,478)	(367,917)
Total medical equipment	46,399	55,377

Right-of-Use

At cost	566,814	77,352
Accumulated depreciation	(156,378)	-
Total Right-of-Use	410,436	77,352

Total property, plant and equipment

	10,148,664	9,773,682
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Notes to the Financial Statements

For the year ended 30 June 2024

9 Property, plant and equipment (continued)

(a) Movements in carrying amounts of property, plant and equipment

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

	Buildings	Plant and Equipment	Motor Vehicles	Office Equipment	Medical Equipment	Right-of-Use	Total
	\$	\$	\$	\$	\$	\$	\$
Year ended 30 June 2024							
Balance at the beginning of year	9,152,416	224,501	105,538	158,498	55,377	77,352	9,773,682
Additions	451,410	84,647	-	27,135	4,583	489,462	1,057,237
Depreciation expense	(395,722)	(57,043)	(19,297)	(40,254)	(13,561)	(156,378)	(682,255)
Balance at the end of the year	9,208,104	252,105	86,241	145,379	46,399	410,436	10,148,664

	Buildings	Plant and Equipment	Motor Vehicles	Office Equipment	Medical Equipment	Right-of-Use	Total
	\$	\$	\$	\$	\$	\$	\$
Year ended 30 June 2023							
Balance at the beginning of year	9,219,495	203,653	80,597	168,128	59,718	-	9,731,591
Additions	333,280	68,315	44,505	95,567	7,659	77,352	626,678
Depreciation expense	(400,359)	(47,467)	(19,564)	(105,197)	(12,000)	-	(584,587)
Balance at the end of the year	9,152,416	224,501	105,538	158,498	55,377	77,352	9,773,682

Notes to the Financial Statements

For the year ended 30 June 2024

9 Property, plant and equipment (continued)

(a) Movements in carrying amounts of property, plant and equipment (continued)

Land and buildings are disclosed at fair value for the year ended 30 June 2024.

Land and buildings are valued by independent valuation, at fair value hierarchy level 2. Based on market comparison data as at 30 June 2024.

The Corporation had an encumbrance on the following property as shown below which is included under Buildings: 20 Masters Way, South Hedland – Restrictive Covenant Burden Registered 29.11.1996 – Document number G339523.

10 Trade and Other Payables

	2024	2023
	\$	\$
Trade payables	561,549	854,170
GST payable	201,179	81,694
Funds held on behalf of other committees	(119,101)	(119,101)
Sundry payables	171,492	111,141
PAYG withholding payable	-	73,571
	815,119	1,001,475

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

11 Contract Liabilities

CURRENT

Contract liabilities relating to contracts with customers

6,288,873	4,761,770
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12 Employee Benefits

Current liabilities

Long service leave

37,000	31,918
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Provision for employee benefits

222,697	203,405
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259,697	235,323
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Non-current liabilities

Long service leave

138,866	100,664
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Notes to the Financial Statements

For the year ended 30 June 2024

13 Key Management Personnel Remuneration

(a) Totals of remuneration paid

The totals of remuneration paid to the key management personnel of Wirraka Maya Health Service Aboriginal Corporation during the year are as follows:

	2024	2023
	\$	\$
Key management personnel compensation	326,228	525,863
Board member allowances	35,325	46,875
	<u>361,553</u>	<u>572,738</u>

(b) Employee costs paid to close family members of the CEO

Close family members' compensation	<u>454,981</u>	<u>487,572</u>
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14 Cash Flow Information

(a) Reconciliation of cash

Cash at the end of the financial year as shown in the statement of cash flows is reconciled to items in the statement of financial position as follows:

Cash and cash equivalents	15,471,624	14,479,411
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(b) Reconciliation of result for the year to cashflows from operating activities

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

Profit for the year	1,054,955	785,020
Cash flows excluded from profit attributable to operating activities		
Non-cash flows in profit:		
- depreciation	682,255	584,587
Changes in assets and liabilities:		
- (increase)/decrease in trade and other receivables	(1,189,793)	(93,369)
- (increase)/decrease in other assets	1,572	(13,820)
- (increase)/decrease in other liabilities	1,320,467	2,680,359
- increase/(decrease) in trade and other payables	(186,354)	(428,224)
- increase/(decrease) in provisions	62,575	(16,634)
Cashflows from operations	<u>1,745,677</u>	<u>3,497,919</u>

Notes to the Financial Statements

For the year ended 30 June 2024

15 Financial Risk Management

The Corporation's financial instruments consist mainly of deposits with banks, receivables and payables and lease liabilities.

The totals 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:

	2024 \$	2023 \$
Financial assets		
Cash and cash equivalents	15,471,624	14,479,411
Trade and other receivables		
Trade and other receivables	1,482,128	293,907
Total financial assets	<u>16,953,752</u>	<u>14,773,318</u>
Financial liabilities		
Trade and other payables	815,119	1,001,475
Total financial liabilities	<u>815,119</u>	<u>1,001,475</u>

Credit risk

The Corporation does not have any material credit risk exposure to any single receivable or group of receivables.

Collateral held as security

No collateral is held as security for any of the accounts receivable or other debtor balances.

Financial assets classified as loans and receivables

Trade and other receivables		
- Total current	<u>1,483,700</u>	<u>293,907</u>

16 Segment Reporting

The Corporation operates predominantly in one business and geographical segment, being the health sector providing health services to members of the community.

17 Contingencies

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

Notes to the Financial Statements

For the year ended 30 June 2024

18 Events after the end of the Reporting Period

On 11 July 2024 two residential properties situated at 4 Steamer Avenue, South Hedland and 44 Dowding Way, Port Hedland were acquired for \$1,465,000

No matters or circumstances have arisen since the end of the financial year which 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.

19 Statutory Information

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

Wirraka Maya Health Service Aboriginal Corporation
17 Hamilton Road
South Hedland WA 6722

Directors Declaration


The Organisation is a reporting entity.

The Directors or Wirraka Maya Health Service Aboriginal Corporation declare that:

- The financial statements and notes are in accordance with the Corporations (Aboriginal and Torres Strait Islander) Regulations 2007 (CATSI Regulations) including:
 - Compliance with accounting standards - Simplified Disclosures
 - Providing a true and fair view of the financial position of the Wirraka Maya Health Service Aboriginal Corporation as at 30 June 2024 and its performance for the year ended on that date.
- At the date of this statement, there are reasonable grounds to believe that the Wirraka Maya Health Service Aboriginal Corporation will be able to pay its debts as and when they fall due.

The statement is made in accordance with a resolution of the Board of Directors.

Director 

Director 

Dated this 28th day of October 2024

Independent Auditors Report



INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF WIRRAKA MAYA HEALTH SERVICE ABORIGINAL CORPORATION

Report on the Financial Report

Opinion

We have audited the financial report of Wirraka Maya Health Service Aboriginal Corporation (the Corporation), which comprises the statement of financial position as at 30 June 2024 and the statement of profit or loss and other comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, notes comprising a summary of material accounting policy information and other explanatory information and the directors' declaration.

In our opinion, the accompanying financial report of the Wirraka Maya Health Service Aboriginal Corporation is prepared, in all material respects, in accordance with the Corporations (Aboriginal and Torres Strait Islander) Act 2006 and Division 60 of the Australian Charities and Not-for-profits Commission Act 2012, including:

- i) giving a true and fair view of the Corporation's financial position as at 30 June 2024 and of its financial performance for the year then ended; and
- ii) complying with Australian Accounting Standards – Simplified Disclosures and Division 60 of the Australian Charities and Not-for-profits Commission Regulations 2022.

Basis for Opinion

We have 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, 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 (including independence standards) (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our ethical requirements in accordance with the Code.

We confirm that the independence declaration required by the Corporations (Aboriginal and Torres Strait Islander) Act 2006 and Australian Charities and Not-for-profits Commission Act 2012, which has been given to the management committee of the Corporation, would be in the same terms if given to the management committee as at the date of this auditor's report. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

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Independent Auditors Report

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 the Australian Accounting Standards - Reduced Disclosure Requirements, Corporations (Aboriginal and Torres Strait Islander) Act 2006 and 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 financial report that gives a true and fair view and 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 the Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of the financial report.

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 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.
- Obtain an understanding of internal controls 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 management regarding, 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.

We also provide management with a statement that we have complied with relevant ethical requirements regarding independence, and to communicate with them all relationships and other matters that may reasonably be thought to bear on our independence, and where applicable, actions taken to eliminate threats or safeguards applied.

Report on Other Legal and Regulatory Requirements

In our opinion, Wirraka Maya Health Service Aboriginal Corporation has complied with sections 60-30(3)(b), (c) and (d) of the Australian Charities and Not-for-profits Commission Act 2012:

- by providing us with all information, explanation and assistance necessary for the conduct of the audit;
- by keeping financial records sufficient to enable a financial report to be prepared and audited;
- by keeping other records required by Part 3-2 of the Australian Charities and Not-for-profits Commission Act 2012, including those records required by Section 55-5 that correctly record its operations, so as to enable any recognised assessment activity to be carried out in relation to the Corporation.

DRY KIRKNESS (AUDIT) PTY LTD



ROBERT HALL CA
Director

Perth
Date: 28 October 2024





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HEALTH SERVICE
ABORIGINAL CORPORATION