Gurriny Yealamucka Health Services Aboriginal Corporation



Yarrabah Community Profile

The Yarrabah Shire is situated along about 60km of coastline to the south east of Cairns between False Cape in the north, around Cape Grafton and down to Palmer Point in the south.

The Community lies about 12km to the south east of Cairns in and around Mission Bay.

By road it is a 53km drive from Cairns CBD which takes about 45 minutes to travel. Geographically, our land area could generally be described as a long slender shape bounded in the west by the Murray Prior Range and the coast on the east. It has an overall length of about 30km and is about 2.5km wide in the south, but broadens out to almost 8km across the northern part.

It has an area of about 154 square km.
Initially European influence began in
earnest with the establishment of an
Anglican Mission on this same location on
the 17th of June 1892.

Over the years, subsequent state

government administrations forcibly relocated

Aboriginal and some South Sea Islander peoples from far and wide to Yarrabah. As a consequence most local residents can claim both traditional and historical ties to the area.

The first Aboriginal Council in Yarrabah was established in the mid-1960s, principally as an advisory body.

Community Council status was first granted in 1986 through the Community Service (Aborigines) Act in 1984.

Under the Community Services Act tenure known as DOGIT - Deeds of Grant in Trust - were established where the land was held in trust by the Council of the day.

In 2004 the Queensland Government passed new legislation – the Local

Government (Community Government Areas) Act 2004, which transitioned Community Councils to Aboriginal Shire Councils by the year 2008.

Yarrabah is now governed by an elected Aboriginal Shire Council under the Local Government Act of Queensland and remains under the DOGIT system of land tenure.

The community has an official population of 2722 people according to the 2010 census and unofficially - due to a known deficit in accuracy in census reporting - of more than 3,000 people.

A health profile of the community indicates chronic disease is the main reason people get sick in Yarrabah.

Hypertension (high blood pressure), hyperlipidaemia (cholesterol), diabetes and asthma are the most prevalent.



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Patient clustering by travel time for all patients using the Gurriny Yealamucka clinic in Yarrabah, far-northern Queensland, February 2014. One dot represents one patient address.*

Green Hill

Coral Sea

Yarrabah

Great Barrier Reef Ma

Fitzroy Island

Gurriny All Patients

Yorkeys Knob

Morris Forest

e Mulgrave Forest

Holloways Beach

Mount Peter

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Cover pic by Christine Howes; Edited by Ruth Fagan; Layout and production by Christine Howes http://www.chowes.com.au
* Understanding patient access patterns for primary health-care services for Aboriginal and Islander people in Queensland: a geospatial mapping approach by K. S. Pangretto, A. Dellit, A. Hollin, G. Woson, C. Sidhom, K. Chilcott, D. Molthouse, S. Andrews, I. Mein, B. Abbee and R. McDermott

From Health Council to Primary Health Care Services: a short history of 'Gurriny'

The Yarrabah Health Committee was incorporated in 1991 after it's formation in 1989 by the Yarrabah Community Council because the community felt the health needs of residents were not being met by state government-run health services.

The role of the Yarrabah Health Committee was to provide a community voice for health care and deliver a rheumatic heart program.

It was later expanded to include a Life Promotion program.

Funding to establish the Committee was initially received from the Aboriginal and Torres Strait Islander Commission (ATSIC).

In 1991 the Committee conducted a formal review and incorporated after a community decision to formalise its operations.

In 2000 the community made a decision to

change the name to Gurriny Yealamucka Health Services Aboriginal Corporation (GYHSAC).

The words 'Gurriny Yealamucka' are from the Gunggandji language and means 'Good Healing Water'.

GYHSAC is an Incorporated Aboriginal Association under the Aboriginal Councils and Associations Act 1976 (hereinafter called "the Act").

Since it's inception the Board of Directors have actively developed the organisation to become the lead health agency in Yarrabah.

The core business of GYHSAC is to provide a culturally sensitive, multipurpose Primary Health Care Service, and to ensure effective coordination of health services in Yarrabah in partnership with Cairns Hospital, Hinterland 4 and Health Service, Queensland Health, Yarrabah Aboriginal Shire Council and the Commonwealth Department of Health and Ageing.

The primary focus is on preventative health care including strategies that target early intervention

Vision

Gurriny, as the Community Controlled Health Service, will lead the advancement of equitable health outcomes for the people of Yarrabah.

Mission

Gurriny Yealamucka Health Services will "Close the Gap" through progressing quality health care services that are underpinned by gold standard governance business practices.

Goals

To increase and maintain the Health standards of people in Yarrabah and surrounding areas by delivering a service through the governance and management of an Aboriginal Community Controlled Health Service. In partnership with Cairns Hospital Hinterland & Health Service develop a capacity building infrastructure that supports Gurriny Yealamucka Health Services to incorporate Primary Health Care as the major foundation to service a multi-purpose community controlled health service.

Objectives

- 1. To improve and maintain the health and wellbeing of all people in the community of Yarrabah and surrounding areas, through community participation and by providing a community-based and community-controlled Aboriginal Health Service, in a culturally sensitive manner;
- 2. To increase and maintain the health standards of the people in Yarrabah and surrounding areas by establishing an Aboriginal Community Controlled Health Service;
- 3. Incorporate Primary Health Care as the major foundation to serve multi-purpose community controlled Health Services;
- 4. Identify the priority requirements for improving the health standards and delivery of health services and programs to the people of Yarrabah;
- 5. To develop policies and strategies to promote and improve the health status of Yarrabah people;
- 6. To collect, coordinate and manage data and conduct research into matters relating to the health of the people of Yarrabah and surrounding areas;
- 7. To raise the awareness of priority health areas affecting the health and well-being of Yarrabah people before the public and to the attention of the appropriate authorities;
- 8. To network and coordinate health information with all other community-controlled health services in Queensland, Australia and overseas;
- 9. To be able to participate in social research studies in any other Indigenous Health Service in Australia, or other parts of the world;
- 10. To lobby local, state and federal governments and international organisations for financial aid;
- 11. To develop and implement education and training programs in all health areas on a needs-based service criteria.

Chairperson's Report: Lee Yeatman

I write this report for the first time as the Chairperson after serving as a director for a number of years.

Being the Chairperson, can be a challenging task but also rewarding and I want to thank my fellow directors in electing and supporting me in the role of Chairperson.

I want to also thank the outgoing Chairperson Mrs Sandra Houghton, who has held the role for over three years and has made it easy for me to step into this position and take over. Governing the organisation is our primary role, it is important for any organisation to make sure the governance platform is strong for an organisation such as Gurriny to strive and deliver the best health outcomes for the community of Yarrabah.

This year saw Gurriny come of age, we celebrated 25 years as a health organisation, firstly starting off a celebration with community in Yarrabah and a formal gala dinner early this year.

We have had a couple of new directors join the board and it is always refreshing to have new people to throw fresh eyes and perceptive on the organisations governance.

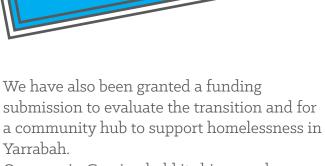
The Board continues to have governance training each year, as it is critical for all the

board to have professional development to refresh us with new knowledge and skills to effectively govern.

An important role as Board of Directors, is to review the strategic plan to make sure it is still relevant to core business, but also to make sure we are on track with our deliverables and vision.

I can confirm that Gurriny is leading the way as a community control health service in achieving or meeting national health key performance indicators against targeted date. We are now three years on since the transition of services from Queensland Health to Gurriny and I am proud to lead this organisation and its achievements as it continues to go from strength to strength. Our achievements to date include extended hours (no longer closed during lunch time and an expansion of our primary health care service which now offers:

- speech pathology service
- three additional staff for child health program to expand the service
- family wellbeing services (intensive family support)



Once again Gurriny held its bi-annual members meeting in July.

It is important for members to attend these meeting so you can be actively engaged with the service and have a great say in how we deliver health to our community.



Where to from here:

- Development of a workforce strategy
- Capital and infrastructure growth (upgrade of outreach clinic on Workshop Street)
- Exploring extended hours (4:30pm to 8:00pm)
- Acquiring existing accommodation from Cairns Hospital

I want to acknowledge the CEO, senior management & staff for their commitment and dedication in their jobs, because without them Gurriny would not be this thriving organisation.

Directors of the Corporation at any time during or since the end of the financial year were:

Lee Yeatman: Chairperson, Board member and Committee member for GYHSAC Finance & Risk Committee, Director of various Yarrabah community organisations and community member.

David Baird: Board member and Gurriny member, member of Gindaja Treatment & Healing Corporation, Principal Education Officer for Student Engagement at Yarrabah Secondary School based at the Department of Education and Training Far North Queensland Regional Office and at the Yarrabah Aboriginal Shire Council, and community member.

Sandra Houghton: Board member, Director for various Yarrabah community organisations, Director for Jabalbina Aboriginal Corporation, community business owner.

Elverina Johnson: Board member, Director of various Yarrabah community organisations, community business owner, community member.

Linda Sexton: Board member and Committee member of GYHSAC Finance & Risk Committee, Director of various Indigenous Boards, Executive Director of Indigenous Health - Cairns and Hinterland Health Hospital & Health Service, Indigenous Health Co-ordinator, and CEO Mutkin Aged and Community Care Hostel.

Mahalia Mathieson: Board member, Director of various Yarrabah community organisations, community member.

Lucy Rogers: Board member, Justic of the Peace adn Director of various Yarrabah community organisations.

Sharmaine Stafford: Board member, Director of various Yarrabah community organisations, community member.

David Williams: Independent Board member Chair of GYHSAC Finance & Risk Committee, Member of Australian Institute of Chartered Accountants and Chief Financial Officer of Primary Resources Investment Group.

Thomas Cameron: Independent Board member and member of the GYHSAC Finance and Risk Committee, and Senior Solicitor with Marrawah Law.

Robin Giason: Independent Board Member, 43 years experience in Business Management and Marketing, served numerous CEO positions in the Australian tourism industry, member of the Australian Association of Company Directors, and a Fellow for the Australian Marketing Institute.

CEO's Report: Sue Andrews

Gurriny Yealamucka is a local Gungganghi name which means "Good Healing".

Gurriny Yealamucka Health Service is located on the lands of Traditional Owners, the Gungganghi people of Yarrabah & pays its respect to the elders past & present. It is because of the vision of the Elders to see a community control health service that is responsive to the desires of the Yarrabah people that Gurriny is still thriving today. I am proud of the Gurriny teams not only have they worked hard this year but we have the health data to show this as well.

Key to these great achievements is two things:

- 1. Good staff who take the time to develop relationships with the patients; and,
- 2. A Community of people who are open and trusting of the service to look after and care for them.

This year's Annual Report already includes some of our health data but I would like to highlight the huge increases in health checks – over 50% of kids have had their annual health check and 70% of adults.

This is a great achievement and an important part of taking responsibility for the health

of ourselves, our children, families and community – WELL DONE.

We continue to be savvy using social media such a Twitter and FaceBook to keep the community informed of Gurirny's business as well as producing our bi-monthly newsletter, 'Gurriny News'.

This year The Board of Directors recognised the importance of setting up a health scholarship to financially support Yarrabah people who are already studying or thinking of taking up studies in the health field.

The annual scholarship is to the value of \$15,000.

For more information about this, contact Gurriny.

It is evident that through our programs we are seeing our Model of Care improve coordination between clinic and social health as well as an increase in allied health services.

It is because of this multidisciplinary team that Gurriny is able to achieve outstanding health data results as well as address the burden of disease in Yarrabah.



There are National Key Performance Indicators (nKPI's) that Gurriny has to report against every year. All the Community Controlled Health Servicer's are required to complete these reports. I am very proud to inform you that Gurriny's hard work is paying off with most of the nKPI's already being met. The areas we do need to improve on are around helping people to quit smoking, better manage their health around lifestyle change and helping people with high blood pressure to reduce their levels.

Workforce development is ongoing and a very important part of the business of Gurriny.

We are undergoing a workforce development strategy that will support service delivery and growth of the organisation.

This included a number of new positions and the splitting up of some areas.

A strategic direction of Gurriny is staff development across all program areas and this year Clinical Educator and Social & Emotional Wellbeing Educator positions were designed into our new structure.

These roles provide mentoring, professional support and ongoing supervision (if required) to our staff to build capacity, and carry out their duties accordingly.

One key area of focus is to help staff to incorporate the skills they learn from attending and completing courses.

A number of our staff this year have benefited from training and successfully completed courses at Certificate, Diploma and Bachelor levels and I congratulate them for their efforts.

Earlier this year our Strategic Plan was reviewed and updated following two workshops in March with the Board of Directors and the Senior Management Team.

At the workshops the inclusion of an additional Strategic Intent was discussed and approved. "Gurriny is a community-led organisation that will engage and communicate in a way that is guided by the principles of the Declaration of Rights of Indigenous Peoples".

The key objectives for this Strategic Intent were Compensation Benefits & Training, Culture & Diversity, Culture Mentoring, Understanding Community Control and Aboriginal Holistic Health Care.

Our Senior Management Team have taken all of our Strategic Intents and developed an Annual Operational Business Plan to continue to progress these directions set by the Board.

It was a busy year of audits to maintain our accreditations, keeping everyone busy and I offer full credit to the team at Gurriny for successfully achieving these outcomes. Gurriny has now been re-accredited for both Australian General Practice Accreditation Limited (AGPAL) and the International Organisation for Standardisation (ISO).

ISO is an independent, non-governmental international organisation.

Accreditation is a very important requirement of our funders and the best way to make sure we have best practice systems and processes within the organisation.

There are always challenges and this year high on that list is the governments focus on funding services to deliver programs regionally.

Access to primary health-care services is determined by an interplay of factors, including acceptability, perceived effectiveness, availability, affordability, travel dynamics, and social and cultural considerations.*

Yarrabah has been included in the "southern catchment" area which means that we are bunched together with places like Woree, White Rock, Edmonton, Mt Sheridan, Gordonvale etc.

Our community is large and it is not always appropriate for service providers that are not from Yarrabah coming in to deliver services here.

I am continuing to advocate on behalf of our community, in the health area, the need to recognise Yarrabah on its own and not as part of a region because we have unique needs and many of our local solutions don't fit into the way outside organisations work.

Gurriny continues to navigate through health

reforms for primary health, National Disability Insurance Scheme (NDIS) and aged care and the impacts it has on our people here in Yarrabah.

We will continue to work together with other service providers such as Phams and Mutkin to make sure we have the best services available for our mob.

This year also saw Gurriny celebrate its formal 25 year gala dinner and it was exciting to see everyone who were part of the journey join us to mark this significant milestone & remember those who were part of the struggle and have now passed on.

It is important I formally recognise and appreciate the people of Yarrabah, who are our consumers. Thank you for having the trust and confidence in our health service and our staff.

I would also like to congratulate Dr Kingsley Pearson on being award Doctor of the year by the North Queensland Primary Health Network (NQPHN).

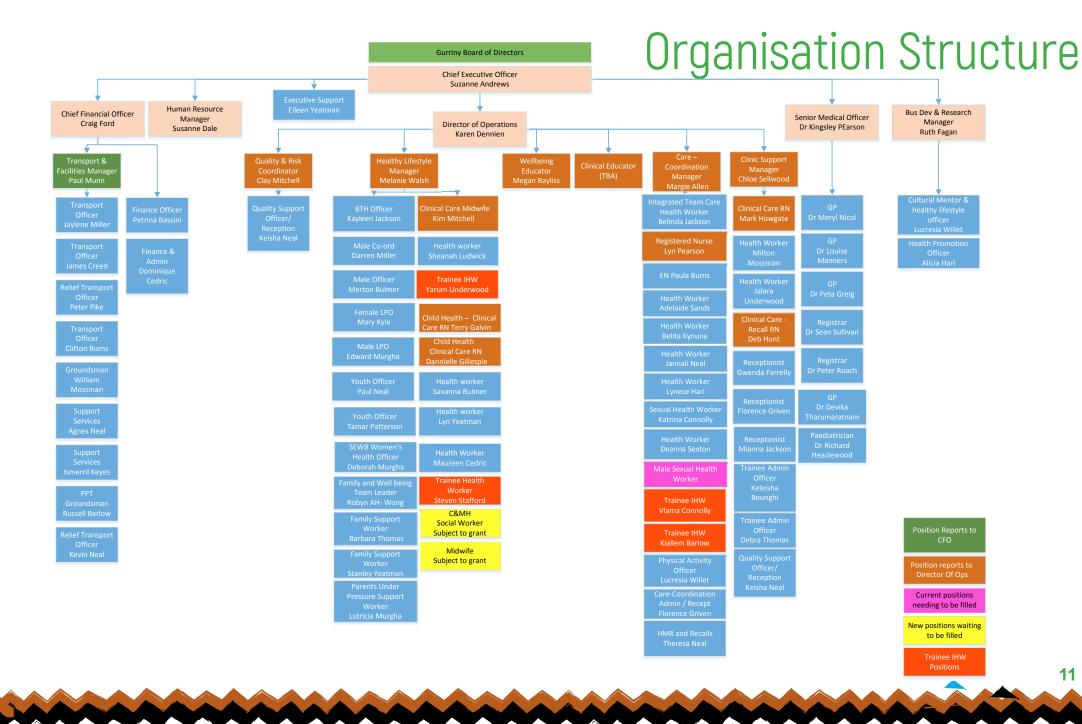
What amazing recognition for his commitment to Indigenous health as well as Gurriny Yealamucka Health Services and the community of Yarrabah itself.

Lastly I want to thank the Chair and our Board of Directors for having the confidence in myself as the CEO and our Senior Management Team and staff for their hard work, dedication and support over the past year.









Director of Operations - Karen Dennien

The past year has been characterised by rapid growth and expansion of clinical and program operations for Gurriny.

With the Board's and CEO's vision and support, and successful funding bids, there has been: Expansion of Primary Health Care Clinical Services

- Introduction of a Speech Pathology service for children and adults to Gurriny under the Federal Government's Rural Health Outreach Program.
- Expansion of funding to support
 Gurriny's Child Health program to
 include an additional Indigenous Child
 Health Nurse and additional and local
 Indigenous Child Health Workers.
- Access for children to Ear Nose and Throat medical specialist services in Cairns has been supported by a small one off grant from the North Queensland Primary Health Network.
- Expansion of Social and Community Programs
- Increased frequency of psychological counselling services (offering both

- male and female psychologists) into the Yarrabah community under the Rural Health Outreach Program.
- Commencement of the Family
 Well-Being Program employing
 three Indigenous staff members in
 partnership with Wuchopperen Health
 Service.
- Implementation of the Parents Under Pressure Program with two years of funding from Mission Australia and employment of a local Indigenous family worker.
- Expansion of a Women's Health and Community Engagement program offering Arts and Crafts sessions, Sewing Lessons, Walking Programs, Drop In Women's Health Information and Support, Bringing Them Home Activities.

To complement the expansion of services, Gurriny has also invested in building and enhancing its corporate and organisational infrastructure.



Organisational Review

In consultation with all staff and Board, Gurriny undertook a major organisational review for the purpose of:

- reviewing the efficiency, appropriateness effectiveness of Gurriny's current services and functions
- mapping Gurriny's current resourcing investment against programs and service functions



 enhancing structures, systems, and processes to foster the sustainability of Gurriny.

The review's outcomes identified the need to expand the organisational resourcing levels to match the growth in service and programs.

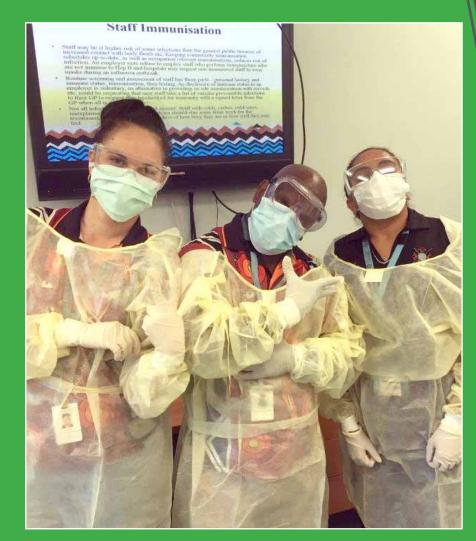
The changes have largely resulted in the creation of:

- an expanded middle management structure (eg. the creation of a new Transport and Facility Manager; Clinic Support Manager; Care Co-ordination Manager.)
- the creation of three new professional positions Quality and Risk Coordinator; Wellbeing Educator (a designated social worker position); a Clinical Educator (a designated registered nurse position.)
- the creation of a new care co-ordination team which combines chronic disease, sexual health, home medication review and physical activities.
- the development of new family and wellbeing programs to address some of the social determinants of health.

Quality and Risk Management

Gurriny has achieved successful three year re-accreditation under the RACGP Standards (May 2017) and the ISO 9001:2015 Quality Management Standard (October 2017).

Gurriny's risk management processes have been revised with employment of a Quality and Risk Coordinator.



Staff Hazardous Material Training is part of a regular training routine at Gurriny.

"We all learnt how Infection control effects everyone, especially if we don't understand how infection can spread, how to correctly clean up and what equipment we have and how to use it."

Business & Development - Ruth Fagan

The 2016/2017 year was a busy one for Gurriny. A key focus was expansion of services to meet community needs. This has meant writing lots of grant applications and lots of lobbying by our CEO.

This year we saw the expansion of the Child and Maternal Health Team, a new Family Wellbeing Program, \$300,000.00 to build a Youth Hub with a community kitchen (to be located in the Workshop St premises) and extra funds to purchase resources for a baby basket program. Gurriny has been submitting applications and fighting for funds to upgrade the entire

Workshop St area unfortunately to date we have been unsuccessful. Hopefully in the new financial year with the hard work of our CEO we may see some positive outcomes.

Research projects that Gurriny is involved in include:

- Safe sleeping for babies (Pepi-pods)
- Gestational Diabetes

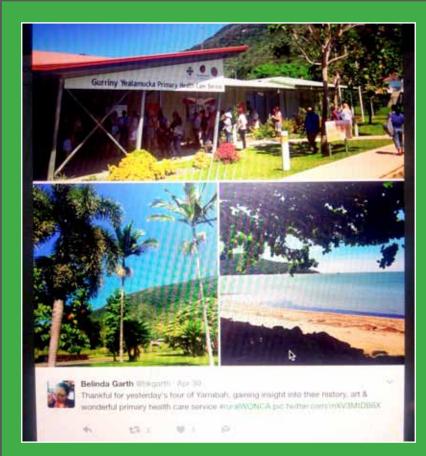
- Evaluation of Community Control
- Suicide Prevention Community Solutions
- Hearing Project
- Gambling Project

Gurriny receives on average of at least one research request per month and considers very carefully what projects to be involved in. As well as universities and other organisations

wanting to partner with us, Gurriny has developed our own research submission. Exciting news is that some of these applications were successful and will be undertaken in the next year.

Finally, I look forward to an exciting year ahead working in Gurriny. I would like to thank all the staff who worked hard throughout the year and especially in supporting the work I have undertaken. A huge thanks to the community and Members of Gurriny and all the best for the new year.

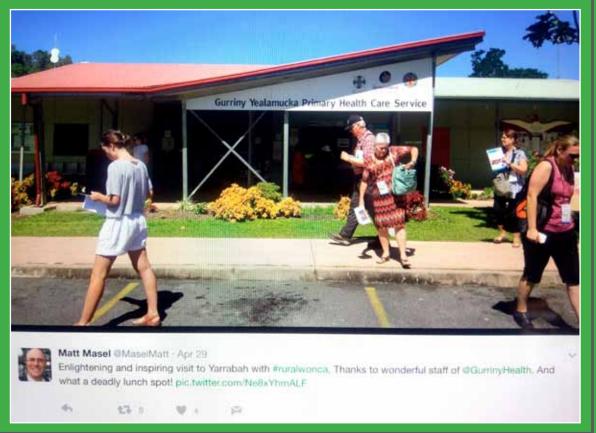




More than 50 conference delegates from the World Organisation of Family Doctors (WONCA) visited Gurriny as part of their participation in the 14th WONCA World Rural Health Conference held in Cairns from 29 April to 2 May, 2017.



Australian National University PhD Corinne Walsh was in Yarrabah for six months researching what Yarrabah community members think about ears, hearing, sore/runny ears and hearing loss.





Alicia Hari graduated from Charles Sturt University with a Degree in Business Management

Heart attack education with Claine Underwood from Queensland Ambulance

Keisha Neal and Petrina Bassini graduated with Diplomas in Business







Human Resources - Susanne Dale

It's been a very busy yet a very productive year for the team at Gurriny.

Gurriny has undertaken an organisational restructure which identified that some new roles were required to continue with the fast paced growth of Gurriny.



Due to the increasing need for patient transport and the facility Paul Munn took over the role of transport and facilities manager, Paul now looks after all aspects of the ever evolving patient transport and requirements of the facilities including Noble Drive and Workshop St. Due to the growth of the SEWB requirements of the community it was identified we needed a Wellbeing Educator to work with the teams. Megan Bayliss is a senior social worker who is working closely with the SEWB teams they are offering new programs and revitalising old ones. The expansion of the maternal and child health saw new health workers and an additional registered nurse for this area, they are starting to make progress and you will see them more involved in the community with the children mums and bubs of Yarrabah.

We also have a Parents under Pressure program and a Family wellbeing program both these programs are working closely with families of Yarrabah.

The chronic disease department undertook a revamp and is now referred to as the care

coordination team, registered nurse Margie Allen is now the team lead for this department. For the first time ever Gurriny has offered traineeships in health, four young community members are now employed as trainee Indigenous health workers.

Gurriny is also offering a young community member a scholarship. More information for this is available from the HR department or the CEO Ms Suzanne Andrews.

Gurriny has seen many staff achieving big things this year, some of our health workers has graduated as cert 4 health workers, Alicia Hari graduated from Charles Sturt University with a degree in Business Management, Petrina Bassani and Keisha Neal graduated with a Diploma in Business whilst Savanna Bulmer, Gwenda Farrelly, Florence Griven, Keleisha Bounghi and Debra Thomas all graduated with a cert 4 in Business Administration.

Ms Suzanne Andrews graduated from her leadership program which has seen her travel as far as Indonesia as part of her studies and the program.

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Clinical Data - Dr Kingsley & Dr Jason

Preventative health through transition

Preventative health means stopping diseases from developing or picking them up early so we can treat them before they cause harm. A lot of the work of the health promotion team and the clinical staff focuses on preventative health.

Antenatal care

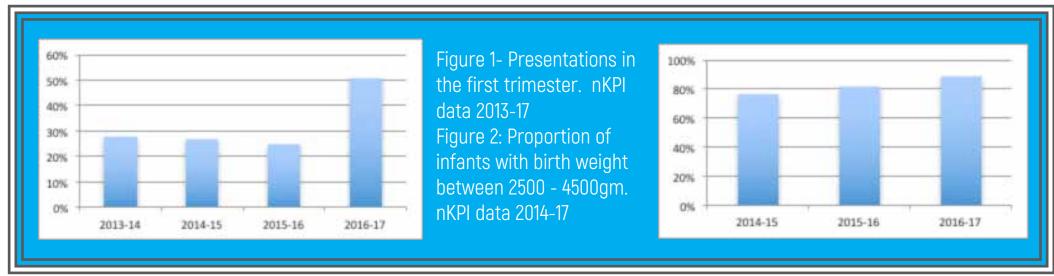
How a baby grows while in the womb has an impact on the rest of their life. Children who are born are a healthy weight are less likely to be sick as a child and more likely to be a healthy weight when they are an adult.

An important part of having a healthy baby is seeing a midwife or doctor early in the

pregnancy. Being seen in the first trimester of the pregnancy is the goal and the percentage of woman who have been presenting in the first trimester has been increasing at Gurriny. In 2017 over 50% of women presented in the first trimester. Ultimately we want all women presenting at this time.

The period of transition has seen a decrease

in the number of low birth weight babies. Almost 90% of babies were born with a birth weight greater than 2500gm. While this is an improvement, Yarrabah still has a high number of low birth weight babies when we compare our results nationally. Smoking in pregnancy is a key contributor and unfortunately over 50% of pregnant mums smoke.



Immunisations

Gurriny has one of the highest rates of immunization for children and adults in Australia. In 2017 almost 100% of children were fully immunized. However, there is an issue with timeliness with some children having their immunisations a few months after they are due.

Adult immunization is equally as important. A high number of people continue to be hospitalized with influenza and pneumonia,

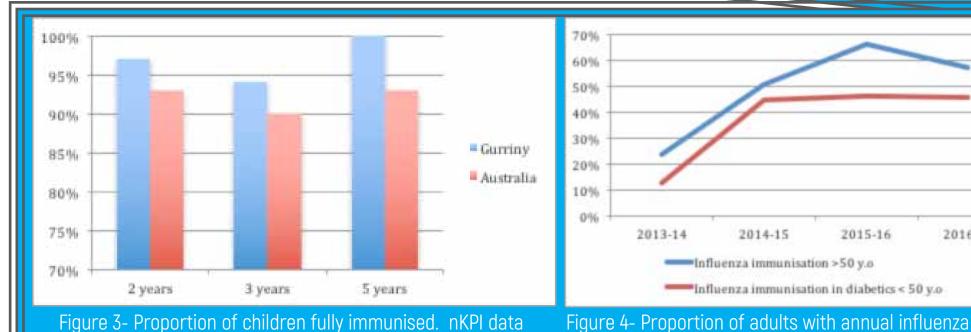
June 2017 vs. national immunisation data December 2015

and nationally Aboriginal and Torres Strait Islander people are four times as likely to be hospitalized for these conditions. All adults are eligible for an influenza immunization but it is particularly important to have an immunization if you are over 50 or have a condition such as diabetes.

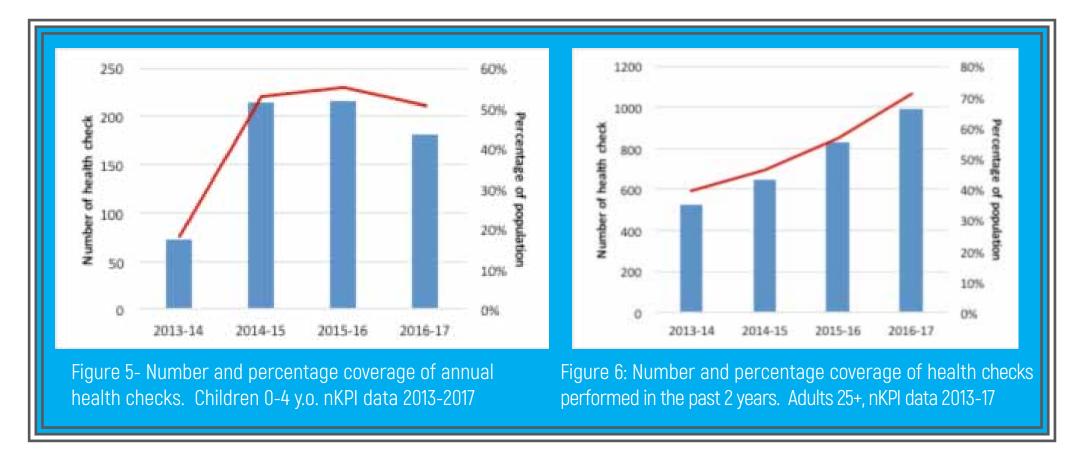
Gurriny improved coverage in flu vaccine around the time of transition and has maintained coverage at a higher than national average since then.



vaccination as of June 30. nKPI data 2013-17



2016-17



Health Assessments

Gurriny has rapidly increased the number of people who are having a regular health assessment. These look to pick up diseases early and develop a plan for good health with the patient. For children 0-4 Gurriny had a big increase around the time of transition and since then have maintained over 50% coverage in this age group.

For adults 25 years and older Gurriny has been increase the coverage of the Yarrabah population every year. In 2017 over 70% of adults have had a health assessment performed in the past two years.

In October 2017 Dr Kingsley Pearson was awarded GP of the Year by the North Queensland Primary Health Network.

Program Area Profiles

Child Health Team

There have been mixed results this year for Child Health. The team has struggled to implement all of the planned programs. There has been a decrease in the number of health checks. Immunisation rates remain high. The paediatric waiting list has decreased. The dental and nephritis programs have recently re-commenced. We are investigating new options for hearing health.

Problems have resulted from an increase in workload as well as the child health nurse taking unexpected leave early in the year. Support from the General practitioners, visiting specialists and other allied health professionals has been appreciated. Three new Health workers and another Child Health Nurse have been recruited and the new team have hit the ground running with improvements in clinical output.

Immunisations

Immunisation rates for the 0-5 age group remain above 95%. The 0-5 years flu vaccine program has seen an increase in uptake from 177 last year to 190 this year (up to 17/10/17). Those refusing the vaccine have also increased from 45 in 2016 to 53 this year. The percentage uptake of this vaccine in Yarrabah is significantly higher than the state average. The workload has increased again in recent months with the new catch-up schedule for

children aged 13-19 years. Most of this cohort did not access vaccines in high school and so the Child Health team have taken on this task. There are hundreds of children and adults (13-19 years) who need to be vaccinated.

Health Checks (715)

399 health checks between 1st January, 2017 and 17th October 2017.

447 health checks for the same period last year.

Nephritis Program

Re-started "no more Sore Packs" in July, 2017. Recent recruitment will allow us to implement the skin clinic 2 days a week on a consistent basis.

Dental program

Re-commenced the dental program in the school in August, 2017. Primary school students are supervised daily by their teachers in brushing. We have played a significant role in getting clients to the dental clinic.



Paediatric Clinic

The number of children awaiting paediatric review decreased from 86 at the start of the year to 25 today. This has been due to a number of factors. Cairns base Hospital paediatrics took on some of the referrals. The GPs removed some referrals from the list. Dr Heazelwood was recruited by GYHSAC and has been the major factor in reducing the waiting list.

Rheumatic Heart Disease

There has been a significant improvement in compliance to the bicillin regime for rheumatic heart disease. This has been due to RN Howgate and HW Adelaide sands doing home visits. This will result in a significant increase in life expectancy for these patients.

Ear Nose and Throat

Difficulties have continued in getting patients to attend appointments in Cairns. These problems have been exacerbated by administrative rules and red tape meaning people have been removed from the waiting list. We are in the process of identifying atrisk children and investigating alternative arrangements for them. We hope to elaborate on this in the near future.

Paediatric cardiology

The cardiology visits have been well attended.

Maternal Health

This year the maternal health team launched a new programme of care based on feedback from families in the community.

The model centres on the weekly development of the unborn baby and ties the mother's intervals of care in with that of her unborn.

We have created a laminated set of foetal images which mums are encouraged to use to create a time line on their wall at home, the time line outlines week-by-week development of the bub in words and pictures. We encourage all members of the family to become involved in the journey. We have approached the local Art Centre, to assist us in expanding this project. In an effort to promote ongoing self -care in pregnancy, we have utilised a funding grant

which has enabled us to create a number of packages which we give mums at various intervals.

- At their first appointment, our mums receive a bag containing a water bottle to encourage ongoing hydration, pregnancy massage lotion, multivitamins and a number of information resources.
- On completion of the gestational diabetes test at 28 weeks gestation, mums receive a maternity pillow and heat pack to assist with increasing musculoskeletal discomfort.
- A bag with baby clothing and toiletries is given to mums at 36 weeks and then a



- bag of hospital toiletry essentials is given to mums just prior to birth.
- We have also been able to create a postnatal bag, which contains nipple cream, baby barrier cream and infant massage oil and a tummy time mat.

Funding we have received has also allowed us to invest in more educational models and resources that have enabled us to add another dimension to our child birth education, these include a preterm baby model, a model of a baby affected by FASD, a drug affected baby and a baby which demonstrates damage caused to the brain through shaking. We have also invested in models of the developing baby and a model of the female pelvis. Our aim for next year is to join the youth health checks by creating 'interest' tables, utilising models and interesting object lessons to engage youth in conversation around the effects of alcohol and smoking in an unplanned pregnancy.

In the interest of improving exclusive breast-feeding rates in the community with the aid of funding, we have invested in three hospital grade breast-pumps and there has been continued interest in borrowing these machines.

We have placed a lot of emphasis on Foetal Alcohol Spectrum Disorder screening, prevention and awareness this day. Because of some of the initiatives, we have taken in the area we received an invitation to give feedback to the Menzies School of Health and then to the Federal Government on the work we have done in response to training received by Menzies. With the help of senior medical staff, we initiated the creation of a FASD multi-disciplinary steering committee with the purpose of improving our response to the screening, diagnosis and referral of patients at risk of FASD.

We have also increased efforts around smoking cessation and have seen a substantial increase in the number of women reducing and stopping smoking.

One of our other aims for the year was to see an increase in the uptake of the 6-week checks and this has proved successful.

A few statistics:

- We confirmed 74 pregnancies for the year;
- Offered 413 episodes of repeat ante natal care;
- Performed 684 home visits;
- · Performed 21 pap smears;
- 50 Alcohol Screens;
- 93 depression screens;
- 33 iron infusions we are seeing great improvement in our anaemia rates in children under one as a result of this intervention;
- 33 cardiotocographs;
- 76 newborn checks;
- 80 postnatal reviews;
- Inserted 19 Implanon Contraceptives;
- · Bedside ultrasound; and,
- 71 clients were seen by obstetric/ gynaecology visiting consultants.

Care Coordination Team

This year, the chronic disease Health Workers were re-named as the Care Coordination Team. The Care Coordination Team has continued to manage the visiting services clinics throughout the year, but they will also focus on providing ongoing education and support directly to clients to assist in the management of their chronic health conditions. Whilst much of this support will be provided in the clinic, the team will aim to be more community based. The Care coordination team prepares for and coordinates up to 15 Visiting Services Clinics each month, which includes Allied Health and Specialist services.

The Adult Health Checks have continued to be offered at Workshop St with good uptake by the community. The Care Coordination team will also be supporting a joint campaign by SEWB/Mens Group who are preparing to offer Mo'vember Mens Health Checks including an awareness campaign on preventative health.

ITC Program - Integrated Team Care

The ITC Program has been operating at Gurriny since July 2016 and is currently being facilitated by a Registered Nurse and an Indigenous Health Worker.

The Program aims to assist Aboriginal and Torres Strait Islander people to better understand and manage their chronic health conditions and to have better access to a range of health care services, community services and health care aids.

How to Qualify/Access this service

- 1. The client must be a registered PIP client with Gurriny and have a chronic condition.
- 2. The client is required to have a Health Check and a Care Plan from the GP.
- 3. Where the clients' needs are complex or they require a medical aid to assist with the management of their condition, the GP will refer them to the Program.
- 4. Clients will need to sign a consent to participate in the program.

The program staff assist clients to attend and manage appointments, to access specialist or allied health services which may not be provided in the community or easily accessible in the community, advocate for clients and assist clients to obtain 'approved' medical aids. Program staff also provide some clinical work within the community such as wound care and medication administration.

The ITC Program has had some great successes with clients who have taken ownership of their health needs and are self-managing their condition. Some of these clients are no longer reliant on our Program.



Health Promotion / Healthy Lifestyle & Cultural Mentor Team – Alicia Hari & Lucresia Willett

The Health Promotion / Healthy Lifestyle & Cultural Mentor Team is a newly formed team that emerged from the new organisational restructure of early 2017.

New to our team this year is the role of cultural mentoring. The aim of the program is to provide cultural awareness and knowledge to new Indigenous and non-indigenous staff that Gurriny employs or networks with.

The cultural orientation provides participants a better understanding of our

The cultural orientation provides participants a better understanding of our Community and our clients, it informs them of how the "Yarrabah culture" has shaped this Community, and provides participants methods on how to conduct themselves in a culturally appropriate manner in all aspects of service delivery in our Community.

Our team works across all teams within Gurriny and other internal and external service providers to offer health promotion/ healthy lifestyle advice and assistance to improve the health and wellbeing of Yarrabah people. We are heavily involved in Community Engagement activities and therefore provide strategies to partnering teams/services to reach their target audience as well.

We are also responsible for the administration of Gurriny's social media page and website, and developing health promoting resources for educational and awareness purposes.

Our team coordinated Gurriny's 25 Years Anniversary Community Event and Formal Dinner.

These two functions were attended by over 500 people. It was about highlighting Gurriny's achievements and celebrating the successes from its inception in 1991 and up to 2016.

Health Promotion / Healthy Lifestyle & Cultural Mentor Team have facilitated and worked jointly with stakeholders to raise awareness about a number of different health issues this year such as:

- Diabetes awareness
- Dental health awareness
- Hearing awareness
- Child Protection
- · Child Health and Wellbeing
- Healthy Lifestyle including nutrition, exercise and tobacco awareness
- Young Person Health Checks
- Yarrabah State School Careers Market
- Gordonvale State High School Wellbeing Expo
- Gambling Awareness
- World's Greatest Shave Cancer Awareness
- Kidney health awareness
- · Hygiene awareness, and
- Animal and Environmental health awareness









Our Health Promotion work with key stakeholders to deliver key health messages to the mob in Yarrie for programs and at events including:

- · Yarrabah Careers Expo
- Dental Health education with Queensland Dental Health at the Daycare & Pre Prep Centre
- Hearing Health Awareness
- Heart Attack Education with Claine Underwood from Queensland Ambulance
- Deadly Choice Program with students at Yarrabah State School, and the
- Environmental health Horse
 Management Program with
 Yarrabah Aboriginal Shire Council.







Social & Emotional Wellbeing

Grief & Loss – Mary Kyle and Dr Greta Galloway

The grief and loss program has been in operation at Gurriny Yealamucka since June 2014. This program was launched as a response to the number of deaths individuals, families and the Yarrabah community as a whole, face each year.

From January to 18 October (over 46 days). Greta Galloway and Mary Kyle have engaged 184 individual counselling sessions, three community critical incident debriefs, three family meetings, one young women's grief and loss group and one community healing group. Both of the latter were in direct response to community requests. The grief and loss program has a current case load of 64 clients, 50 females and 14 men. Data this year indicate that people are utilising multiple counselling sessions. This is really encouraging as grief and loss is a process that takes time to resolve/ heal. In addition, Greta and Mary have provided multiple referrals and support letters for people of Yarrabah, most frequently for purposes of housing, employment and court support.

We have had many stand out events this year. First has been the development of the SEWB/

Clinical Model of Care in which the grief and loss program participated with the SEWB team. There have been several instances of case conferencing between the medical, SEWB and grief and loss teams which indicate the use of this model in practice at Gurriny. Secondly, we were able to engage with the SEWB team at the presentation of this model at a regional SEWB conference held in Cairns this year. The SEWB team were deadly and Gurriny Yealamucka became a focal point for good practice in our region! Similarly, and thirdly, Greta and Mary presented the emerging Gurriny Yealamucka grief and loss model of practice at a national suicide prevention conference in Brisbane and have subsequently been asked to submit this presentation as a paper for publication in an international journal.

The work we have engaged this year would not have been possible without the incredible

support of all of our Gurriny leaders – Lee Yeatman and the Board, Sue Andrews, Ruth Fagan, Karen Dennien, Kingsley Pearson, Craig Ford. Suzanne Dale. Melanie Walsh and Paul Munn. Thank you thank you thank you. Most of all our humble thanks and appreciation go to the people of Yarrabah without whose support nothing would be possible. We are heartened by the number of people requesting particular grief and loss services from us. These requests and your participation in this program have all fed into the development of our model of grief and loss care. Our heart beats with yours in anticipating the day when our children and young people will not suicide; our community members will not die so much vounger than their deserved three score years and ten and chronic and other diseases become a thing of the past. May God be with all of us in our community healing endeavours.

Life Promotion

Social and emotional health is part of every person's wellbeing. It's about how we feel about ourselves and how we deal with conflict, anxiety, stress and depression.

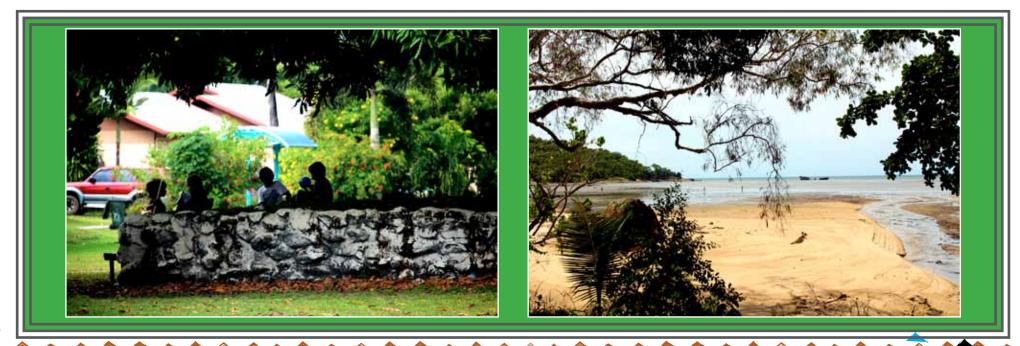
Grief and loss arising from the past act of the Stolen Generations is believed also to be a contributing factor for many of the social issues, mental health problems and high rates of suicide Indigenous people encounter today. The Family Life Promotion program provides counselling and referral support for Yarrabah clients who are dealing anxiety, depression, mental health problems and/or who are risk of suicide/self harm. We respond to assist and provide ongoing support to individuals and families in a suicide crisis. We also strive to increase awareness and prevention around suicide and social and emotional wellbeing for individuals, families, groups and the wider community.

Clients can be referred by health professionals, the police, or concerned family, friends and community members.

We work closely with the social and emotional health team within Gurriny Yealamucka Health Services, local Priests and Pastors, Yarrabah Police, as well as the Mental Health unit within Yarrabah Health Service and are part of the Cairns Suicide Committee.

There is a Yarrabah Community Flow Chart which is a guide to assisting people in a crisis situation, and who to contact in the event of an emergency. A Community Contact List of volunteers is also available.

Life Promotion Officers are on call 24 hours, 7 days a week on 0400 063 990. In an emergency call 000.



Men's Program – Darren Miller & Merton Bulmer

Gurriny Yealamucka Health Services, Social and Emotional Wellbeing, Men's Health Program is staffed by a Men's Health Coordinator and an Assistant. The program offers a number of activities throughout the year, to the men of Yarrabah to enhance and support their physical, social and emotional health and wellbeing. We are pleased to note in this report, that men from all age groups, from the youth to elders took part in the activities offered throughout the year. Throughout the year the Men's Health Programs received support by, as well as worked with the other program areas of Gurriny Yealamucka Health to develop and implement a number of the activities, to Yarrabah men, families and community members. This year the Men's Group were excited to relocate to Gurriny's Noble Drive building which was made available to be used as a Men's Space. Over these past 12 months a number of Yarrabah men have being assisting in some small renovations around the building including gardening and painting. The rooms are now set up and delivering arts & crafts, counselling, gym and dad's playgroups. The large powered shed is been cleaned up for woodworking activities and men of all ages are encouraged to drop in anytime for a chat.

Programs this year have included Yarn Up and Share, Family Wellbeing Program, Play Group and Dad's/Son's activities. The Men's team supported a number of community events including NAIDOC, Survival Day and many of the Health Promotion initiatives. The Men's Health Team would like to thank all the community members who have supported the program throughout the year with approximately 40 men per month participating in various activities though this service. Next year we look forward to continuing to increase engagement and encourage men to drop in to Noble Drive anytime for a cuppa.





Bringing Them Home

The Bringing Them Home program is coordinated by Kayleen Jackson (with lots of support from the SEWB team) and is located at Workshop Street (next to Gindaja Drop In Centre). Everyone is welcome to come along to programs every day except Monday afternoon and Wednesday morning. This year's activities included Life Story Journals / scrapbooking, arts and crafts, self- esteem awareness and health programs. New participants are welcome to join programs anytime except for the self-esteem program which you need to contact Kayleen directly to learn more about how to join. Throughout this year the BTH program has supported other team activities, Health Promotion and community events including Survival Day and NAIDOC.

An exciting time this year for BTH has being the setting up of Workshop Street so our programs can be delivered from there – prior to this it was difficult because there was not enough space out at the Bukki Road clinic. Now we have room to run arts and crafts, have people come in and deliver information

sessions and a quiet space for group and individual counselling. Based on the data that is collected every month this year we have been busy working with close to 40 people on a monthly basis either individually or through our group activities.

It has taken some time to set up the BTH space at Workshop Street and I am pleased at how welcoming the rooms are now becoming. I encourage anyone who would like to pop in for a cuppa to do so. I am excited for the upcoming year – the BTH plans are to continue to grow the program including excursions, more arts and crafts and opportunities to listen to speakers who can support community members to improve their wellbeing. A huge thank you to the SEWB team for their ongoing support and a special acknowledgement to those people who have spent time with me this year involving themselves in activities and helping me make the program better. Anyone who is interested in coming along - you are very welcome and please contact me on Kayleen Jackson 4226 4161 if you have any questions.

Wellbeing Educator

Gurriny created a new position based on the growing need and diverse program needs of the Social and Emotional Well Being (SEWB) team that sits within Healthy Lifestyles programs. The half-time position started in May 2017 and its focus is to educate and mentor the team into best practice in social and emotional wellbeing. The position is a dedicated Social Work position with a focus on the Social Worker using culturally and community appropriate approaches to engagement, program retention and evidence based practice.

The Educator works one on one in a mentoring capacity with the staff and runs training programs open to all staff as required. The educator works alongside individuals to demonstrate how to do tasks according to best practice principles.

In the coming year, the Educator will focus on networking the SEWB staff with external agencies as a way to increase professionalism, cross fertilisation of service delivery and to expose our staff to different areas and ways of practice. Additionally, professional presentations and writing articles are on the agenda to help raise the profile of our amazing SEWB team member's work and to increase learning and sharing opportunities.

A journal club is also on the way for the 2017 year: SEWB workers will read and discuss professional SEWB articles written by other Indigenous agencies across the nation so that they have literature reviews as a basis for planning and developing their own programs to suit the Yarrabah community.

Youth Services - Tamar Patterson and Paul Neal

"BE BRAVE BE BOLD BE UFLA" is the message we gave to inspire the youth for this year's Yarrabah Youth Forum.

The project objectives are to increase community capacity in suicide prevention activities, ensuring that the youth of Yarrabah (12-25 years focus) develop the capacity to withstand and cope with peer related risk factors and develop a strong sense of personal identity and purpose through cultural empowerment.

The Youth Forum was to talk to the Youth about self-empowerment around the two concepts of the NAIDOC WEEK theme "Our Languages Matter" and the National Youth Week Theme "Be bold, be brave, be you". This concept created the 2017 Forum theme "Be Bold, be Brave, be Ufla".

Invited Guest Speakers whom addressed the forum with topics on different forms of languages used in Yarrabah and why they matter.

Tamar Patterson in closing inspired the Youths with these words: "Always remember you're braver than you believe, stronger than you seem, smarter than you think and twice as beautiful as you'd ever imagined".

Youth Wellbeing have represented Gurriny Yealamucka Health Service in Promotions and

presentations across the community, state, country and worldwide. Presenting and representing in the regional and state SEWB forums along with the SEWB team. Paul Neal represented the organisation, community and country as an indigenous representative alongside Milton Mossman and other indigenous delegates throughout the country that travelled to Anchorage Alaska for the 2nd World's Indigenous Peoples' conference on Viral Hepatitis. Heavy losses hit the community throughout the year and the SEWB team were out to assist the community in many different ways to handle and cope with their grief and losses.

Community BBQs and group therapy lead by the SEWB team and







assisted by many Gurriny workers supplied the community with a safe place to socialise and catch up with families as well as providing the community with a filling meal and information's about programs, health checks and community functions.

Youths of Yarrabah felt the grief and loss of the community and the Youth Wellbeing promoted a weekend activity to accommodate the youth that were affected by treating them with a Movie session in Earlville Event Cinema as well as a Popcorn combo which created smiling faces and allowed them to be with friend and enjoying being youth.

The YWB team had attended home visits to promote and educate the weekend excursion, social wellbeing support and seek parental consent to attend this event.

- Home Visits targeting 35 invitees.
- Consulting with Cairns Bus Charters and Earlville event cinemas as well as GYHSAC finance team and managers.
- Supervision of youths.
- Transport youths to and from Yarrabah drop off points
- Debrief the event with SEWB team

Our team has around 150-200 contacts each month and community engagements include:

- YPC Workshop
- YPC Community Engagement
- Grief and Loss assistances
- Oganisational support e.g. (M.C, Visitors escort)
- Bimbi Cuddy Cuddy Projects
- Network Meetings
- Sexual Health Forums
- Mo'vember Men's Health Checks
- Promotion and education
- High duties within Organisation

More exciting news for the Youth Program and Gurriny is a grant from the Commonwealth to build a new youth space at Workshop St – this area will house a community kitchen and we hope to provide after-hour meals, laundry facilities and a shower/toilet area.

There will be some space to meet in private and hopefully an area to have some group sessions as well.

Keep an eye on the Workshop Street location as construction will start soon.



Transport & Facilities - Paul Munn

The Transport and Facilities Team focuses on providing transport for clients attending medical appointments and the ongoing maintenance, cleaning and landscaping at our three locations.

Our transport service plays a major role in helping people to access the health service in Yarrabah, Cairns the Dialysis Units. Indigenous Health Workers, Nurses, Admin staff and the transport officers all contribute to the program.

The reception team at Gurriny will make bus bookings for local trips and trips to Cairns. There may be times when a Health Worker, administration staff member or nurse will provide transport as appropriate. It is important to note that if a person is classed by the doctor as a "high risk" patient

(for example a pregnant mum who is very close to her due date) they will be required to travel to the hospital by Ambulance.

This year we have expanded our fleet and have a new 12-seater bus with wheelchair access. The new bus has helped to improve our services.

The facilities team work hard keeping the three buildings clean and well stocked with essential supplies. A big shout out to them for pitching in and supporting the health program teams with community events often helping to set up BBQs, marquees and preparing food.



On behalf of our team we would like to wish our community all the best, we look forward to the next 12 months and hope to continue to get better at what we do and provide a great service to everyone.



Events



There were rides and slides, players and performers, fireworks and food and, most importantly of all, the people of Yarrabah turned out in their hundreds to help Gurriny Yealamucka celebrate 25 years of incorporation as our own community-owned health service.

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CEO Sue Andrews said the day was a significant. hard and made that vision a mality. milestone

'In 1991 we became incorporated as Gurriny Yealamucka Health Services Aboriginal Corporation," she said.

"We started doing social and emotional wellbeing work before we went into clinical service delivery around 2009.

"Back then the need for our own communitycontrolled health services was recognised by our Elders and community people who have worked

"Today we have a staff of more than 60 people delivering holistic, comprehensive primary health cure encompassing clinical, social and emotional wellbeing services to our community."

It was a party everyone joined in, including former RN Rochelle Watson who sang her heart and soul, adding to the occasion.

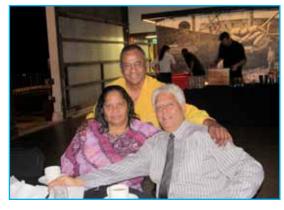
The night was finished off with a huge fireworks display, drawing crowds from all corners of the MORE PICS NEXT PAGE.

























Gurriny News August 2017



Commitment to Hepatitis eradication on Alaskan agenda for Gurriny workers

Gurriny Yealamucka's Health Worker Milton Mossman and Youth Worker Paul Neal were two of six successful scholarship applicants chosen from across the country to

attend the Second World Indigenous Peoples' Conference on Viral Hepatitis in Alaska in early August.

The two were highly recommended to the Department of Health to win the scholarships by the Cairns & Hinterland Hospital & Health Service (CHHHS) Queensland Health Viral Hepatitis Health Promotion and Hepatitis Australia for their commitment, initiative and leadership in the community.

Mr Momman said it had been a "massive" experience. Continued.



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Finance



Auditor's independence declaration

Auditor's independence declaration to the directors of Gurriny Yealamucka (Good Healing) Health Services Aboriginal Corporation Cama Corporate Town 19 Lake Street Came, QLD 4870 Camespecopers to PG Res 7008 Camp QLD 4878

T -61 7 4045 8888
F -61 7 4051 8718
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W eees granthombruchus

In accordance with the requirements of section 339-50 of the Carpuntium (Abariginal and Turre Strait Libraly) Act 2006, as lead auditor for the audit of Gurriny Yealamucka (Good Healing) Health Services Aboriginal Corporation for the year ended 30 June 2017, I declare that, to the best of my knowledge and belief, there have been:

- No contraventions of the auditor independence requirements as set out in the Corporations (Abinginal and Torres Small Lilander) Act 2006 in relation to the audit; and
- · No contraventions of any applicable code of professional conduct in relation to the audit.

Grant Thornton

GRANT THORNTON AUDIT PTY LTD Chartered Accountants

Helen Wilkes

HA Willers

Principal - Audit & Assurance

Cairns, 26 September 2017

Grant Thermion Audit Pty Ltd ACN 130.913.594 a subsidiary or related entity of Grant Thomton Australia Ltd ABN 41.127.555.389

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Statement of financial position

As at 30 June 2017

As at 30 June 2017 Assets	2017 \$	2016 \$
Cash and cash equivalents Trade and other receivables	2,083,928 43,131	1,536,049 66,222
Total current assets	2,127,059	1,602,271
Property, plant and equipment Work in progress	1,011,135	765,012 188,110
Total non-current assets	1,011,135	953,122
Total assets	3,138,194	2,555,393
Liabilities Trade and other payables Loans and borrowings Employee benefits	1,271,256 44,656 54,209	920,724 39,830 48,002
Total current liabilities	1,370,121	1,008,556
Loans and borrowings Employee benefits	7,383 63,909	49,984 60,933
Total non-current liabilities	71,292	110,917
Total liabilities	1,441,413	1,119,473
Net assets	1,696,781	1,435,920
Equity Retained surplus	1,696,781	1,435,920
Total equity	1,696,781	1,435,920



Directors' declaration

In the opinion of the directors of Gurriny Yealamucka (Good Healing) Health Services Aboriginal Corporation (the "Corporation"):

- the financial statements and notes are in accordance with the Corporations (Aboriginal and Torres Strait Islander) Regulations 2007, including:
 - giving a true and fair view of the Corporation's financial position as at 30 June 2017 and of its performance for the financial year ended on that date; and
 - complying with Australian Accounting Standards Reduced Disclosure Requirements and the Corporations (Aboriginal and Torres Strait Islander) Regulations 2007 and any applicable determinations made by the Registrar of Aboriginal Corporations under Division 336 of the Corporations (Aboriginal and Torres Strait Islander) Act 2006; and
- there are reasonable grounds to believe that the Corporation will be able to pay its debts as and when they become due and payable.

Signed in accordance with a resolution of the directors:

Director

	2017 S	2016 S	
Finance income Finance costs	14,274 (4,844)	19,156 (7,436)	ABBREVIATIONS
Net finance income	9,430	11,720	FNQ Far North Queensland GST Goods and Services Tax GYHSAC Gurriny Yealamucka (Good Healing) Health Services Aboriginal Corporation PAYG Pay As You Go withholding tax QUMAX Quality Use of Medicines Maximised for Aboriginal and Torres Strait Islander People
Results from operating activities Depreciation and amortisation expense	355,540 (94,679)	91,118 (96,721)	
Net surplus/ (deficit) before income tax Income tax expense	260,861	(5,603)	
Net surplus/ (deficit) for the year Other comprehensive income	260,861	(5,603)	
Total comprehensive income/ (deficit) for the year	260,861	(5,603)	37

