

**GURRINY YEALAMUCKA**  
HEALTH SERVICE ABORIGINAL CORPORATION

# Annual Report

## 2018 - 2019

## Gurriny Yealamucka Health Services Aboriginal Corporation

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Front cover: Staff Bonding Day, September 2019



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- Life Promotion
- Youth Wellbeing
- Social & Emotional Wellbeing (SEWB)

Clinical Services

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- Sexual Health

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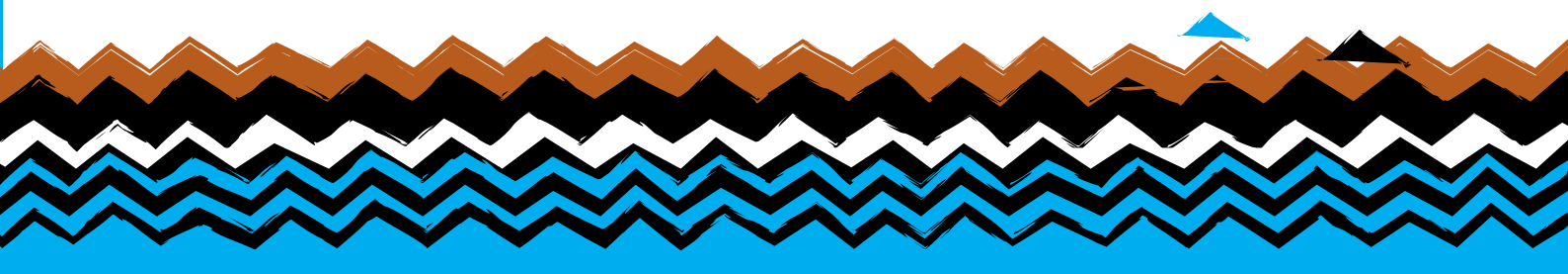
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# Yarrabah Community Profile



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.

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

The Yarrabah Health Committee was incorporated in 1991 after its 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'.

Gurriny Yealamucka Health Services is an Incorporated Aboriginal Association under the Aboriginal Councils and Associations Act 1976.

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

The core business of Gurriny Yealamucka Health Services 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 and Health Service, Queensland Health, Yarrabah Aboriginal Shire Council, Yarrabah Leaders Forum and the Commonwealth Department of Health and Ageing.

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

## ABORIGINAL CO-ORDINATING COUNCIL

NEWSLETTER VOLUME 1, NO 1: APRIL 1999  
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### Men's group formed from success of Family Life Promotion

Suicide in Yarrabah has taken a remarkable turnaround since the opening of the Family Life Promotion Program in 1995.

Coordinator David Patterson said the program was the result of the community getting together and coming up with its own ideas about how to address the problem.

"The community got together to try and find solutions and we decided at that meeting to implement the program," he said.

He said it was now almost two years since a completed suicide had occurred on the community.

But he said attempts at self-harm were still prevalent.

"When people go into a bit of bother they think the only way they can solve their problem is by doing self-harm," he said.

"But we go out and talk to individuals on suicide prevention and just try to focus their thinking in a positive manner.

"Any individual has the potential to go on and be something great in this community and this is what we struggle to get across."

He said the community was now used to having the program around and were actually using the services they offered.

And he said one of the most significant results of the program was the establishment of an ongoing men's group on the community.

"As a result of the Family Life Promotion Program we instigated a men's group on Yarrabah which has been running for a year now," he said.

"It's been pretty stable and this year we have changed our meeting night to Wednesday night instead of Monday night.

"The pleasing aspect was we seem to have more younger men coming to the group.

"The youngest is 15-years-old."

He said until now the emphasis had been on educational programs.

"We do educational programs on family dynamics, domestic violence and a whole range of issues that are related to the problems in Yarrabah," he said.

"But we're looking at becoming more action oriented this year, helping other members within the community and I think that's a top priority.

"We also want to do a video of the men's group with the history to the present day and where to in the future, so that's on the drawing board and will hopefully be kicked off in the next few months.

"We've had various phone calls from different centres about the group which is why we want to do this video, so it can be a resource not only for indigenous men but other men as well.

"We're also focussing on the youth, that's our priority.

"And we're now trying to get funds to try and incorporate and get funds for a coordinator."



Family Life Promotion Coordinator David Patterson

# Vision

Gurriny Yealamucka Health Services, 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.

To 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 in partnership with Cairns Hospital Hinterland & Health Service .





# Objectives

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;

To increase and maintain the health standards of the people in Yarrabah and surrounding areas by establishing an Aboriginal Community Controlled Health Service;

Incorporate Primary Health Care as the major foundation to serve multi-purpose community controlled Health Services;

Identify the priority requirements for improving the health standards and delivery of health services and programs to the people of Yarrabah;

To develop policies and strategies to promote and improve the health status of Yarrabah people;

To collect, coordinate and manage data and conduct research into matters relating to the health of the people of Yarrabah and surrounding areas;

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;

To network and coordinate health information with all other community-controlled health services in Queensland, Australia and overseas;

To be able to participate in social research studies in any other Indigenous Health Service in Australia, or other parts of the world;

To lobby local, state and federal governments and international organisations for financial aid;

To develop and implement education and training programs in all health areas on a needs-based service criteria.



# Chair David Baird



I write this report for the first time as the Chairperson of Gurriny Yealamucka Health Services after serving as a former-CEO of the organisation as well as a former-Director.

The role of Chair can be challenging but rewarding and I want to thank my fellow directors for electing and supporting me in my new role.

I want to also thank our outgoing Chairperson, Lee Yeatman, who has held the role over past year and has made it easy for me to step up and take over where he has left off.

Governing the organisation is our primary role and I want to acknowledge the importance of any organisation ensuring their governance platform is as strong as it can be as the only way forward.

It's the only way for us to effectively strive for, and deliver, the best possible health outcomes for our community.

Two new directors joined the board this year, Robin Schrieber and Brian Maloney, and I'd like to thank them for stepping up into their new roles.

It is always refreshing to have new people to throw fresh eyes and perceptions on the organisation's governance and direction.

This year Wugu Nyambil engaged the Australian Institute of Company Directors (AICD) to deliver corporate governance training for all of Yarrabah's Directors.

Our Board has supported this with ongoing in-house governance training and induction, as we do every year, because we believe it is crucial for our Directors to

maintain their professional development and keep our knowledge and skills up to date so we can effectively govern.

An important part of what we should all be doing as Directors is continually review our strategic plan, to make sure it is relevant to our core business and that we are on track with our deliverables and vision.

I can confirm that Gurriny is leading the way as a community controlled health service in achieving and meeting our target state and national health key performance indicators.

On the heels of another year of excellent financial management, with an unmodified audit, I'd like to congratulate our finance team for their hard work in achieving this.

I am proud to lead this organisation and proud of its achievements, as it continues to go from strength to strength. Some of our achievements this year have included:

- Successful submission of \$2.3M infrastructure funding to expand our outreach clinic on Workshop street;
- Our recently completed Youth Hub;
- Embedding Yarrabah's own family healing service model of care; and,
- Another successful year of the Young Persons Health Check.

Gurriny held its biannual 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 greater say in how we deliver health to our community.

I'd like to thank all our members for their participation, especially those have recognised the very important role they play by attending our general meetings and thinking about their vote, which is crucial.

Over the coming year we are looking forward to working on the following:

- Embedding our workforce strategy;
- Watching the development of the outreach clinic on Workshop Street;
- Addressing our community's social determinates through our health lens as part of Yarrabah Leaders Forum (YLF); and,
- Continuing to execute our strategic plan.

I want to acknowledge our CEO, senior management and staff for their commitment and dedication, and our Board of Directors for supporting me in governing Gurriny – without all of these people working as hard as they do towards achieving what we want to achieve, Gurriny would not be the thriving organisation it is today.

## Our Board of Directors are:

David Baird  
Robin Schrieber  
Brian Maloney  
David Williams  
Rob Gaison  
Julianna Cuda  
Sandra Houghton  
Linda Sexton  
Sharmaine Stafford

# Chief Executive Suzanne Andrews



Gurriny Yealamucka is a local Gungganghi name which means 'Good Healing'. Our service is located on the lands of Traditional custodians, the Gungganghi people of Yarrabah, and pays its respect to our elders past, present and emerging.

It was our Elders's vision for a community controlled health service that was responsive to the desires of the Yarrabah people that Gurriny is thriving today.

Our broader Health Services are our focus in this year's annual report.

Once again Gurriny has continued to deliver on our strategic plan hand-in-hand with the business of delivering our core business of primary health care services.

This year seen us think big and broad around what we do and how we do it.

We have begun to engage with research and that has started to influence our approach to service delivery and the management of our most prized asset which is, of course, our staff.

Over the next 12 months we intend to embed this new approach to our workforce and within our services.

We have become creative in how we are starting to think about addressing our community's social determinates through a health lens, which means we are working on far more than treating our diseases, we are now about 'keeping people well' and 'holistic care'.

Each of our program areas will highlight this in their reports.

I am proud of the Gurriny team who have

worked hard this year to achieve better health outcomes for our mob.

Through our programs they have collectively adopted our model of care to improve coordination between the clinic and social health, and the increase our engagement with allied health services.

It is because of this multidisciplinary approach that Gurriny is able to achieve outstanding health data results we have, as well as addressing the burden of disease in Yarrabah.

Key to these great achievements are, I believe, two things:

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

Our new community youth hub is now completed.

The hub will be a place for our young people to drop in, have a yarn about their health, what's going on in their lives or simply hang out with other like-minded youths and share stories.

At the hub they will always have an opportunity to be a voice for "what the youth of Yarrabah want to see".



Further to this Gurriny, through our Youth Summits, has developed a whole-of-community youth strategy which will ultimately see the formation of a new and widely supported Youth Council.

Our young people are our future and we must help to develop and encourage them to reach their full potential but, most importantly to us, keeping them healthy.

Our commitment to keeping our youth healthy is evident in our annual “Young Persons Health Check” which is now in its fifth year.

Once again this year was another success with more than 330 youths attending.

As part of our compliance obligations, this year we also completed our International Organisation for Standardisation (ISO) Surveillance Audit which is about ensuring continued compliance with national and international management standards.

Accreditation is a very important requirement for our funding bodies, and a way to make sure we have best-practice systems and processes in the organisation.

I am very pleased to report we have successfully maintained our accreditation, which is a credit to our entire Gurriny team.

We have continued to use our social media platforms to inform community and the wider sector about what’s been happening at Gurriny, particularly around program events, employment and sharing information.

We now have over 650 followers on Facebook and we are building our numbers on our Twitter page.

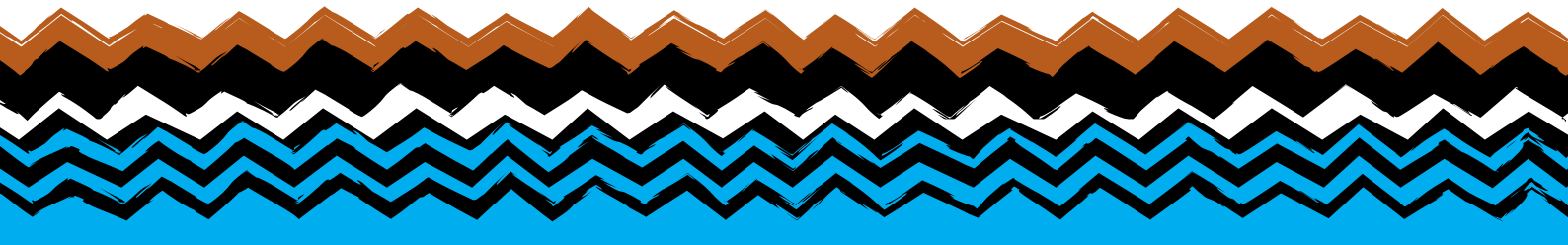
Gurriny’s webpage has also been revamped and is a good source to go, to see what is happening during any given month.

Yarrabah has had its share of sorry business over the past year and, as always, our staff continue to support our families during these times, with our deepest sympathies extended to the families who have lost loved ones.

It is always important to me to formally recognise and acknowledge the people of Yarrabah, who are our consumers: thank you for your trust and confidence in our service and staff.

Lastly, I want to thank the Chairperson and Board of Directors for their confidence in me as their CEO, and all our senior management and staff for their hard work, dedication and support over the past year.





# Human Resources Manager

## Susanne Dale

This year we have been busy recruiting for new and existing roles and program areas, which have required 23 new staff in total.

We have employed our own mental health professionals – two social workers and one mental health nurse.

We have welcomed several new doctors which means we continue to evolve with the various knowledge, scope, experience and expertise each different doctor brings to our practice. We have supported the Registrar Training Program which has meant some very good practitioners have been allocated to us.

Gurriny also auspiced funds to employ eight new staff following the introduction of the Remote Area School Attendance strategy to the Yarrabah State School.

Our Clinic Support Manager Chloe Sellwood won a scholarship to help her

obtain professional qualifications to strengthen her expertise.

We continue to support students with work placements and some of those students have subsequently been employed by Gurriny.

Six of our staff have welcomed beautiful new babies to the fold.

Some staff have left Gurriny to take up new opportunities with other employers.

In September this year Gurriny held a very successful staff/team bonding day with the theme being: DIVERSITY.

Our staff continue to undertake in-house and external training to enhance their knowledge and skills, to help serve the community of Yarrabah.



# Business Development & Research Manager Ruth Fagan



If we need answers about a health problem or want to know if something we are doing is actually working Gurriny's participation in research is key.

This financial year Gurriny participated in several ongoing and new projects with other organisations and universities as well as undertaking some research specific to us.

Research can benefit us but it is important that we don't do research for the sake of it, and we have a system in place internally to try and determine what projects we work on.

Key questions for us are:

- How is the project going to add value to the health and well-being of our clients?
- How is the project going to add value to our staff, and their ability to do their jobs better?
- What are the ethics behind the research and what are the impacts of this research especially if it is on a sensitive subject?
- Consent and confidentiality of individual people and our community is also very important and must be considered.

Projects Gurriny participated in during 2018/2019 included:

- Cardiac Project – this project is looking at Aboriginal and Torres Strait Island peoples testing and care when they present at the Accident and Emergency Centres in Cairns with chest pain. This project is important because Indigenous people are

getting heart problems at a younger age and if they go to the hospital with chest pain we need the doctors to consider that they could have something wrong with their heart and test them.

- Diabetes in Pregnancy – Aboriginal Community Controlled Health Services across the top of Australia including Northern Territory have partnered with Menzies Health to learn about and improve the care of diabetic women during pregnancy and women who experience gestational diabetes. The project has also highlighted an increase of diabetes in children and there is further discussions happening about how we can improve care and support for parents with diabetic children.
- APSGN (Acute Post-Streptococcal Glomerulonephritis) – this year we had an outbreak of skin sores with Strep that can lead to children been hospitalised because of kidney damage. Dr Jerry is looking at better ways to promote sore treatment and lowering the chance of the Strep germ spreading to reduce the risk of another outbreak. Dr Jerry is also evaluating the steps we took during the outbreak to help us stop outbreaks in the future.
- Evaluation of Transition 2 Community Control – Gurriny took over the delivery of Primary Health Care



## Pharmacy project taking out guess work

Keeping up to speed with multiple medications from several different sources for several different ailments can be a challenge but a Gurriny-supported pharmacy research project is hoping to change all that.

Consultant Clinical Pharmacist Pippa Travers-Mason, who has taken on several roles in Yarrabah's health services over many years, has been working closely with Health Worker Teresa Neal on a new initiative to take the mystery – and hopefully some of the pain or even danger – out of coping with multiple prescription drugs. The Integrating Pharmacists into Aboriginal Communities (IPAC) is a result of a three way agreement between the National Aboriginal Community Controlled Health Organisation (NACCHO), James Cook University (JCU) and the Pharmaceutical Society of Australia (PSA). "The project came about because the role of pharmacists in communities has been under recognised and there hasn't been a lot of coordination," Ms Travers-Mason said. "Having a pharmacist around can be helpful but it takes more than a pop-in, pop-out community pharmacy service to make sure people are safe and as well as

they can be on their medications. "This is about helping people to understand how to use their medicine, how to keep themselves healthy or make themselves healthier. A lot of the people in the community have to manage multiple conditions and multiple medicines and multiple different specialists they see and it gets very, very confusing. "We also find people either don't have things explained to them adequately, because when you're in hospital and you're unwell it's very difficult to take in that information, or there are several specialists involved in several different aspects of care, which can mean different people telling them different things according to different priorities." She said overall management was important so they could work on the absolute best for every individual concerned. "Working with Aunty Teresa has been fantastic, she's a real guru," she said. "We've actually kept people out of hospital through intervening where medications have



clashed, which is not necessarily a mistake on anyone's part but a problem which hasn't been identified or recognised. "And that's where Teresa comes in because everyone will talk to her, tap her on the shoulder and say, 'I think so-and-so needs help with her medicine'. She's the health worker in charge and people know her for her skills." She said they were keen to sign people into the program. "Anyone who is on multiple medications is welcome to come and see us," she said. "We can help with all aspects of your medication from whether you can read the labels because the type is too small through to making sure every aspect of every individual regime is thoroughly understood. "We know having a pharmacist around, as part of anybody's medical team, makes a difference to patient outcomes, the aim of this project is to prove that."

## Transition evaluation shows overall improvements

Australian Aboriginal community-controlled health services (ACCHSs) are grounded in the culture and values of their respective communities and provide services that reflect the unique needs and aspirations of each local community.

As an expression of self-determination, more than 150 ACCHSs provide health care to urban, rural and remote Aboriginal communities across Australia.

Yarrabah was the first Queensland Aboriginal community to transition Primary Health Care (PHC) services from Queensland Health operation to Aboriginal community control - through Gurriny Yealamucka Health Service.

Four years after the hand over, this review answers three questions:

1) What supported the transition of the delivery of PHC services to Aboriginal community control in Yarrabah, and what were the barriers to the transition?

2) Has transition to Aboriginal community control achieved better health care and health outcomes for the Yarrabah community?

3) What are the economic costs and benefits arising from introducing Aboriginal community control of PHC in Yarrabah from a health care system perspective?

The results will help to inform further development to meet increasingly complex and dynamic social, economic, political and health environments in Yarrabah and improve the design and delivery of other such transitions.

There were several key factors which drove the process of transition

to community control in Yarrabah, and which continue to drive service improvement and community development efforts today.

Based on the aspirations of the Yarrabah community, leaders saw a need for comprehensive, culturally appropriate health care that was responsive to community health needs.

Another factor driving the transition has been an ongoing process of increasing local self-determination and autonomy in Yarrabah.

Underlying the entire transition journey was a core process of building capacity in the Yarrabah community, and particularly within Gurriny, to manage and deliver local PHC.

One of the objectives of transition to community control was to increase the total amount of health funding flowing into Yarrabah while reducing reliance on government grants.

Since transition, the Workforce numbers and mix of workforce skills required to maintain service delivery under Gurriny's model of care have grown considerably.

Overall, staff numbers increased by 71%. The proportion of the local Indigenous workforce has been maintained at high levels, with 58/76 (76%) positions filled by Indigenous people in 2017-18.

Gurriny's health care performance must

be measured against the backdrop of a high burden of disease present in the Yarrabah population to fully understand how well the organisation has performed.

Gurriny has demonstrated very strong performance in chronic disease management throughout its transition to community control with considerable improvements in both processes of care and, importantly, in intermediate health outcomes from 2012 to 2017.

There has been an upward rising trend in Potentially preventable hospitalisations (PPH) of Indigenous people residing in Yarrabah over time, with the most notable increase at and in the year after transition to community control.

In 2017-18, Gurriny spent \$6.17 million on staff salaries and the flow-on effect of employment from this expenditure was an additional \$1.54 million.

Overall, health data shows improvements in monitoring of the indicators however, ongoing annual monitoring and reporting against outputs, health care performance, and intermediate health outcome indicators and secondary and tertiary health care utilisation is necessary.

Continued evaluation of the impacts and economic benefits of transition of PHC services to community control in Yarrabah will help Gurriny to improve services into the future.

Summarised from: *Transition of primary health care services in Yarrabah to community control: Project Report for Gurriny Yealamucka Health Service* by Sandra Campbell, Crystal Jongen, Irina Kinchin & Janya McCalman



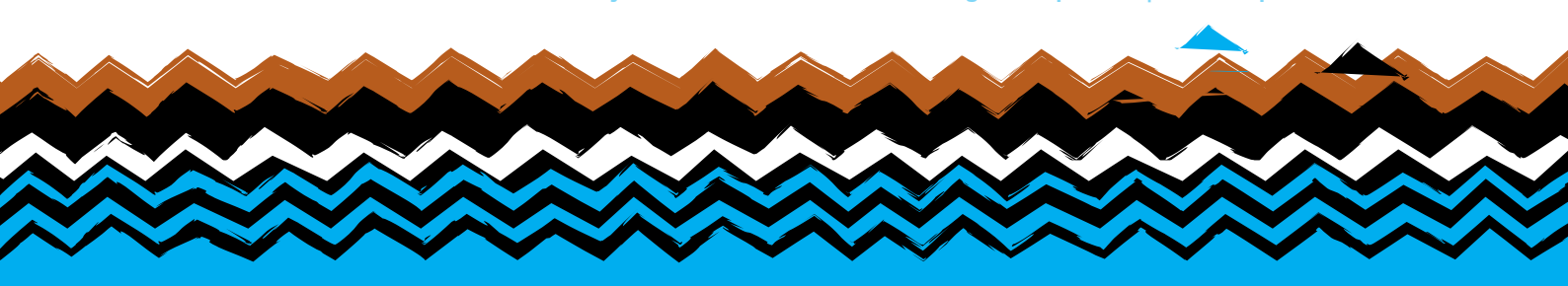
*Pages from Gurriny News:  
Left: December 2018; Above: July 2019*

Services five years ago, in 2014, so this project with Queensland Health looked at where we were this year compared to then. The project found that Gurriny has expanded our services, more people are visiting the clinics to see our Doctors and attend our programs, so much that we are now well above the National averages including for our childhood immunisation figures. Queensland Health is looking at this report and hopefully Gurriny's success will support other communities to take over the delivery of their health programs.

- 'Working Well' – Gurriny's expansion has also meant a larger workforce and this project was undertaken to look at ways to improve/support people who work at Gurriny. The project was just recently completed and the report findings provided to the Board with a range of recommendations. Over the next 12 months we will be looking at ways to implement them.

As well as research during this period Gurriny successfully applied for funds to redevelop the Workshop Street clinic and construction will be underway in 2020.

Overall the year was very productive and Gurriny continues to grow and improve.



# Health Promotion

Our Health Promotion (HP) program at Gurriny delivers a range of education and awareness sessions promoting good health.

The Deadly Choice program has continued to grow and now includes Healthy Lifestyle, Smoking Cessation, Elders Games and Nutrition education sessions.

During this year the HP team has been a part of special events with Mamu (Innisfail), Mulungu (Mareeba) and Wuchopperen (Cairns) Health Services to compete in cricket and basketball.

Gurriny and Mamu also partnered in a Deadly Choice day at Innisfail to support the Yarrabah Seahawks and Innisfail Leprechauns playing against each other in the Cairns and District Rugby League competition.

Health Promotion also provided supported to a number of Gurriny program events including the Men's Forum, Young Person's Health Check and

most recently, our annual Breast Screen Clinic.

During the 2018/2019 period the HP team delivered education sessions at the Yarrabah Primary and Secondary Department, the Elders Group and the Seahawks Football Club.

A very positive sign was the number of people who indicated their interest in giving up smoking, although the majority were still working towards this goal, they have taken that first step.

In 2019/2020 the Health Promotion team hope to be more involved in supporting our Gurriny programs to increase awareness of ways to stay healthy with a focus on prevention.

We hope to support more people to stop smoking and increase exercise and healthy eating.



# Senior Medical Officer

## Dr Jason King



There have been some significant challenges for Gurriny this year and I've very happy to report these have been met headlong and resulted in some fantastic outcomes for the service and community at large.

Once again, our patient numbers have continued to grow with over 3,400 regular patients accessing the service.

Following on from last year's mumps outbreak, two significant public health issues emerged.

The first was an outbreak of Acute Post-Streptococcal Glomerulonephritis (APSGN) earlier in the year, which saw more than 950 children successfully screened.

This massive effort from Gurriny and the community resulted only four cases recorded overall.

Secondly, the emergence of Rheumatic Heart Disease as major issue in Yarrabah has meant a more thorough evaluation of our program is needed moving into 2020 so we can meet this problem headlong.

As the numbers continue to grow I'm confident our efforts will show similarly positive outcomes in the years to come.

Gurriny remains a leader across Australia in the delivery of comprehensive Primary Healthy Care, something all our staff and community should be proud of.

### Health Checks

Central to our success are our annual Health Checks.

This year's Young Persons Check saw over 350 young people between 15 and 25 complete their health check.

Gurriny sits in the top 25% of all health

services across the country in health check delivery.

These checks have grown in size over the years to be an amazing and comprehensive view into the lives of our patients and have lead to some fantastic early interventions.

### Child and Maternal Health

Our maternal and child health teams have faced significant challenges this year but continue to do amazing work in spite of this.

For the first time Yarrabah now has 100% of all children immunised a national record that stands us in good stead to head off preventable infections four our children as they grow and develop.

Out of the 65 births in the last recorded year, 85% of those children's weight was up 5% on last year, and we can now report 80% of Yarrie kids were born at normal weight.

### Eye Health

The last half of 2019 has seen a huge leap forward in Gurriny's Eye Health Program.

The service was finally able bring on board a new Optometrist and took delivery of new state-of-the-art eye screening equipment.

Now all staff have been trained in its use so the community can access eye checks, which will go a long way to addressing the eye health of Yarrabah.



# Director of Operations

## Karen Dennien



Continuing growth in our services and consolidation of our business operations platform have been the highlights of 2018-2019.

Growth has been achieved through two factors:

- service enhancement – an increase the quality, cost efficiency, frequency and accessibility of current services in the environment in which the organisation operates.
- service development – the addition of new services and in particular in Gurriny's context this relates to social, well-being and community service offerings to address the social and cultural determinants of health.

Our growth is measured through three indices:

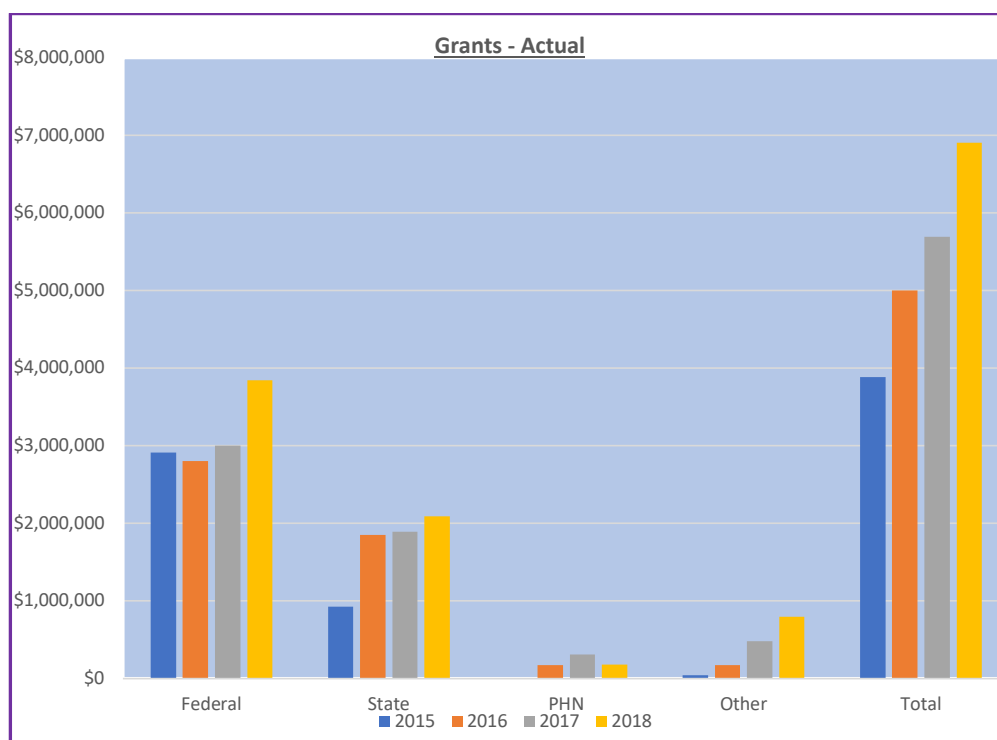
- Revenue Growth
- Service Growth
- Workforce Growth

### Revenue Growth

The majority of Gurriny's income is sourced from Commonwealth and State Government grants.

The Commonwealth Government is the largest funding source, supplying the majority of the grants and income in 2018-2019, as indicated in Table 1.

*Table 1*



Consistent with the Board’s strategic intents, Gurriny has enhanced its capacity to address some of the social determinants of health and has received funding to provide, for example, specific family healing and wellbeing services, construction of a Community Youth Hub; smoking cessation programs, and enhanced school attendance programs – Remote School Attendance Strategy (RSAS) program during 2018-2019.

Clearly service and revenue growth must also embrace workforce

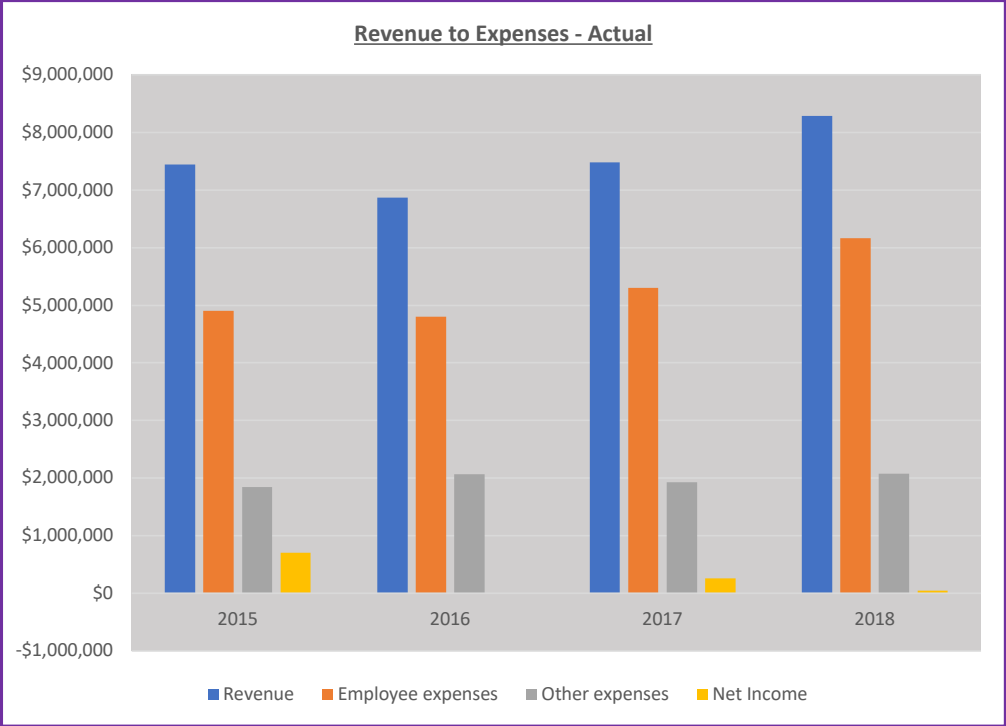
growth – the three are inseparable and counterbalance each other.

Staffing expenditure to income remained stable at approximately 70% of expenditure during 2018-2019, a common benchmark in the health industry.

Non-salary expenditure has also remained stable across the period despite revenue increasing.

This indicates that funding increases have primarily been absorbed into salary expenditure and workforce growth as indicated in Table 2.

Table 2



## Service and Workforce Growth

Gurriny's workforce had grown to over 100 staff in 2018-2019, a 30% increase since 2016.

At the end of 2019 workforce composition and numbers of employees (part time and casuals included) are indicated in Table 3.

**Table 3**

Employee Classification	Total Numbers	FTE	PTE	Casual
Medical (including SMO)	7	6	2	
Nursing	9	6.3	6	1
Indigenous Health Workers	15	15		
Administration (including medical reception)	7	7		
SEWB workers	8	8		
Mental health clinicians	3	3		
FWB workers including PuPs	5	4.6	1	
RSAS workers	6	6		
Quality and Risk	2	2		
Health promotion	5	5		
Senior managers	5	5		
Operational managers inc RSAS manager	5	5		
Transport staff	8	4		4
Support Services	5	2	3	2
<b>TOTAL</b>	<b>104</b>	<b>78.9</b>	<b>15</b>	<b>7</b>

Due to additional funding increases since 2018-2019, there was additional and expansion in the following services:

- maternal and child health servicing (additional child health nurse, midwife and health workers);
- social and community programs in relation family and mental health services and youth wellbeing;
- the RSAS program - reducing Yarrabah school children absenteeism;

- smoking cessation promotion program, through the Deadly Choices initiative;
- sexual health with the addition of a sexual health nurse under a time bound project (North Queensland AICCHO STI Action Plan) lead by QAIHC;
- capital investment funds for the development of a Community Youth Hub.

In summary, Gurriny exceeded all targets in revenue, service and workforce growth for the period between 2018 to 2019.

## Business Operations

Service and workforce growth cannot be achieved unless there is a strong business model and effective operational systems and processes in place.

Gurriny continues to provide a well-structured, efficient and effectively managed corporate

governance system that is predicated on quality, continuous improvement, risk management and compliance.

The quality and effectiveness of our business and operational systems is measured each year under our



accreditation to the International Quality Standard ISO 9001:2015.

2018-2019 was no exception and Gurriny again was externally assessed as compliant to the International Standard. It has been very pleasing to see the evolution of our quality, risk and emergency systems to a very high maturity level to complement the growth in services and workforce in the organisation.

This was further borne out by Gurriny's development of clinical governance systems to match the growth of service type and complexity. This can be related to, for example, the creation and implementation of Gurriny's Clinical Governance Manual and Guidelines for the Family Healing /Mental Health Services utilising the National Mental Health Standards as the guide for practice and implementation.

Several significant reviews and evaluations were also undertaken during the period. Of major importance has been the review of the funding and building leasing contractual arrangements with the Cairns and Hinterland Hospital and Health Service.

This review is still underway and will be completed shortly.

The North Queensland Primary Health Network Integrated Team Care funding arrangement was also reviewed during the year. The review concluded the funding system should be changed over the next financial year.

Gurriny's service model for ITC was very sound and has influenced how the funding model will be rolled out in the future.

Gurriny was successful in receiving funding from the Pharmaceutical Society of Australia for the operation of our contracted pharmacist under a new

trial project, 'Integrating Pharmacists into ACCHs to improve chronic disease management (IPAC)'.

The project aimed to support and enhance patients, community member's understanding of medications, their use and relationships to our GPs and the treatment of their illnesses. Unfortunately, at this stage it is unlikely funding will be continued beyond December 2019, further advocacy will proceed at the NACCHO level.

Internal organisational operations were also reviewed with some realignment of teams and functions.

The Child and Maternal Health team was joined with the Care Co-ordination team as part of an expanded and newly created Clinical Services Team. The purpose of this move was to align all of the clinical health care teams with a clinical health outcome focus. The team was previously located with the Social and Emotional Well Being team.

The latter team is more focused on addressing the social determinants of health rather than clinical health outcomes.

With the creation of the Clinical Services Team a new Clinical Services Manager's role has been created.

This is a senior clinical role to support the Senior Medical Officer and Director of Operations in strengthening and managing clinical practice, clinical services and clinical risk within the organisation.

With the movement of the Child and Maternal Health team, the Social and Emotional Well-Being team will expand into the social and community program area and start addressing the Board's strategic intent in regard to social determinants.



# Quality and Risk Clay Mitchell

‘Setting high standards – creating a positive work culture throughout Gurriny’



The 2018/2019 year has seen Gurriny mature into a community run organisation with exceptional systems and processes that have been recognised through successful certification audits and other organisations in the health sector.

Most important is the way our people have embraced and actively used these systems, which has proven the real measure of our success.

Over the past year, the Quality & Risk team have focused on providing training and support with a philosophy that if we can empower our staff with skills and knowledge, we can achieve greater ownership and understanding, which ultimately influences the standard and quality of care we provide the community.

This year has seen the most comprehensive review of our clinical standards since transition, with myself and Quality Support Officer Keisha

Neal engaging with the clinical team in preparation for re-accreditation of our Royal Australian College of General Practitioners (RACGP) certification due in early 2020.

Quality and risk improvements have included:

- Accreditation modules for International Organisation for Standardisation accreditation, risk management and RACGP standards initiated and completed;
- Mock RACGP audit completed with Queensland Aboriginal and Islander Health Council (QAIHC);
- Review of all current policy, plans and procedures – ongoing;
- Customisation of documents and feedback forms to each work unit; and,
- Establishment of electronic systems management tool champions in LogiQC throughout the organisation.





One of our prime areas of focus has been embedding the idea the quality of our communications processes plays a fundamental role in our success.

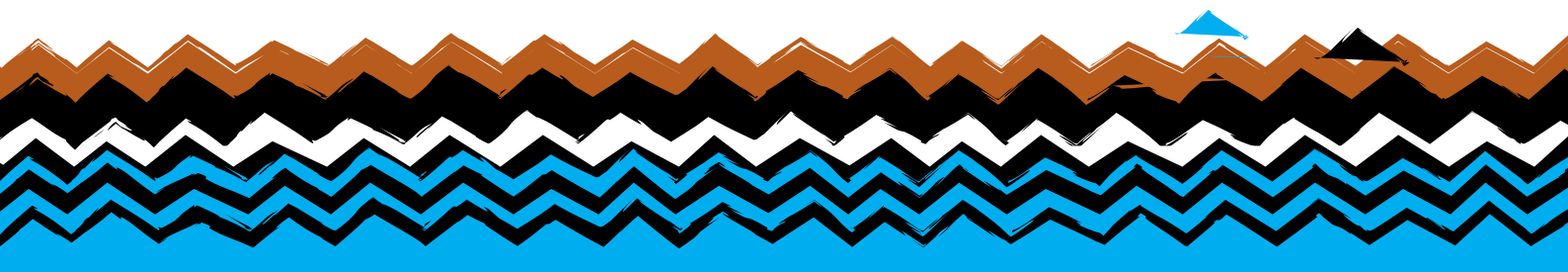
The development of meeting templates, compliance schedules and procedures through to ensuring the staff contact list is current has seen healthy advancement in overall communications, improvements and a heightened level of professionalism throughout the organisation.

As part of our strategy to improve the resilience, quality and continuity of our services, the Quality & Risk team have collaborated with Cairns and Hinterland Hospital and Health Service and the Emergency Department Yarrabah in

developing strength through shared processes as part of our emergency preparedness.

To facilitate effective planning and enable recovery and delivery of our services after an emergency event such as a cyclone, bilateral management of our emergency preparedness with other essential services within the community will form one of our focus areas in the coming year.

As an organisation our past and continued success has been the result of the work of our Gurriny teams in challenging failure, looking for solutions and taking pride in the delivery, quality and professionalism of the services we provide to community.





# Community Services

## Men's Health Program

The SEWB Men's Health program develops and offer programs to support the physical, social emotional and spiritual wellbeing of men and families in Yarrabah. Our achievements and highlights for the year include the following.

### Men's Group

Men's Group is held regularly at the Men's Space at 9 Noble Drive on Wednesdays offering men an opportunity to yarn and share in a culturally appropriate and confidential space.

An addition to the program is an offer to participate in a strength and conditioning session at the Yarrabah PCYC supervised by a qualified Sports & Recreation Officer.

Every three months the Men's Group also offers a Dinner Night at a venue in Cairns for men to take part in.

Some funds toward these dinners are raised through a Recycling Program conducted by Men's Group.

The Yarrabah Men Group has also renewed their membership to the Australian Men's Shed Association.

### Mo'vember 2018

In support and awareness of Mo'vember in 2018, during the month of November, the Men's Health Program worked with the Clinical team to promote and offer health checks to men which was supported by several special and engaging initiatives.

### Men's Space

The Men's Space is situated at 9 Noble Drive where men are welcome to come in at any time between 8am and 4.30pm each weekday to either attend a program or just for a yarn over a cup of tea, coffee, water and a feed.

It is a safe Space for the men where they can take part in any program offered and supervised by our Men's Health Program staff.





## Yarrabah Dads and Their Kids (0 to 12 years) Program

The Yarrabah Dads and Their Kids Activity has been a part of the Men's Health Program since 2016.

It is a significant initiative of the program, funded by the Australian Government through Mission Australia.

The program aims to create a group that builds interaction, and the knowledge and skills of fathers and father figures.

It is also an opportunity for Dads to get together in a relaxed, informal environment and interact with their children.

The following Yarrabah Dads and Their Kids activities were offered during the year:

- Healthy Food Garden;
- Healthy Cooking and Dinners;
- Under 5s Day; and,
- Out & About in Community Day.

## Men's Forum 2019

A two-day Men's Health Summit was held in June as part of Men's Health Week 2019 at the Yarrabah Hall.

The Summit provided an opportunity for men and services to come together to yarn about particular men's issues and to put forward strategies and ideas about services available to support them.

## Awareness & Support for Significant Events (Dates)

Other activities conducted by the Men's Health Program to support and create awareness around significant annual days and initiatives included:

- White Ribbon Day in November;
- Domestic and Family Violence Prevention Month in May; and,
- Men's Health week in June.

Staff attended training and development programs during the year, and reported and evaluated activities implemented according to the yearly work plan.

We will continue to develop and deliver our yearly work plan and work with other Gurriny programs to offer the best service we can to our men and their families in our community.



## Life Promotion

Life Promotion Officers have worked with other Gurriny programs as well as networking with other internal/external service providers such as Thrive, Lifeline and the Dr Edward Koch Foundation to get further support for our clients and our community in 2018-19.

We provide intervention support and promote prevention to those who are considering self-harm.

We engage with our clients to help them know how to keep safe, how care for themselves and how to care for each other.

We encourage our clients to come in for regular health checks and/or to join a Men or Women's group for support or to meet with others for a yarn.

We need to be strong and work together to stand against suicide in our community, it is not our culture nor is it our way.

The Yarrabah Community Crisis Referral Pathway consists of a list of Yarrabah people who have nominated themselves voluntarily and are willing to talk and listen to anyone who needs help.

The Crisis Referral Pathway is on call, day and night.

Our Life Promotion team has participated in and supported:

- Presenters at the National/International Suicide Conference in Perth;
- NAIDOC week;
- Child Expo;
- Survival Day;
- Group Debriefing & Referrals;
- Provide 'Sorry Business' packs;
- Grief and Loss;
- Young Persons Health Check;
- Youth Forum;
- SEWB Engagement Day;
- Family Healing Service; and,
- Family Wellbeing.

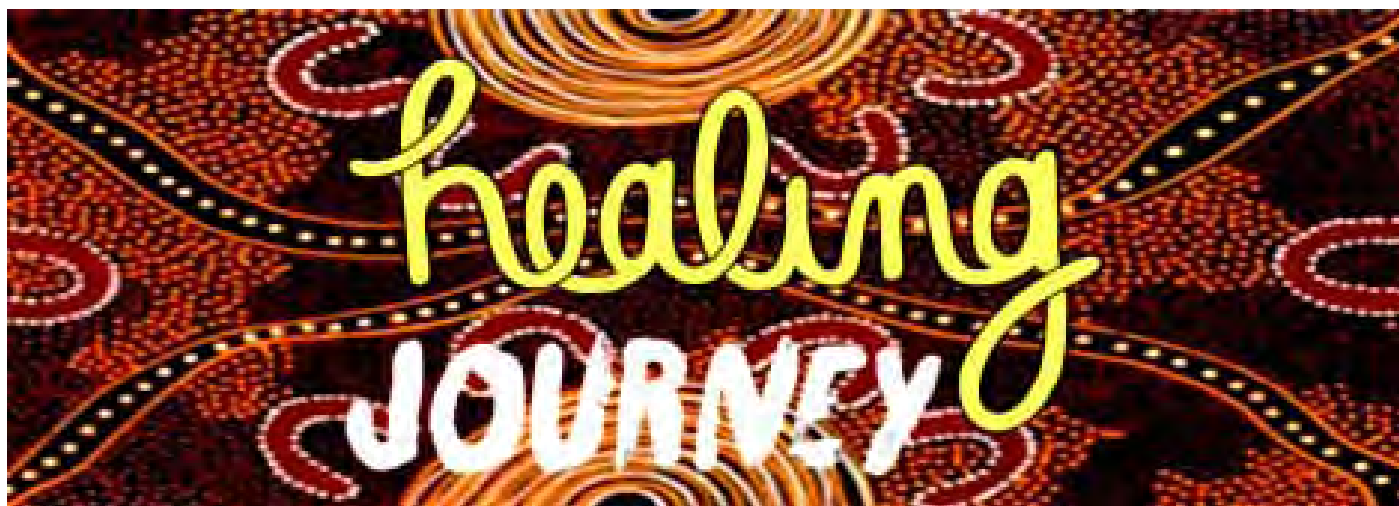
Remember to ask your family and friends if they are okay. This could make a difference in their lives – we do not know what people are going through, showing this supportive gesture may help someone when they really need it!

To contact the LPOs call 0400 063 990.

In any emergency always call 000.

## LIVE YOUR LIFE, LOVE YOURSELF, LOVE YOUR LIFE





## Social & Emotional Wellbeing (SEWB)

Family Pathways to Safety in Yarrabah is funded by Prime Minister and Cabinet and delivered by our Social & Emotional Wellbeing (SEWB) Project Coordinator Tamara Maisema.

This Healing Journey project helps to promote strong and resilient community members as they progress through healing from the impact of past trauma, dispossession, racism, separation of families, ongoing social disadvantage and other historical, social and cultural issues that have impacted on the social and emotional wellbeing of individuals and families in the Yarrabah community.

The project provides access to counselling, healing groups and individualised support for grief and trauma over the loss of their connections to family, identity, land, language and culture.

The Healing Journey follows the therapeutic recommendations of the 'National Strategic Framework for Aboriginal and Torres Strait Islander peoples Mental Health and Social and

Emotional Wellbeing 2017-2023' and is delivered through cultural renewal activities such as dance, song, cultural practices, therapeutic craft activities and educational sessions, which build leadership capacity and opportunities for community members.

Throughout this year the project coordinator also collaborated with several Gurriny teams, such as the Women's Health SEWB program, to deliver components of SEWB support and education for Stolen Generation members and families.



### 2019 Activities included...

- Expeditions connecting country and culture and including fishing, gathering and exploring country;
- Connecting families to Link Up client support and intake, family history research and SEWB support groups;
- Cultural art workshops at Yarrabah Art Centre;
- Cooking, homemaking and therapeutic craft activities such as sewing, jewellery making, painting and pottery;
- Yarning circles;
- Women's health and wellbeing activities and education in conjunction with Gindaja Treatment & Healing Centre; and,
- Individualised and group delivery of SEWB education and support.

### Significant events

- Hosting Reconciliation Morning Tea Luncheon;
- Supporting Gurriny's Positive Parenting program;
- Supporting 'Tucka Time', a healthy cooking and wellbeing program at Djarragun College;
- Facilitating Link Up and National Redress Scheme information days in the community;
- Facilitating a Suicide Prevention Day Cultural Rainforest Tour with Alfred Gray Jnr;
- Facilitating an information session about the Stolen Wages Class Action (BELAW – Bottoms English Lawyers); and,
- Coordinating and supporting Breast Screening Sign-Up days and their visiting clinic.

### Further Projects

- Facilitate a Healing Forum in Yarrabah; and,
  - Community based healing camps.
- During 2019 and 2020 the project hopes to support the Men's Group to promote a healing journey from past trauma and separation from families.







## Youth Wellbeing

This year the Youth Wellbeing Team has once again worked closely with several Gurriny teams to deliver youth friendly programs and encourage engagement with services, community and their peers. Our highlights for the year include the following.

### Youth Forum

#### Wednesday 26 September 2018

This Forum was for youths of Yarrabah aged between 15- and 25-years-old.

The theme was “Actions of our past creates the ripples of our future”, influenced by the 2018 NAIDOC theme, ‘Because of her we can’, and the 2018 Youth Week theme, ‘Jump in. Make a Splash’.

Our target was 100 attendees and we are pleased to report 104 attended including our facilitators, guest speakers and parents.

Guest speakers spoke on specific topics and their ripple effects and included Gurriny CEO Suzanne Andrews on health; Yarrabah Mayor Ross Andrews on governance; Gurriny Wellbeing Officer Tamar Patterson

on our Youth Forum Journey and an overview of the Yarrabah Leaders Forum delivered by Executive Project Officer Cleveland Fagan.

### The Great Debate

The aim of our Great Debate was to encourage communication, discussion and team work within a group.

Facilitated by Stakeholder Engagement Officer Leon Yeatman, this year’s subject was noise and the effects of loud music in the community as a subject specific to Yarrabah.

Our youths carried out their own discussions, communicated their feelings on the topic as a team and then debated the issues.

The session was an insight into politics with Leon’s delivery and personality bringing in much fun and laughter.



## Knowing Your Leaders

Knowing your Leaders were group sessions with youths profiling a community leader which meant networking, building a relationship and thinking about role modelling.

The sessions were facilitated by Youth Wellbeing Officer Paul Neal.

Five groups were formed, each with a local leader who was asked a series of questions relating to their professional and personal experiences over the course of their life journey.

A youth was then selected from the group to share the answers to everyone present.

The aim of this activity was to assist our youth in getting to know our leaders, understand their challenges and achievements, and identify the effects (ripples) of their choices.

## Youth Achievements

Youth Wellbeing Officers Paul Neal and Tamar Patterson facilitated interviews with youths to share their achievements in various areas such as academic, sporting and employment.

We were grateful for the assistance and support of Gurriny's Men's Health, Bringing Them Home, Sexual Health and Deadly Choices Programs as well as the Yarrabah Shire Council and Yarrabah State School's Peter Gavel.

## Young Persons' Health Check (YPHC) – March-April 2019

Our Youth Wellbeing Team co-ordinated the YPHC delivery for 2019 working collaboratively with Gurriny Health Service Clinicians, Health Promotion Officers, Social Wellbeing Team and community youths.

We employed five local youths to support and encourage their peer's engagement in health screening and more than 350 youths participated.

## Queensland Aboriginal & Islander Health Council (QAIHC) Youth Summit

Five youths aged between 18-25 years were invited to attend the QAIHC Youth Summit in Brisbane on Thursday 12th September 2019.

The Summit heard several speakers share their life stories and deliver inspirational messages to a theme of, 'Strong Bodies, Calm Minds, Resilient Spirit'.

Guest speakers included Deadly Warrior Jack Wilson, Changemaker and Marathon Runner Elsie Seriat OAM, and Aboriginal musician and Australia's Got Talent finalist Mitch Tambo.

Gurriny's Youth Wellbeing Team attended to supervise our young people as they travelled to and from Brisbane, and assisted QAIHC facilitators to ensure the summit was a safe space for our young people to share their health and wellbeing needs and goals.

We were also on hand to support delegates who may have been triggered by topics discussed during the day or needed to reach out about issues that might be affecting them.

*Pic thanks to QAIHC*



# Clinical Services - Kim Mitchell

In recognition of the value of team cohesion and strong clinical governance within the organisation, the Gurriny Board initiated a review and realignment of a number of our clinical services over the 2018-19 reporting period.

As a result of this process we have now seen the Care Co-ordination team (Chronic Disease, Sexual Health, Integrated Team Care, Home Medicines Review and Pharmacy) and Child and Maternal health come under the umbrella of the Clinical Services Team.

The new team receives clinical governance and support through the new role of Clinical Services Manager.

Part of the re-structure involved reducing the administrative burden of our health workers and re-directing them into a new learning pathway focused on community and clinical service delivery.

Our restructure has also taken client feedback into account which emphasised the need for increased health worker presence in the community and homes.

Key activities for the past year included:

- Management of an acute post streptococcal glomerular nephritis (APSGN) outbreak that occurred this April. An all-of-organisation approach was instituted which resulted in the screening of more than 900 children for skin sores. 120 cases of skin sores were treated with intramuscular benzylpenicillin and just four positive cases overall were identified.
- Induction in to the Hearing Assessment Program: Early Ears. This federally funded initiative was aimed at improving ear health in 0-5-year-olds through improved diagnostic assessments, ear health surveillance and community awareness. Our child health team members were trained

and supervised in the provision of otoscopy, tympanotomy and audiometry. We have also received brand new hearing screening equipment. Our local day care centre and Kindergarten have been included to create sustainable pathways for future screening and hearing health promotional activities. We aim to embed tympanotomy, otoscopy and audiometry as a routine part of our developmental checks.

- The screening of all Yarrabah junior and senior school students for heart problems through a cardiac ECHO outreach initiated by Queensland health in collaboration with the Remote School Attendance team and Gurriny Yealamucka.
- The Maternal health team joined in the Youth Health Checks this year, providing an opportunity for youth to engage around topics such as Foetal Alcohol Spectrum Disorder (FASD), teenage pregnancy, smoking in pregnancy and pre-term birth.
- The maternal health team also had the opportunity to present the Core of Life Program, focusing on pre-conception, pregnancy and postnatal period, contraception, STI's and FASD, to year 9 students at Yarrabah High School and Woree State School
- Increased collaboration with the Family Healing Service which has resulted in improving the social and emotional wellbeing support of our patients.



## Clinical Care/Integrated Team Care (ITC)

This year the Care Coordination team managed all our visiting services, accounting for several changes to providers whilst working closely with ITC staff to ensure seamless coordination of services.

There has been an increase in patient numbers attending all our allied health and specialist services, and we here at Gurriny are excited about our people really taking an interest in their own health.

Patients in Yarrabah now have access to a wide range of health care services, community services and health care aids, which we believe has contributed to an increase in our mob taking ownership of their health needs.

This year we had a very successful ophthalmology eye clinic with 16 community clients now having better vision thanks to Dr Brian Todd.

We now have the services of our very

own optometrist, Vicki Sheehan, visiting Gurriny every Monday.

A majority of our staff have also undertaken Retinal Camera training, which now means they can undertake eye checks on all community members and refer to the optometrist if required.

This was a direct result of our successful eye clinics and our commitment to ensuring the community continues to have better vision outcomes.

Over the year there has also been an increase in our on site tele-health service, which has reduced the need for clients to travel unnecessarily to centres such as Brisbane, Townsville or even Cairns for 10-minute appointments with specialists.

## Sexual Health

Gurriny is committed to supporting our youth and getting them involved in managing their own health.

This year again under the guidance of Katrina Connolly, who was away on parental leave, and with the help of our Youth Officers Tamar Patterson and Paul Neal, Indigenous Health Workers Deanna Sexton and Clevanna Messer, the RSAS team, GPs, Registered Nurse Lexy Carroll and our young Community Recruitment Officers, Gurriny ran a very successful Young Persons Health Check

event and, as always, experienced a huge uptake of our young people between the ages of 15-24 attending over the four week event.

This year our very own DEADLY Sexual health worker Katrina Connolly was nominated for a Black Pride award for the excellent work she has done with the Lesbian Gay Bi Sexual Transsexual (LGBT) community.



# Family Healing & Wellbeing Services

Megan Bayliss

The Family Healing & Wellbeing Service is made up of three different services: our mental health counselling service, Family Wellbeing (FWB) program and the Parenting Under Pressure (PuP) program.

The three programs work closely together to bring our families the best wrap-around services we can offer.

We also work closely with Gurriny's Social and Emotional Wellbeing (SEWB) team to ensure every referral to our services gets the support or intervention required: be it mental health counselling, family strengthening or SEWB support.

Under the 'Stepped Care Place Based Mental Health Care model' (funded through Primary Health Networks), Gurriny secured funding for mild to moderate mental health (depression, anxiety, grief and loss, etc) support in late 2018.

A service consultant was employed for three months to design a service based on what may work in Yarrabah (place based) and what might be best practice for a place-based stepped care mental health service in an Indigenous community.

By January 2019, we had recruited three accredited mental health therapists (counsellors with extra training in mental health issues) who were each helping people in the community with their counselling needs.

By February 2019, those three mental health therapists were seeing people, talking with community and networking with other agencies in Yarrabah.

Now, just eight month later, we have a full case load of 33, four mental health counselling specialists (two mental health social workers, a psych nurse and

a psychologist who all do psychological intervention work) and an intake worker with counselling skills.

Along with one-on-one counselling, the therapists also run groups to help educate people on how to be a better them.

We have a daily walking group (because movement helps positive mental health), a knitting group, a weaving group, a monthly luncheon where people can just sit and talk while they get a bit of pampering, a grief and loss group, a suicide survivors group and a garden project.

Our successes in the short time we have been operational are:

- we have filled therapists caseloads;
- our knitting group project (knit your perfect day) is consistently well attended;
- we are well networked with other Yarrabah agencies and working closely with them; and,
- we have attracted an experienced team that each specialise in different psychological therapies and methods.

Our biggest success is local people keep coming back to us and they have created change in their own lives with just a little guiding from our therapists.

We are especially grateful for the key stakeholder relationships we have developed with both Mulungu (Mareeba) and Palm Island Health Services.

Together we are making a positive impact of the best mental health our Far North Indigenous peoples can have.



To come to see one of our Family Healing Services' therapists you need a Care Plan referral from one of our doctors.

You can ask to see a male or female therapist – even though we each have different qualifications, we each do the same as a counselling psychologist – we use the same psychological interventions Medicare expects of a mental health professional.

You can also come into our Workshop Street office and have a yarn with our intake counsellor, who can help you decide if you need to get a doctor's referral.

### Family Wellbeing

Our Family Wellbeing team (outsourced funding from Wuchopperen) is made up of three dedicated workers who help coach families to ways of working that best suit their situation.

Some people think we are like Child Safety.

WE ARE NOT.

We sometimes work with Child Safety BUT we work to keep your kids with YOU.

We coach and support you to make the changes your family needs.

Sometimes, we can buy items that may make your family life a little easier, but, we expect you to contribute too.

Our ability to service families has increased this year because we have the Mental Health team to work with.

We often work together to support case

plans and to meet our clients needs in the best way possible.

This year we have started a recycled and home-made educational toy program for our many families who do not have toys for their children to play with.

You can make your own educational toys from common items found around the home: toilet rolls, lids, old CDs, etc.

Educating children is a way to break the cycle of poverty.

Let us coach you in how to be a great parent and educator for your children.

To work with us, come into the Workshop Street office and speak to our Intake Counsellor.

She will explain how we operate and give you the forms to complete.

### Parenting Under Pressure (PuP)

Our Parenting Under Pressure Program (funded through Mission Australia) is made up of just one person.

Fortunately we have other teams to work with that worker because two heads are better than one and four hands make a task easier.

A major success this year is that not only is our PuP worker getting full accreditation in the PuP program from Griffith University, but we have been able to fund a worker from FWB to also do the PuP training.

This is a brilliant example of skilling up local people with qualifications and knowledge that will stay in community.

To work with us, come into the Workshop Street office and talk to our Intake Counsellor, who will explain how we operate and give you the forms to complete.

# Clinic Support Chloe Sellwood

It has been quite a busy year in the clinic overall and I anticipate a busy but productive year going forward.

Our staff have been busily preparing for Australian General Practice Accreditation Limited (AGPAL) accreditation which will take place next year.

Thank you to the Quality and Risk team, who have been a driving force in supporting the clinic team with the lead up to our assessment.

As part of this assessment Gurriny is required to have our services evaluated which means our reception team will be asking clients to answer some short questions after their consultations.

Their answers will be sent back to assessors who will give us a report on how our clients feel we are doing.

Our clinic team welcomes client feedback at any time and our feedback forms can be found in the waiting area or you can ask any of the clinic staff for a copy.

We will continue to ask our clients to give feedback after their visits to our clinic and extended services as part of our ongoing improvements.

As our clinical services continue to grow, it has been very challenging to find space for our visiting services.

We have had to get creative with creating space as there is a direct need

for the community to have this access.

Having these services accessible here in Yarrabah has resulted in a decline in the number of patients failing to attend their appointments, which is such a win for our community!

Transport & Facilities Manager Paul Munn and I have worked hard with the Cairns Base outpatient's department to establish a good operational grassroots level relationship.

We have had meetings with operational managers from different sectors of the outpatient department to share some of the issues some of our clients have in accessing their services.

We have also taken the opportunity to create some awareness around how after-hours discharges can be problematic for some of our clients and Gurriny to navigate.

Out of these meetings we have seen a slight decrease in the number of out of hours discharges and we will continue to work on this going forward.

Operationally my team has grown.

The reception team have had a few staff changes, with Keleisha Bounghi recently returned from parental leave after having her first beautiful baby.





She has settled back into her role nicely. As my role has developed and expanded, the need to have a team leader was identified with Dominique Cedric the successful applicant for stepping into this role.

She does such a great job filling my shoes if I am out of office.

Screening Health Workers Jannali Neal and Milton Mossman have done some significant upskilling as part of their clinical scope of practice.

They have both successfully completed their Phlebotomy and wound care training earlier this year, which has helped alleviate the clinical load of our RN's as they can now confidently take blood and do wound care.

Well done Jannali and Milton!

After showing some persistence Errol Choikee has also recently joined our team.

Errol has a Cert III in primary health care and this is his first time working in a clinical setting.

He is working closely with the rest of the team and is becoming a confident health worker as he gains more clinical skills to deliver to the community.

Before the end of this year I will be commencing a Diploma in Practice Management after successfully applying for a scholarship via the Australian Association of Practice Managers (AAPM).

I'm look forward to this and bringing in these new skills to my team.

In recognition of the efforts of our fantastic clinical team, we were blessed to be nominated by senior management in the QAIHC Awards for Excellence which provide a platform to recognise the outstanding achievements of individuals and organisations within the Queensland Aboriginal and Torres Strait Islander Community Controlled Health Organisation Sector.

We are excited to know how we will go when the awards are announced in November.



# Remote School Attendance Strategy (RSAS) Dixie Hari

The Remote School Attendance Strategy (RSAS) has been in operation since October 2018.



## Initiation and Purpose

Data showed student attendance at the Yarrabah State School had been in a slow decline since 2014, so the Yarrabah Aboriginal Shire Council and members of the Yarrabah Leaders Forum lobbied the Australian Government for funding to address this decline.

They wanted a Yarrabah RSAS team to be formed to work collaboratively with local services to provide the support required to the families that would assist them in getting their kids to school every day.

Gurriny was successful in becoming the host organisation to implement the project.

Yarrabah State School supported the initiative and is where the RSAS team operates from.

The primary purpose of this project is to assist in lifting school attendance rates of children who attend Yarrabah State School, working across the Kindy, Primary and Secondary campuses.

## Our Model

A RSAS structure and model was designed to incorporate School Engagement Officers (SEOs) and Team Leaders responsible for student's health and wellbeing, transition to class-room support, and community engagement.

The project is managed by the RSAS Coordinator.

An evaluation of the model was conducted to determine the initial model's effectiveness on the project and its activities after six months of operation.

The current working model has seen an increase in School Engagement Officers, in place of our Community Engagement Team Leader, who are on the ground in the community supporting school access and attendance levels.



## Our Challenges and Successes

This year the team has been busy conducting daily home visits, student pickups and engaging with parents and carers into School and RSAS activities.

Each school term comes with its challenges and successes.

Some of the main challenges for non-school attendance the RSAS team have encountered include:

- reasons around health and wellbeing (physical sickness, ongoing trauma and grief and loss);
- student refusal to attend school;
- sorry business;
- no lunch/uniform; and,
- family conflicts within the Community.

RSAS works with local services to provide a wrap around support for families which enables them to get their children to school.

Despite these challenges, we have had a number of successful activities to engage students back into school such as:

- the Back to School marches;
- school holiday program activities (involving elements of culture, social inclusion, self-care and sport and recreation);
- rewards and incentives;
- hosting and supporting health clinics at the school, implementing learning programs/school projects;
- promoting and marketing the importance of school attendance;
- hosting excursions; and,
- RSAS Camps.

## Our Vision for the year ahead

The RSAS team will continue the hard work to improve the school attendance rate for students enrolled at Yarrabah State School. We aim to improve attendance to at least 90% by the end of the project. We look forward to working with parents and carers, members of the community, and local service providers to achieve this target.







# Yarrabah Leaders' Forum Cleveland Fagan

Yarrabah Leadership Forum, commonly referred to as the 'YLF', is a whole-of-community initiative with membership made up of the majority of service providers in Yarrabah.

Gurriny currently auspices some funds to employ Cleveland Fagan as the senior project officer and rent an office near the Knowledge Centre where he is located.

During 2018/2019 the YLF project with Members have worked on the six key pillars developing up strategies relating to education, employment, health, safe and sustainable communities.

An important part of this project is looking at ways to increase the level of money coming into the community and designing a system to locally support people who want to start up businesses and contribute to a Yarrabah economy.

During 2019/2020 there will be further opportunities for the YLF to support

community forums similar to the Men's Forum held in June this year.

A youth, elders and women's forum will be organised late 2019 and 2020 for our community to come and talk about the work of the YLF and importantly what community members what to address.

Following on from these, a whole-of-community forum will happen where all the discussions from each forum are drawn together and reported back to everyone.

Restoration of our Cultural, Spiritual and Community values are key to building a strong, vibrant healthy Yarrabah for us today but also for our children and their children in the future.

## PILLAR 5: Healthy Community

*An important part of life in Yarrabah is life itself – from birth to end of life – and how we are able to live that life, Gurriny CEO Sue Andrews writes...*

*We all want to be disease free and that means we want health infrastructure that meets our needs and supports our service delivery. And it's not just Gurriny's health focus, we're looking at social determinants involving all our health statistics from drugs and alcohol through to our aged care facilities through a health lens – a high end strategic look at what we can do and how we can do it. What we know is we need to address all those elements with the support of all of the six pillars and then we will see the successes – people living healthy lives – we want to see.*

*For more information see Yabber News at [www.chowes.com.au](http://www.chowes.com.au)*



# Finance

## Transport and Facilities

Our facilities and transport department continues to work hard to achieve its objectives to provide, sustain and maintain a range of services.

They include:

- Courtesy transportation to our local clinic at Bukki Rd for GP/medical treatment/consultations and access to pharmacy and medicinal supplies,
- Courtesy transportation for our dialysis clients (Yarrabah and Cairns);
- General maintenance, repairs and cleaning;
- Improvements/landscaping; and,
- Safety checks, safety audits and compliance maintenance.

We recognise providing access to health services is very important and plays a vital role in our mob's health care.

Our passionate team consists of competent drivers, cleaners, administration staff, yards people and clinicians, all assisting to achieve the requirements that have been set by our operational plans.

We do this as one big team.

Our beautiful community is expanding its population continuously as we welcome our little Cuddi Cuddi annually.

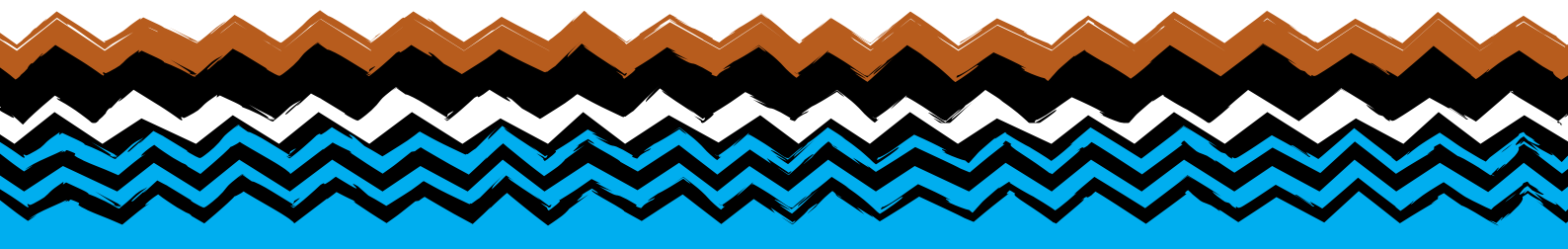
Our babies, toddlers, children, young people, adults and elders are always in need to access health services so this means that our clinic is getting busier and busier therefore waiting times for the bus may vary from time to time.

We will do our best to get you there on team however please be patient with us if there is a slight wait!

We are looking forward to partnering with newly formed Dindarr Bus Company and, as we are still in the early planning and implementing stages, we will share more information with you all in the very near future.

Our staff maintains Gurriny's three sites (Bukki Road, Noble Drive and Workshop Street) internally and externally and this keeps us busy.

As always, we welcome any feedback that may use to assist us to do that and there is a form available at any of our sites, just ask any of our staff in regards to this and we will be only too happy to assist you with this.



## Auditor's independence declaration

**Auditor's independence declaration to the directors of  
Gurriny Yealamucka (Good Healing) Health Services  
Aboriginal Corporation**

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15 Lake Street  
Cairns QLD 4870  
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Cairns QLD 4870

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F +61 7 4051 0116  
E [info.cairns@au.gt.com](mailto:info.cairns@au.gt.com)  
W [www.grantthornton.com.au](http://www.grantthornton.com.au)

In accordance with the requirements of section 339-50 of the *Corporations (Aboriginal and Torres Strait Islander) Act 2006*, as lead auditor for the audit of Gurriny Yealamucka (Good Healing) Health Services Aboriginal Corporation for the year ended 30 June 2019, 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 (Aboriginal and Torres Strait Islander) 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

H A Wilkes  
Principal – Audit & Assurance

Cairns, 30 September 2019

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# Statement of comprehensive income

## For the year ended 30 June 2019

	Note	2019 \$	2018 \$
<b>Income</b>			
Revenue	6	10,396,872	8,284,144
		<u>10,396,872</u>	<u>8,284,144</u>
<b>Expenses</b>			
Administration and office expenses		-	-
Advertising		5,933	1,828
Audit fees		30,183	27,795
Cleaning		20,397	24,066
Clinic supplies		78,997	69,944
Computer support and equipment hire		241,385	216,858
Conference fees		9,388	9,388
Consulting and professional fees		664,316	305,905
Donations		12,040	18,209
Electricity and water		62,611	96,725
Employee expenses	7	6,753,380	6,167,506
FBT expense		12,923	7,854
Grants refunded		184,978	-
Hire of equipment and facilities		33,072	22,961
Insurance		24,146	20,916
Licences and permits		41,014	15,799
Meeting expenses		5,873	8,951
Motor vehicle expenses		190,430	202,620
Motor vehicle leasing and hire		196,817	128,843
Program expenses		394,691	277,509
Printing and stationery		64,445	69,515
Repairs and maintenance		42,302	47,960
Telephone and fax		36,457	34,377
Training		17,563	21,041
Travel and accommodation		191,843	143,186
WorkCover		45,878	62,639
Sundry expenses		138,785	144,439
		<u>9,499,847</u>	<u>8,146,834</u>
<b>Results from operating activities before net financing costs</b>		<u>897,025</u>	<u>137,310</u>

	Note	2019 \$	2018 \$
Finance income		15,237	16,026
Finance costs		-	(4,803)
<b>Net finance income</b>	8	<b>15,237</b>	<b>11,223</b>
<b>Results from operating activities</b>		<b>912,262</b>	<b>148,533</b>
Depreciation and amortisation expense		(127,491)	(116,330)
Net gain/ (loss) on disposal of property, plant and equipment		-	9,494
<b>Net surplus/ (deficit) before income tax</b>		<b>784,771</b>	<b>41,697</b>
Income tax expense	4(e)	-	-
<b>Net surplus/ (deficit) for the year</b>		<b>784,771</b>	<b>41,697</b>
Other comprehensive income		-	-
<b>Total comprehensive income/ (deficit) for the year</b>		<b>784,771</b>	<b>41,697</b>

*This statement should be read in conjunction with the notes to the financial statements.*

## Directors' declaration

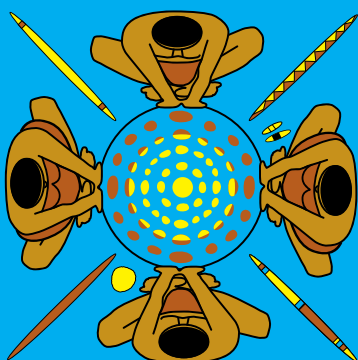
In the opinion of the directors of Gurriny Yealamucka (Good Healing) Health Services Aboriginal Corporation (the "Corporation"):

- a the financial statements and notes are in accordance with the *Corporations (Aboriginal and Torres Strait Islander) Regulations 2007*, including:
  - i giving a true and fair view of the Corporation's financial position as at 30 June 2019 and of its performance for the financial year ended on that date; and
  - ii 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
- b 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:

  
David Baird - Director

Dated the 30 day of September 2019



**GURRINY YEALAMUCKA**  
HEALTH SERVICE ABORIGINAL CORPORATION