

SWAMS ANNUAL REPORT 2006/07



Cover Artwork: 'Biroc'
Artist: Troy Bennell
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Service Delivery Area



Vision and Objects

The vision of SWAMS is to:

IMPROVE AND MAINTAIN ABORIGINAL HEALTH IN SWAMSAC REGION

The objects for which the Association is established are summarised below:

1. To provide a medical service for Aboriginal people in Bunbury and the surrounding area.
2. To provide a forum for Aboriginal people to discuss their health needs.
3. To provide information to Aboriginal people relating to health.
4. To sponsor, promote and encourage the maintenance and renewal of traditional Aboriginal medicine and culture.
5. To support the self-determination and social development of Aboriginal people.
6. To work with and complement other existing health services in the area.
7. To deal with government departments and other bodies on health issues.
8. To participate with other Aboriginal associations in mutual benefit projects.
9. To help other Aboriginal people to set up their own medical services.
10. To purchase or lease or acquire any real or personal property.
11. To promote Aboriginal employment via on-the-job training.

Chairman's Report



It is that time of the year again when we look at some of the programs and activities we have conducted throughout this period of time. I mentioned in my last report that I would like to see some changes in the direction the organization was going in but unfortunately I have been ill for most of the year and could not have the desired amount of input I would have liked to have had.

The Governance Committee have had governance training this year to ensure that the demands of proper accountability procedures and protocols are met from our funding agencies. There have been some resignations and replacements: Dennis Jetta resigned and was replaced by Mervyn Kelly, Alf Cooper resigned and was replaced by Vivienne Karahoutis, Pam Nannup resigned and was replaced by Christine Khan.

The transition from the Co-ordinated Care Trials has been a success with the service able to meet the needs of the community and achieve the numbers of non-Indigenous patients that have chosen to take advantage of the service. Our success in this area has meant that we have a reduced annual budget from the Commonwealth and State governments. The challenge for us means that we have to retain the service with our own level of income through the bulk billing service. We are only a handful of Aboriginal Medical Services that have been successful in this area thanks to our service managers and staff who manage these areas.

There are always areas of the service to improve upon. SWAMS is the only regional Aboriginal service delivery agency in the Southwest whose importance can't be underestimated. Not that it has not already demonstrated this, but it needs to do more in my view. It must show strong leadership. The Board needs to have a strong sense of propriety and integrity and most importantly the agency must have vision. There are many challenges that we face including poverty, social despair, drugs, alcoholism, children living in unsafe environments and grandparents faced with the responsibility of caring for their grandchildren with little or no support. Coupled with all of the above we have endemic problems associated with our elderly.

Once again I want to thank the CEO and staff for the good work they have done through the year and for their commitment and dedication in an often complex environment and I would also like to take this opportunity to acknowledge and thank the Board members for their continued support.

Mike Hill
CHAIRMAN

Chief Executive Officer's Report



In the past year, SWAMS has gone from strength to strength and has consolidated its position as the only Aboriginal community controlled health service in the south west by building on the services we deliver to our community. I want to acknowledge that the South West Aboriginal Medical Service is on the traditional lands of the Nyoongar people.

Financial Performance

This year has seen SWAMS being very careful of our funding resources so that we can better provide those services which are much needed in our community.

Due to our careful financial management we have been able to expand our subsidies for pharmaceutical, dental health; much needed medical equipment and aides for community members and general support for the community in times of need.

Achievements

SWAMS has many significant achievements this year such as:

- Celebrated our 10th Birthday with Gloria Khan longest serving Board Member and Joyce Dimer longest serving Employee.
- The AGPAL accreditation of SWAMS as best practice.
- Trained 8 Aboriginal health workers in Bunbury.
- Operated an after hours clinic on Monday evenings.
- Attracted more people to our clinic.
- Undertook many community activities such as camps for youth and older people and community meetings.
- Conducted hearing testing for Nyoongar children with the Telethon Institute Ear bus.
- Increased immunisation of our children to 92% of our child clients.

- Greater focus on child and adult health checks.
- Successful NAIDOC flag raising and community day at the health campus
- Greater collaborative partnerships with other service providers

Our Workforce

This year SWAMS focussed on building a strong team especially around the clinic to ensure that clients are given the best possible service we can provide. SWAMS encourages staff to seek further education and to attend course which are relevant to the performance of their work duties. To this end, SWAMS in partnership with Marr Morditj conducted a training program in Aboriginal Health Certificate III to train 8 Aboriginal Health Worker Trainees in Bunbury on a full time basis for six months. This allowed the trainees to study in their home community.

SWAMS has been undergoing changes as to how we perform our duties and how we present ourselves to our clients. To this end staff developed 8 principles of how we do things around here. Such as,

Around here:

1. We have a strong sense of ownership to the organisation because we respect each others differences and cultures
2. I am valued
3. We are considerate, courteous, disciplined and professional in dealing with clients and each other.
4. We hold our clients as our focus and we are proud to be part of the South West Aboriginal Medical Service
5. We are culturally motivated we value diversity and we put our community first.
6. What we say is what we do
7. We treat each other with respect and appreciation
8. We embrace change as a positive thing.

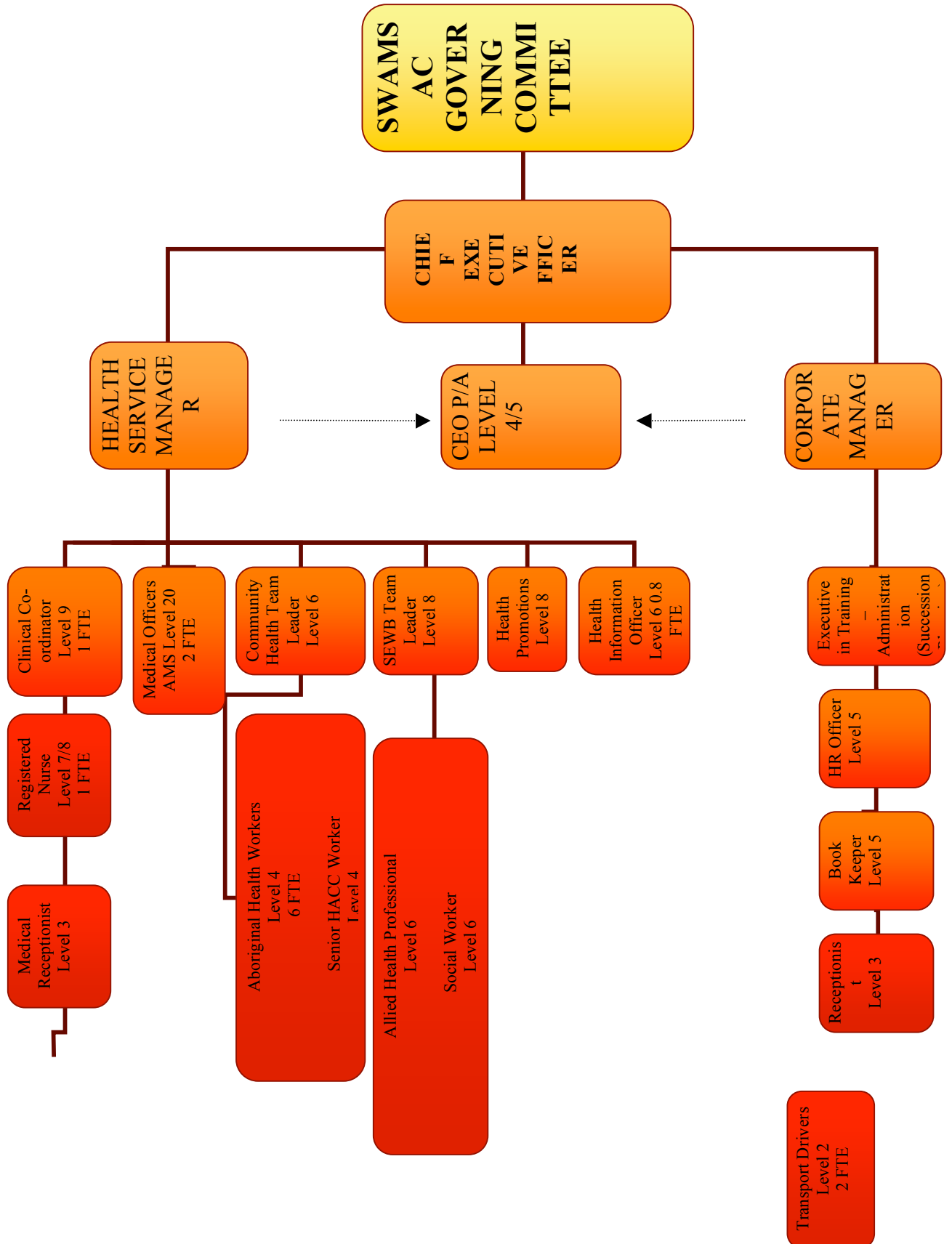
Conclusion

This year SWAMS has worked extremely hard to develop partnerships and work in a more collaboratively way with other service providers. None of this can be done without the support from the Governing Committee and the staff of SWAMS.

I would personally like to acknowledge and thank the Chairman, Mike Hill, Governing Committee members and members of the executive team for their continued support and wisdom throughout the year.

Glenda Humes
CHIEF EXECUTIVE OFFICER

ORGANISATIONAL CHART



Health Service Manager's Report



The last financial year has seen the service continue to grow and deliver a quality service that would hold its place in any location in Australia. This can be evidenced by the fact that the service received this recognition through AGPAL (Australian General Practice Accreditation Ltd) accreditation during the early part of this reporting period (25/08/06). This is a milestone event in the history of SWAMS and it is something that members, clients and staff can all be proud of.

The major benefit of Accreditation is that clients can be assured that they are receiving a professional and responsive service and I believe that with the commitment and hard work that I am seeing from staff that this level of service is here to stay.

The past twelve months has seen a number of staff come and go and in some instances there have been times when others have carried the load. This is not unusual in any organization, but in this case I would like to take the opportunity to thank all of our staff who have risen to the occasion when required. Health work can be a personally rewarding career for those who possess the values of compassion, care, charity, and a strong sense of social justice. I am more than happy to report that it is my good luck to be surrounded and supported by a team that is underpinned by these special attributes.

During the course of the year we have taken the opportunity to revise a number of our financial support policies and ensured that these policies are made known to as many of our eligible clients as possible. In addition to this we have introduced some new policies; especially the pharmaceuticals policy that has helped our clients enormously by alleviating the stress associated with the cost of medications.

Members can rest assured that the Service will continue to seek other opportunistic and worthy subsidy areas for our chronic disease and child and maternal health clients in order to further reduce the burden and cost of care.

SWAMS has a sound commitment to staff development and training and this has been evidenced once again by providing opportunities throughout the year for staff to attend appropriate and relevant training and seminars.

With the introduction of the new *Communicare* data/system we have been able to provide training in this area to all of our service delivery staff. This has seen a significant increase in the accuracy and output of service data.

While on the subject of data we also conducted two clinical audits through the year. The recommendations of both of these audits have assisted us greatly in the capture and use of data and information.

SWAMS, through a collaborative arrangement with Marr Mooditj, conducted a Certificate 3 In Aboriginal Health Work and provided the training to 8 trainees. As a post-script to this report we are pleased to announce that seven of these have completed their training and are now qualified Health Workers.

During February all staff participated in a number of planning days (facilitated by a consultant) where everyone had input into current and proposed SWAMS policies, procedures and service delivery practices. This was a most worthwhile exercise that provided an increased understanding of internal operations and provided much clearer direction and enhancement of current services.

Another initiative we undertook during the last 12 months was to introduce ID badges for service delivery staff in line with Government requirements for *Working with Children* clearances.

SWAMS was also fortunate to have forged a partnership arrangement with the Telethon Institute for Child Health - Hearing services and provided staff to assist with their screening service at a number of schools in and around Bunbury. Approximately 80 Aboriginal children were picked up with hearing difficulties and have been referred for further treatment. It is our understanding that this partnership will now be on a permanent basis and will provide much needed regular and ongoing ear health screening.

Throughput at the Clinic for the last financial year showed significant increases over the previous financial year (2005-06); despite a shortage of Aboriginal Health Workers. For instance 2006-07 showed a 17.6% increase in total clients (3176) compared to the previous year. There were 10,327 doctor consultations in 2006-07 which was an increase of 23% compared to 2005-06. During this last financial year the clinic saw 6527 walk-in clients compared to 5170 the previous year. Nurse consultations also increased significantly with 3117 this financial year compared to 2373 in 2005-06 (an increase of 31%).

Health Worker contacts for the year fell marginally by 4.3% but was disproportionate compared to the other larger increases noted above.

The reason for this was the continued shortage of Aboriginal Health Workers throughout the year.

Also worth noting is the fact that the total number of new clients for the last financial year (1259) nearly doubled over that of 2005-06 (679).

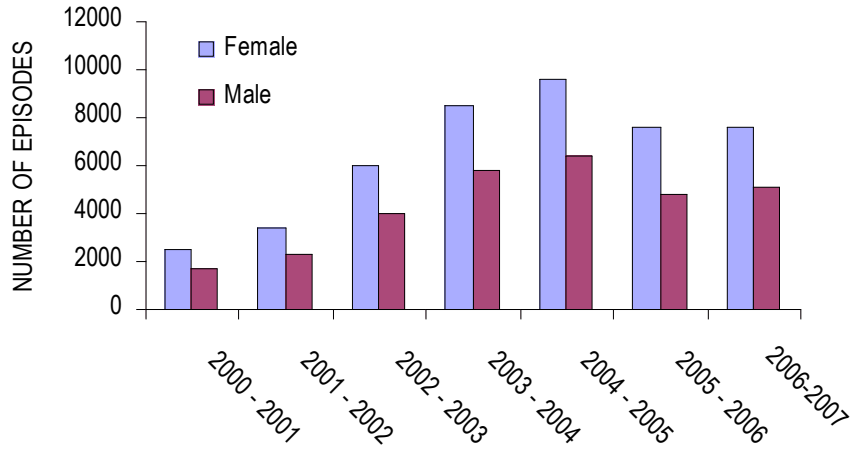
I am also pleased to report that SWAMS achieved its PIP target of 92% immunizations for the last financial year which in itself is another significant milestone.

Finally, my gratitude and appreciation goes out to all our staff that made the above figures possible and secondly to the other members of the Executive who have given me great support throughout the year. I thank you all.

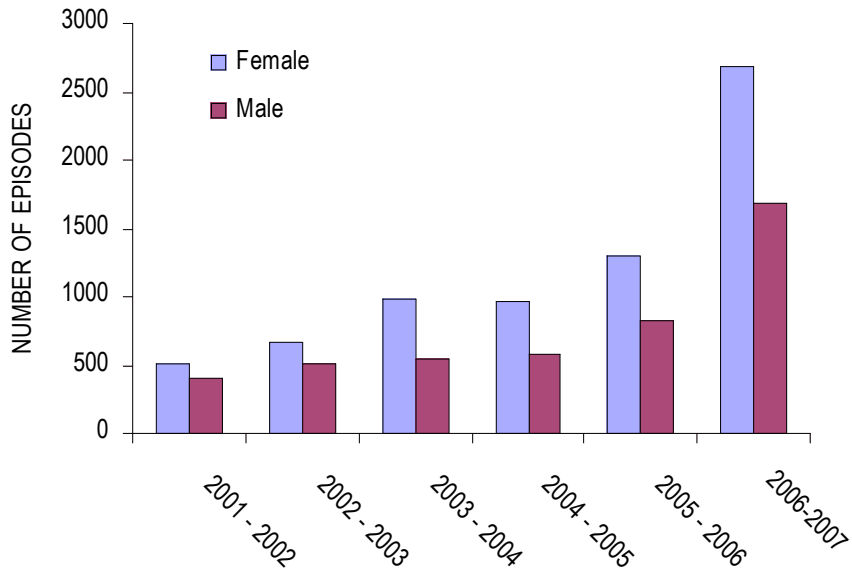
Quenten Jackson
HEALTH SERVICE MANAGER

Facts and Figures

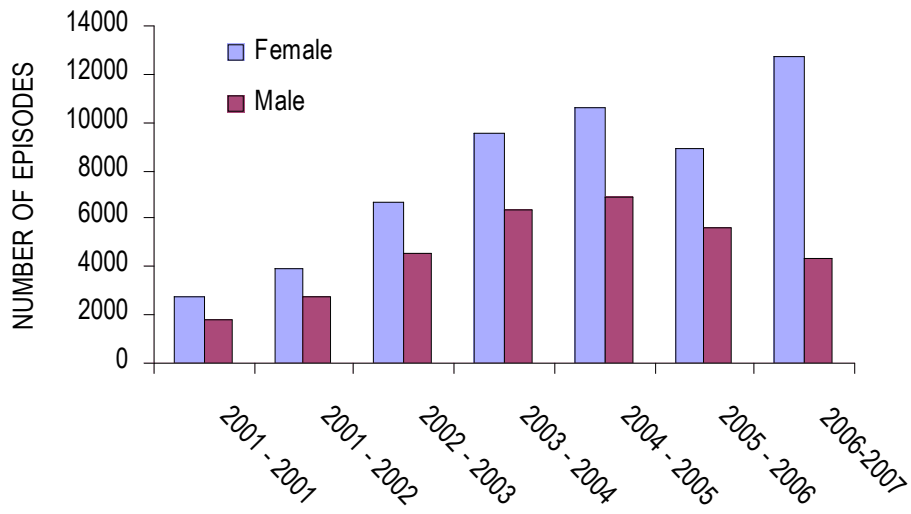
NUMBER OF EPISODES ABORIGINAL AND/OR TORRES STRAIT ISLANDER CLIENTS



NUMBER OF EPISODES NON INDIGENOUS CLIENTS



NUMBER OF EPISODES ALL CLIENTS



Data Sourced from SAR Report 3 Episodes.
SQL editor function used to change date range
for each year

Social and Emotional Wellbeing (SEWB) Program

Bringing Them Home Program

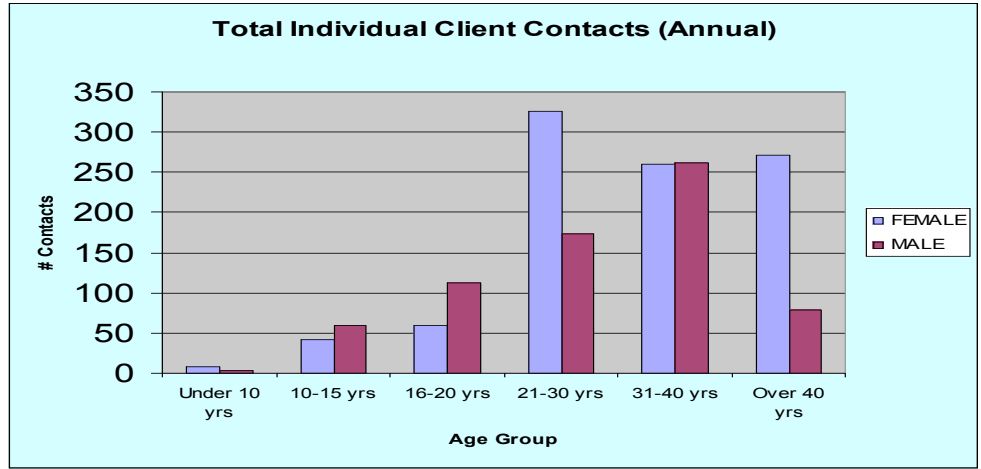
Counselling/Advocacy and Support

SEWB clients are offered holistic, culturally secure counselling, advocacy and support by qualified staff for issues associated with the inter-generational impact of Stolen Generation policies including:

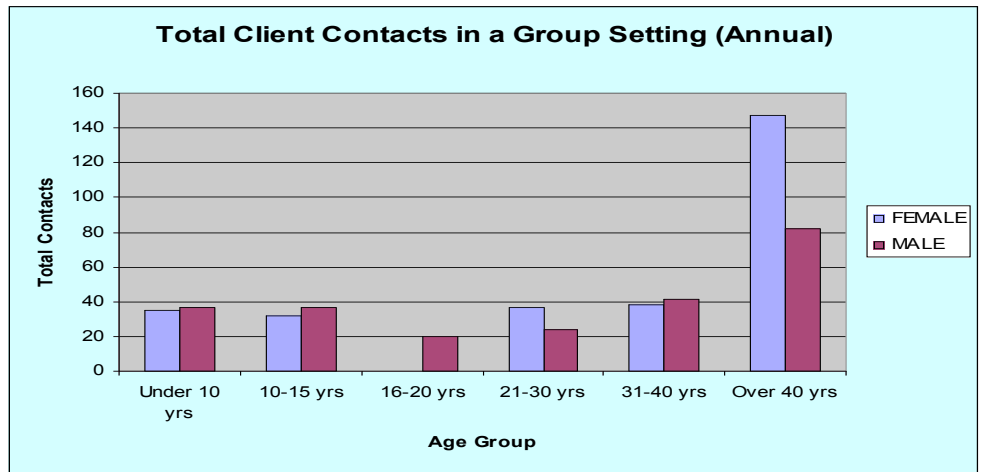
- Grief and loss;
- Attachment and relationship;
- Family breakdown;
- Mental Health;
- Trauma including Post-Colonisation Trauma;
- Suicidal Ideations;
- Self-harm;
- Alcohol and other drug use;
- Cultural identity and self-esteem;
- Family breakdown;
- Relationships and family matters;
- Family reunification following child removal or apprehension;
- Sexual Abuse and child sexual abuse.

Total number of Client Contacts (Counselling; Support; Capacity Building)	
Individual Client Contacts:	1352
Client Contacts in a Group Settings:	530
Total Client Contacts	1882

Total Individual Client Contacts – Male and Female



Total Client Contacts Occurring in a Group Setting



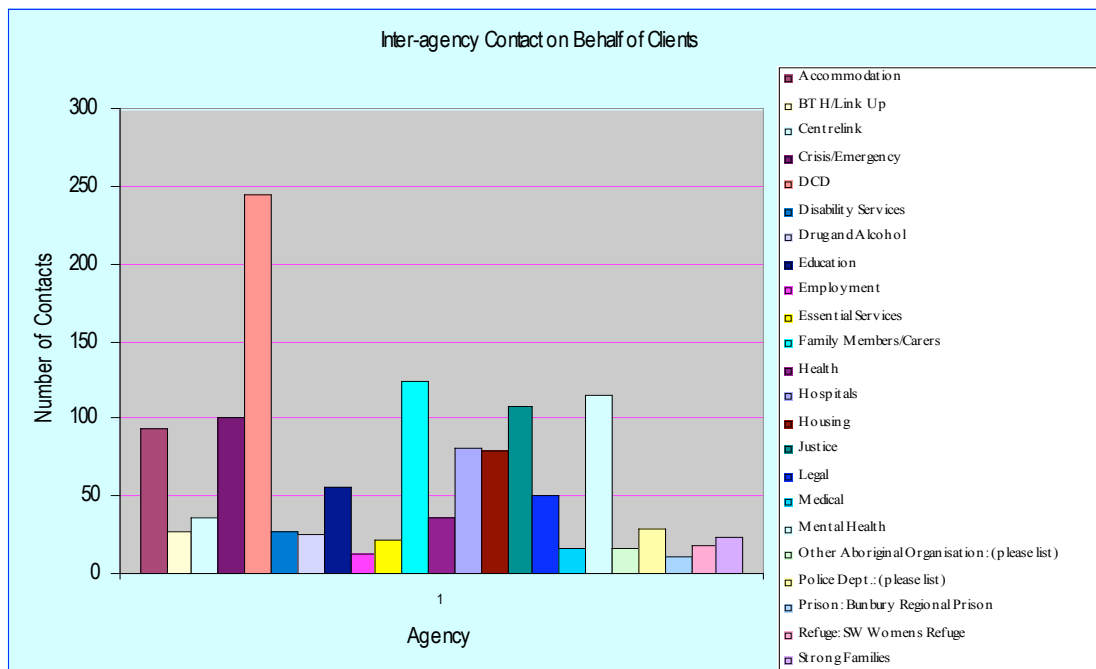
BTH Workers have also supported clients with:

Interagency case conferencing	23
Strong Families Meetings	22
Total	45

Interagency and SWAMS' Internal Contacts on Behalf of Clients

SEWB continues to build upon its extensive links with other service providers and with the aim of ensuring comprehensive and culturally secure service choices for Aboriginal people in the South West Region.

Number of inter-agency contacts on behalf of clients:	1361
Number of SWAMS internal contacts on behalf of clients:	164



Inter-agency Community Development Contacts:

SWAMS maintains a high level of contact and collaboration with other organisations within the region and within the wider community. SWAMS' involvement includes: attendance at and participation in inter-agency meetings; participation in inter-agency and regional service planning; participation in relevant committees, groups and boards; attendance at and participation in inter-agency work-shops and training sessions; and extensive networking.

Number of inter-agency Community Development contacts:	340
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SEWB workers have been involved with the following local and regional committees:

South West Building Resilience Suicide Prevention Reference Group
Aboriginal Education Council
District Education Committee
Headspace (Mental Health) Consortium
Mental Health Stakeholders Group
Koolankas Mia Mia Management Committee

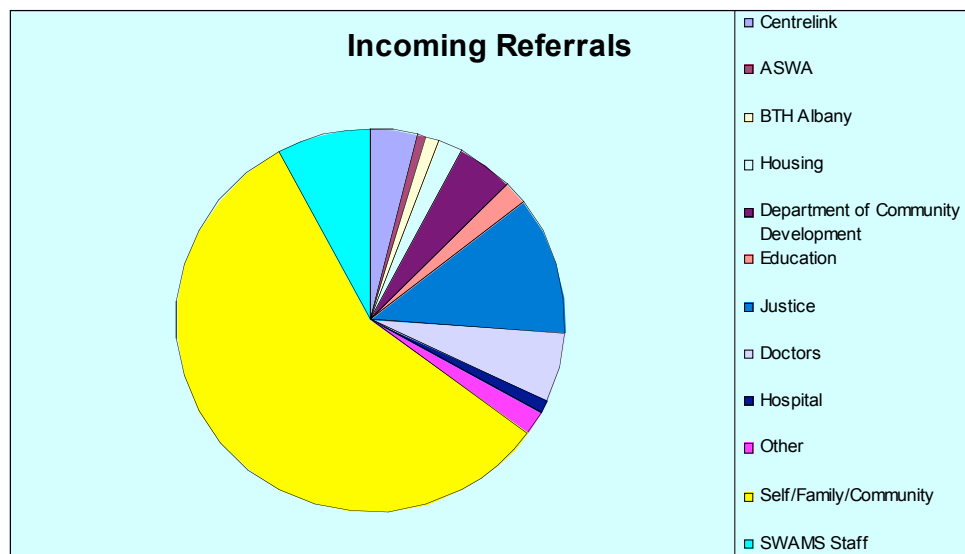
Bringing Them Home workers have also been involved with:

Delivery of Community Presentations	
Cultural Awareness Training for Mainstream Service Providers	
Participation in the <i>Building Resilience Suicide Prevention</i> project which has resulted in the funding of an Aboriginal Suicide Prevention Worker to work alongside the BTH Program workers.	
Providing work placement for a Social Work Student	
Interagency Service Planning involving a range of local and regional services including:	
<ul style="list-style-type: none"> ▪ Reconnect ▪ SW District Hospitals ▪ Child Health Research ▪ Employment Assistance Programs ▪ Department of Justice ▪ Red Cross ▪ Waratah ▪ Equal Opportunity Commission ▪ Mission Australia 	<ul style="list-style-type: none"> ▪ Clontarf Academy ▪ Bunbury Regional Hospital ▪ FACSIA ▪ Disability Service's Commission ▪ Aboriginal Healing Project ▪ Strong Families ▪ Police & Citizens ▪ Edith Cowan University ▪ SW Community Drug Service Team ▪ GP Down South

Referrals

SEWB team members continue to maintain a high profile within the region to encourage self, family and community referrals as well as referrals from other organisations. Workers continue to promote a sensitive, confidential, culturally secure and responsive service which is seen to be very accessible by Noongar community members.

Total Number of Clients Registered with BTH Program	578
Number of New Incoming Referrals in 2006/2007	85



SEWB Program's Family Violence Program

The SEWB Family Violence Program:

- provides Family Support on an individual basis to families experiencing Family Violence;
- meets with small community groups, providing education and information;
- responds to and supports women and children who have sought refuge through the local Refuge;
- target new parents across the region with the theme of *Keeping Noongar Families Safe*.
- sources and provides appropriate Aboriginal specific resources and education;
- has distributed the Noongar Family Violence Calendar across the region, with the aim of ensuring that Family Violence prevention messages and information regarding service providers, is widely available in Noongar homes.
- networks with other service providers with the aim of developing access opportunities for Noongar people and providing information with respect to the provision of culturally relevant service responses.

In the past twelve months, SWAMS Family Violence Program has delivered:

Individual Client Contacts including visits with new families	301
Client Contacts in a Group Setting	234
Inter-agency Contact on behalf of Clients	90
Intra-agency (GPs; Nurses; Aboriginal Health Workers; HACC Workers) contact on behalf of clients	59
Inter-agency Community Development Contacts:	52
Community Meeting	17
Case Conferences and Strong Families Conferences	19
Community Workshops and Presentations	11 (234 participants)

SEWB has also been successful in obtaining funding through FACSIA to expand the Family Violence Program to two workers, one male and one female, over the next three years.

Promoting SWAMS



**SWAMS Staff Group Photo
(December 2006)**



Financials

South West Aboriginal Medical Service Aboriginal Corporation

Bunbury WA 6230

Consolidated Comparison Profit & Loss Statement

2006 - 2007

	<u>2006</u>	<u>2007</u>
Income		
Total Commonwealth Department Funding	\$1,663,919.32	\$1,491,820.45
Total State Health Department Funding	\$1,326,832.00	\$1,240,800.00
Total Other Funding	\$244,214.14	\$351,794.14
Total SWAMSAC Income	\$394,288.45	\$392,028.65
Surplus Carried Forward From Previous Year		\$50,842.65
Total Income	\$3,629,253.91	\$3,527,285.89
Expenses		
Total AMS Medical Costs	\$1,076,179.30	\$191,384.03
Total AMS Administration Costs	\$401,046.86	\$345,859.30
Total Motor Vehicle Costs	\$173,427.67	\$112,734.52
Total Operating Costs	\$172,766.50	\$127,399.37
Total Insurance	\$28,484.97	\$63,445.87
Total Employment Costs	\$2,222,428.30	\$2,370,803.36
Total Redundancies	\$157,455.53	\$0.00
Total Workshop Expenses	\$22,382.78	\$21,778.92
Total Minor Capital Expenditure	\$9,245.28	\$2,748.37
Total Depreciation Expense	\$24,702.00	\$35,397.00
Total Other SWAMSAC Expenses	\$135,420.38	\$15,490.47
Total Expenses	\$4,423,539.57	\$3,287,041.21
Operating Profit	-\$794,285.66	\$240,244.68
Interest Income	\$46,646.16	\$52,070.48
Profit before Surplus	-\$747,639.50	\$292,315.16
Other Expenses		
Surplus Carried Forward Previous Year	\$0.00	\$128,082.71
Operating Surplus	-\$747,639.50	\$164,232.45
Total Capital Expenditure (Balance Sheet)		\$55,808.00
Net Surplus / (Deficit)	-\$747,639.50	\$108,424.45

South West Aboriginal Medical AMS Acc

PO Box 1444
Bunbury WA 6231

Comparison Balance Sheet

2006 - 2007

	<u>2006</u>	<u>2007</u>
<u>Assets</u>		
<u>Current Assets</u>		
<u>Cash On Hand</u>		
Cheque Account	\$37,795.04	\$615,846.96
Trust Account	\$493,242.53	\$0.00
Bank account	\$7,860.36	\$50,551.00
CCT1 Bank Account	\$194.71	\$0.00
Staff Entitlements Account	\$32.56	\$0.00
Prepaid Expenses	\$85,496.11	\$77,974.73
Accrued interest	\$3,395.25	\$4,627.30
Accrued Income		\$2,853.15
Petty Cash - Admin	\$1,000.00	\$427.64
Total Cash On Hand	\$629,016.56	\$752,280.78
<u>Investments</u>		
Term Deposit	\$11,206.69	\$0.00
Reserves Bank Account		\$388,560.00
Total Investments	\$11,206.69	\$388,560.00
Total Current Assets	\$640,223.25	\$1,140,840.78
<u>Non-Current Assets</u>		
Motor Vehicles	\$262,785.96	\$262,785.96
Motor Vehicles - Accum Deprec	-\$5,946.00	-\$58,506.00
Furniture & Fixtures	\$8,907.89	\$8,907.89
Furniture & Fixtures - Accum Deprec	-\$1,336.00	-\$3,112.00
Medical Equip at cost	\$0.00	\$3,495.00
Medical Equip - Accum Dep	\$0.00	-\$657.00
Computer Equipment	\$91,842.37	\$144,156.01
Comp Equip & Soft - Accum Dep	(\$4,301.00)	-\$37,265.00
Total Non-Current Assets	\$351,953.22	\$319,804.86
Total Assets	\$992,176.47	\$1,460,645.64
<u>Liabilities</u>		
<u>Current Liabilities</u>		
Surplus's Carried Forward		
Trade Creditors	\$29,146.74	\$41,434.54
Accrued Expenses	\$48,712.56	\$37,614.21
GST Liabilities	\$4,034.92	\$43,475.82
Payroll Accruals Payable	\$0.00	\$25,892.13
Total Superannuation		\$14,236.54

Leave Entitlements

SWAMS A/L Provision	\$80,676.34	\$110,872.31
SWAMS LSL Provision	\$83,192.00	\$130,018.00
SWAMS A/L Loading provision	\$16,572.00	\$13,161.00

Deloitte's Creditor	\$30,907.97	\$0.00
<u>Provisions</u>		
M/V Repairs Leased Vehicles	\$1,577.30	\$0.00
Clinical Audit	\$20,000.00	\$0.00
CEO Exempt FBT Items	\$13,729.60	\$0.00
M/V Fuel Expense	\$2,697.59	\$0.00
Executive Bonus		\$46,285.00
FBT Costs		\$30,547.00
Property Rental	\$5,241.13	\$0.00
Total Current Liabilities	\$336,488.15	\$493,536.55
Non-Current Liabilities		
<u>Provisions</u>		
Grant Funds Carried Forward	\$0.00	\$128,082.71
Future Planning	\$23,799.00	\$93,747.00
Total Non-Current Liabilities	\$23,799.00	\$221,829.71
Total Liabilities	\$360,287.15	\$715,366.26
Net Assets	\$631,889.32	\$745,279.38
<u>Equity</u>		
Retained Earnings	\$1,379,528.82	\$246,192.82
Building Reserves	\$0.00	\$350,000.00
Motor Vehicle Reserves	\$0.00	\$35,696.50
Surplus's Carried Forward	\$0.00	-\$50,842.39
Current Year Surplus/Deficit	-\$747,639.50	\$164,232.45
Total Equity	\$631,889.32	\$745,279.38

Summary

Surplus carried forward	<u>Program</u>	<u>Income</u>	<u>Expenditure</u>	<u>Surplus Carried forward</u>
\$24,211.28	Commonwealth AMS	\$1,114,116.32	\$1,074,780.72	\$21,829.74
	State AMS	\$1,240,800.00	\$1,202,215.57	\$19,002.94
	SWAMSAC	\$401,878.41	\$258,216.41	
\$23,430.16	BTH	\$312,893.12	\$320,959.40	
-\$14,399.61	HACC	\$151,986.59	\$151,986.59	
\$0.00	After Hours	\$45,955.45	\$0.00	\$45,955.45
\$0.00	Deloittes Audit	\$22,297.00	\$22,522.10	
\$1,835.45	Lawrence Project	\$31,835.45	\$11,498.47	\$20,336.98
\$0.00	Oxfam	\$10,000.00	\$880.00	\$9,120.00
\$6,257.18	PIRS	\$50,457.18	\$34,249.12	\$1,008.06
\$0.00	Disability	\$5,868.00	\$6,431.71	
\$0.00	Asthma	\$31,280.00	\$50,518.13	
\$0.00	FaSCIA	\$62,562.00	\$51,732.46	\$10,829.54
\$0.00	Academy	\$35,848.44	\$91,542.61	
\$9,507.93	Family Violence	\$9,507.93	\$9,507.93	
\$50,842.39		\$3,527,285.89	\$3,287,041.21	\$128,082.71