

Port Lincoln
Aboriginal Health Service

Annual Report 2020 - 2021





Port Lincoln Aboriginal Health Service Inc.

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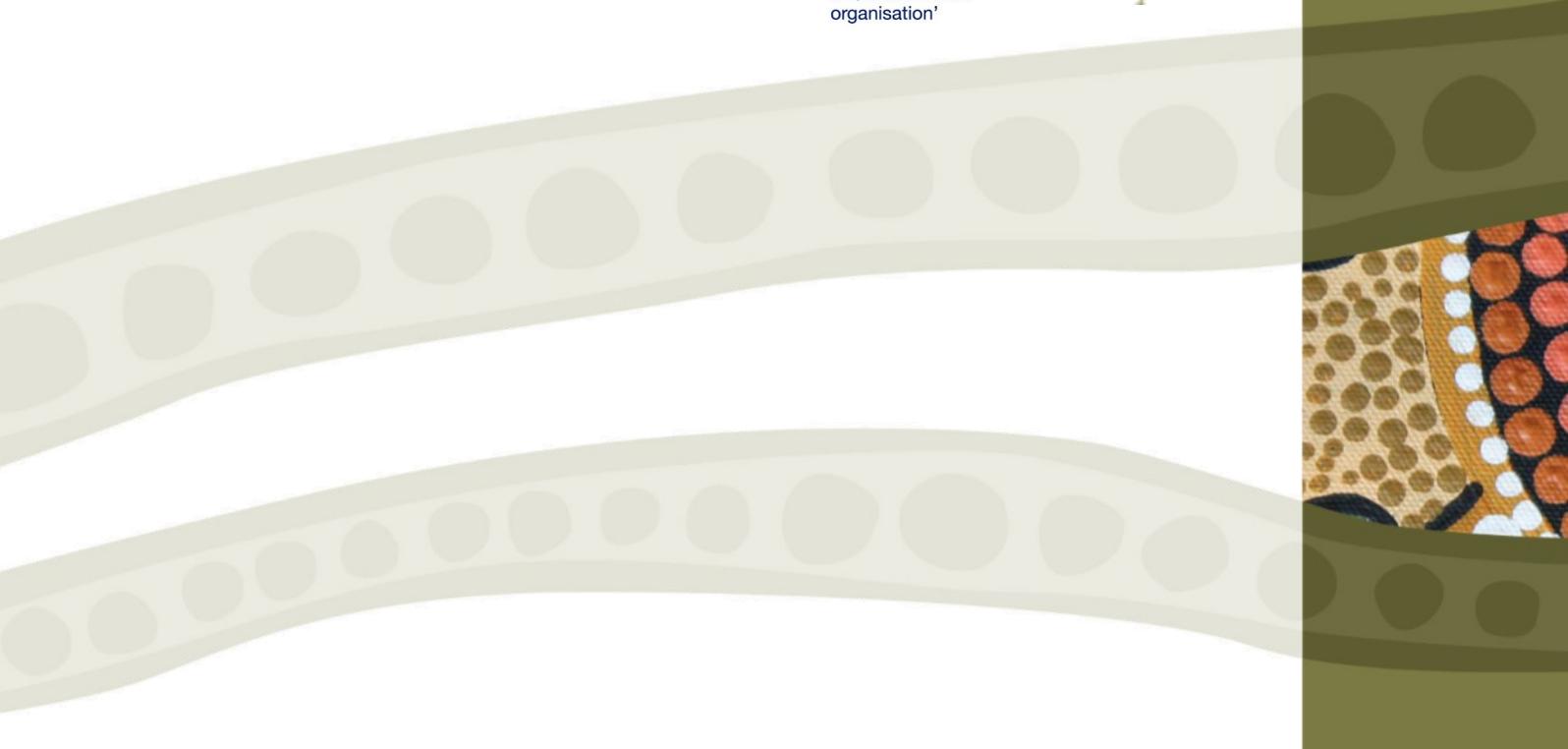
Facebook: <https://www.facebook.com/plahs.org.au>

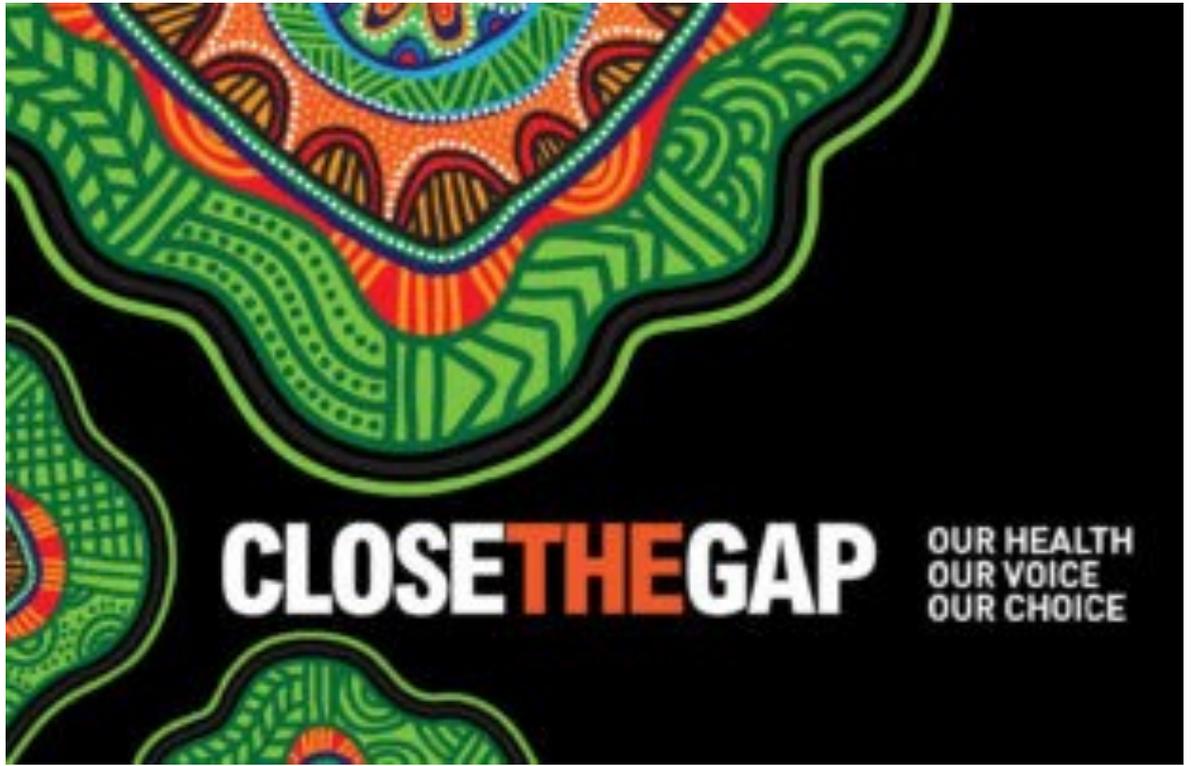
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ABN 79 159 053 254

*Report compiled by:
Morgan Hirschausen, Health Promotion Officer, October 2021*

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*'Helping our
people to continually
improve their health
status'*

Our Vision:

The Port Lincoln Aboriginal Health Service will strive to maintain our autonomy and cultural identity as an Aboriginal Community Controlled Health Service whilst delivering quality, holistic primary health services to the Aboriginal community.

Our Mission:

To provide leadership, direction and support on community health issues and to strengthen the capacity of individuals, families and communities to improve the health and social wellbeing of our people.

Our Values:

The values of PLAHS guide our attitudes and behaviours. They influence both the way we work together and what clients can expect from us.

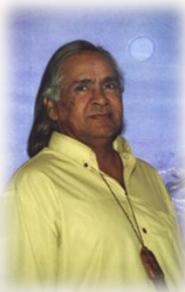
These values are:

- Self-determination through Aboriginal ownership and control
- Holistic, comprehensive Primary Health Care
- Treating staff and clients with respect, compassion, consideration, listening, understanding, equality and confidentiality
- Leadership, innovation and collaboration
- Safe environment

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Past Chairpersons

			
Iris Burgoyne* Inaugural Chairperson. 1993-94	Jennifer Johncock Chairperson. 1994-95	Tomas Liddle * Chairperson. 1995-96	Peter Burgoyne Chairperson. 1996-97, 1998-99
			
Lloyd Larking Chairperson. 1997-98	Kirt Dudley Chairperson. 1999-2000	Les Kropinyeri Chairperson 2000-01, 2001 -02, 2002-03, 2004-05, 2007-08, 2008-09, 2009-10, 2012-13, 2013-14	David Dudley Snr Chairperson. 2003 - 04, 2014 - 15, 2017-18, 2021
			
Brenton Richards * Chairperson, 2005-06, 2006-07	Arlene Burgoyne Chairperson. 2010-11, 2011-12	Neville Bilney Chairperson. 2015 - 16, 2016-17	Haydn Davey Chairperson 2019-2021



Board of Management

CEO

Business Services Manager

Practice Manager

UCL & HR Coordinator

ITC Program

Accreditation

Administration VBB

Health Promotion

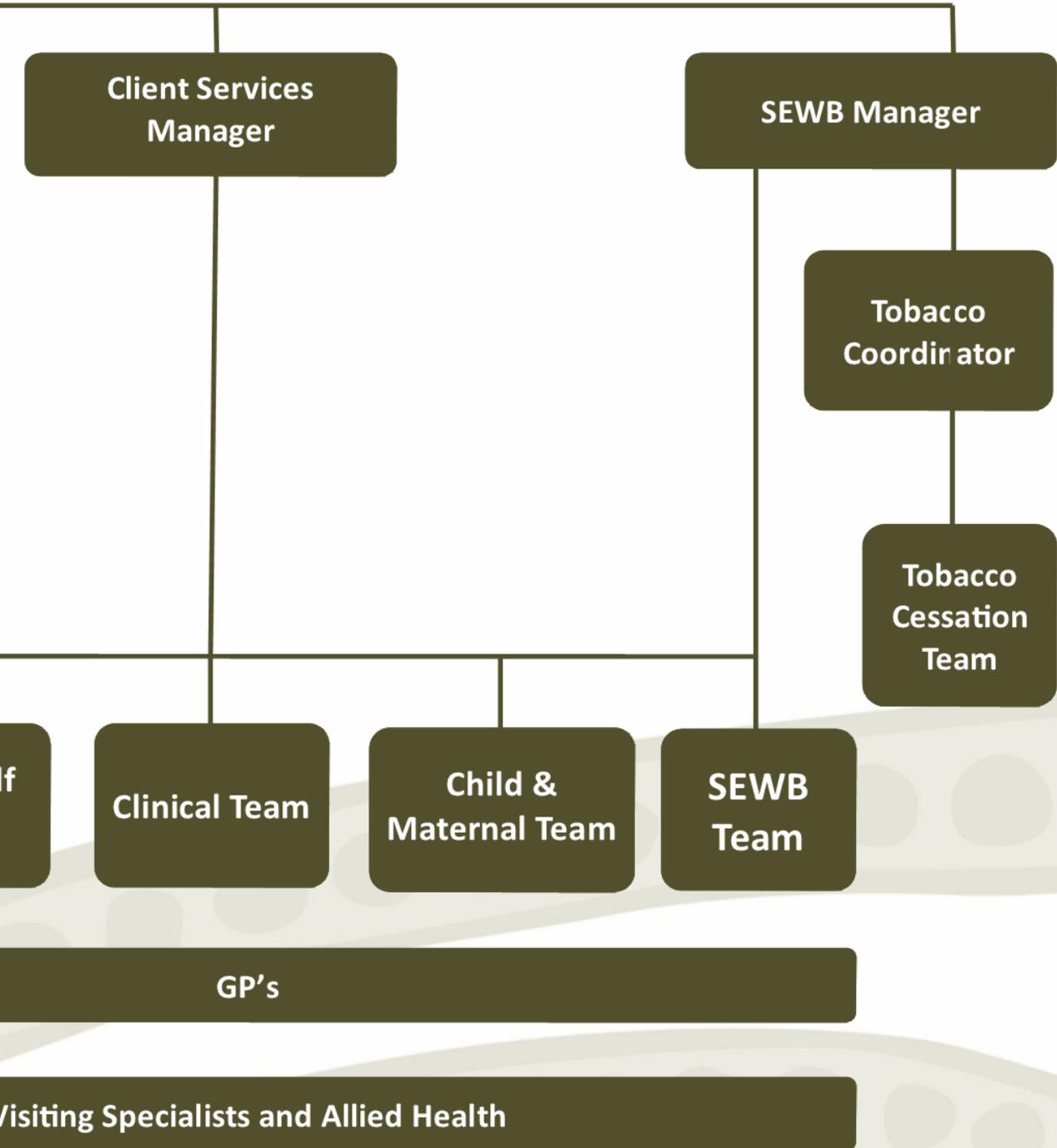
NDIS Coordinator

Reception

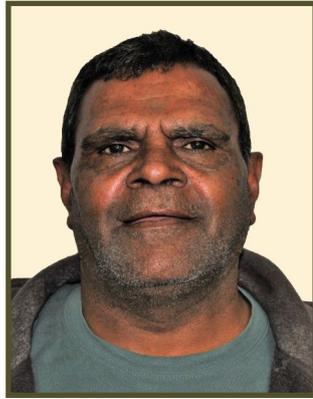
Drivers

Chronic Condition Self Management Team

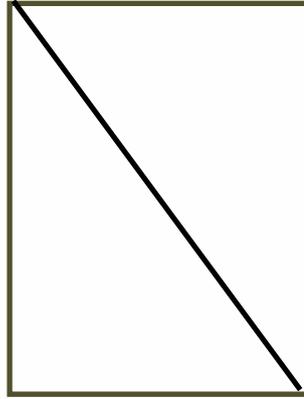
Corporate and Organisational Structure



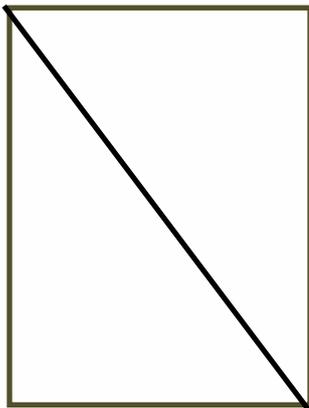
Board of Management



David Dudley
Chairperson



Vacant
Vice - Chairperson



Vacant
Secretary



Neville Bilney
Treasurer



Barry Johncock Snr
Board Member



Tosha Sambo
Board Member



Harry Miller Snr
Board Member



Iris Clements
Youth Board Member

Chairperson's Report

Chairperson

We have all survived another year of covid. Different now that the vaccine is available which certainly has placed more challenges to us all.

The service itself has come up with challenges around service delivery to our Community and staff need to be congratulated for the work they have had to keep our service operating.

I acknowledge the work done by the CEO, Senior Management, and staff by ensuring that our operations have been maintained as best as possible with very little disruption to our clients. This also includes maintaining our working relationship with our local service providers, Specialists, other Health Services and Boards of Management.

As you will see in the Administration report, we have purchased property and successfully applied for grant applications to improve the building for upgrades and renovations.

To also acknowledge that PLAHS has a registered Doctor permanently employed and providing a daily service to our clients.

PLAHS also acknowledges the services provided by our visiting registered Doctors and Specialists.

The workload responsibility that PLAHS staff (all sections) on their commitment to ensure that a good service is provided to our clients.

I wish to thank Haydn Davey and his role as leading the Organisation as Chairperson for the first half of the year, and I wish him and his family all the best for the future, the PLAHS BOM with their ongoing commitment to ensuring PLAHS is a strong service provider to our Aboriginal Community of Port Lincoln and of course our CEO and staff who have taken the lead and been pro-active during the covid pandemic in keeping our community safe.

David Dudley

Chairperson



Chief Executive Officer's Report

COVID has changed over our lives in many different ways, and it is once again been the year to focus on a safe workplace, set up policies, procedures, information, plans and assisting with vaccinations.

This alone has controlled our service delivery and certainly has impacted on staff, services and planning.

For health this is the new normal, with mask wearing, social distancing, hand hygiene, QR coding and what other requirements that we as a service have to do to ensure the health and safety of staff, clients and community, so that we comply with SA Health conditions.

At this time Port Lincoln has been very fortunate not to have an outbreak happen, but when it does, PLAHS will be ready. It is important for us all to be proactive with this pandemic and be vaccinated, to ensure that first and foremost that we are protected, our family are protected and our community

I am proud to say that we are now a vaccination site to provide COVID vaccinations to our Community.

PLAHS have applied for minor capital works to fix up the building which will be taking place later this year. We were also successful in purchasing property at Tobruk Tce and we will be doing some improvements with the waiting area and the clinical area and also finally we have been approved in lifting the attic for additional office space, so there will be some minor disruptions, but it will be well worth the end the result. Haigh Street property was handed back to PLAHS in December 2019 and now the building will be demolished due to costs of fixing up.

PLAHS are members with the SAWCAN group which is made up of the 5 ACCHO CEO's in Port Lincoln, Whyalla, Ceduna, Yalata and Oak Valley. We meet every 3 months to discuss Regional Health matters and projects which we may as a group apply for.

PLAHS employed our own doctor, Dr Alex this year have been successful in maintaining our local contracted Doctors who continue to consult at our Service, thank you to Dr Lucas and Dr. Carlier and our Registrars who have been roving. Always trying to engage in more GP's to provide clinical services to PLAHS, this is ongoing negotiations.

I wish to thank the local Services to whom we refer to, to assist our clients with additional services such as Mallee Park, West Coast Youth, SA Housing, Education Department, COBH and others.

I would also like to thank all our Allied Health Professionals who have consulted at PLAHS, also those we pay to provide additional services where we have gaps and clients require more assistance, their services and clinic times are certainly being used by Community and greatly appreciated.

PLAHS have had another good year for us to continue building on gaps and improvements of services that we need to assist our community in their health and wellbeing, we have commenced a Pain Clinic.

I wish to thank Haydn and David who have Chaired our Board of Management for the year and our Board members who have played a very important role in their responsibility to our Organisation.

Thankyou to my Senior Staff Sarah and now Margo and Warren who have been by my side in guiding changes that has been required on a day to day basis, to the staff who have come to work during this difficult year and of course our clients who have continued to support our service and stuck by us.

Kind Regards

Carolyn Miller

Chief Executive Officer



Administration Report

2021 another very busy year at Port Lincoln Aboriginal Health Service, it has continued to present challenges we have never before experienced particularly as we continue to navigate the COVID-19 landscape and the added challenge of Covid vaccination rollout throughout the community and workforce.

PLAHS has once again been nimble in initiating and rolling out effective strategies to manage the pandemic and all of its complexities in a timely and efficient manner.

There have been many highlights:

- Continuation of streamlining of financial processes and procedures to ensure PLAHS budgets and general ledger system augment accuracy, integrity and accountability for the organisation – which has been reflected in this year's audit report.
- Finalisation of lifting the caveat on property situated at 13 Haigh Street, Port Lincoln – providing PLAHS with the ability to be flexible around the use of this asset.
- Purchase of residential property located at 20 Tobruk Terrace Port Lincoln – property adjoins current PLAHS service – opportunity to grow service delivery into the future.
- Success in renewal and obtaining funding opportunities – new opportunities.
 - ◇ DoH IAHP Service Maintenance funding - \$287K
 - ◇ Minister for Health & Wellbeing – Maternal & Child Health \$140K – co-design a program in relation to service delivery for M&CH
 - ◇ AHCSA – BHP Vital Resources Fund – COVID support - \$46K
 - ◇ NACCHO – NDIS Ready Project \$20K – see SAWCAN notes
 - ◇ NACCHO – NDIS Community Connector Program \$35K – see SAWCAN notes
 - ◇ NACCHO – COVID Vaccine Response \$20K
- Employment of Health Data Analyst – role commenced September 2020 - this position has allowed PLAHS to have a dedicated team member to analyse data and provide statistical evidence to make better informed organisational and service delivery decisions. This position also has an IT focus which works closely with our external IT provider and troubleshoot our systems to provide and implement suitable software for more streamline day to day processes.

- Alliance with SAWCAN (a regional initiative – this has provided a vehicle for additional support in the NDIS space with our inclusion in the Aboriginal disAbility Alliance which allows for a regional collaborative approach which is culturally appropriate.
- New PLAHS Website is almost complete – expected launch will be the first quarter of FY2022.
- Successful application of funding from DoH to assist with service maintenance – this will provide us with the ability to complete Asbestos removal from the main PLAHS building, replace windows, sound proof clinical suites, renovate stairwells, in addition to revamping the children’s playground area and staff outdoor area. This works is scheduled for early to mid-2022.

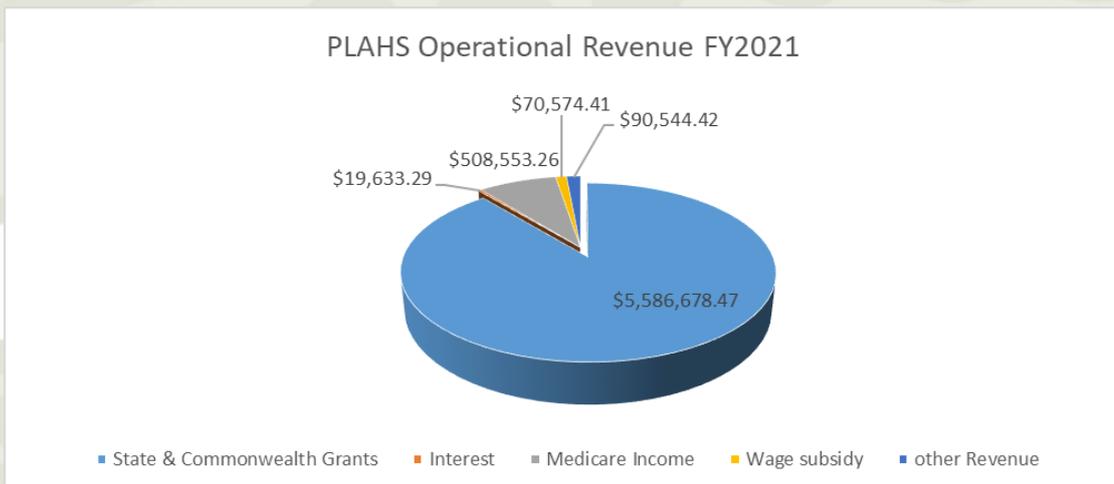
Capital works program:

- Backup generator installed – October 2020.
- Installation of security cameras in drivers Motor vehicles – completed October 2020.
- Refurbish reception area – drawings and plans approved- construction scheduled completion October 2021.
- Phase 1 - asbestos removal from PLAHS building, 13 Haigh Street, and 20 Tobruk Terrace.
- Phase 1 - staff workstation accommodation conversion to clinical suites.
- Lifting of attic – funding from DoH confirmed – drawings and plans with projected construction completion Dec 2021/Jan 2022.
- Motor vehicle fleet update (3 Motor vehicles) – expected delivery of new vehicles Dec 2021 – delayed delivery due to Toyota factory manufacturing timeframes.

Finance:

Financially PLAHS continues to be in a strong fiscal position.

PLAHS adopted budget for 2020- 2021 included combined capital and operational expenditure of \$6.7 million to be funded from a variety of Commonwealth and State Government grants in addition to income generated via Medicare receipts.



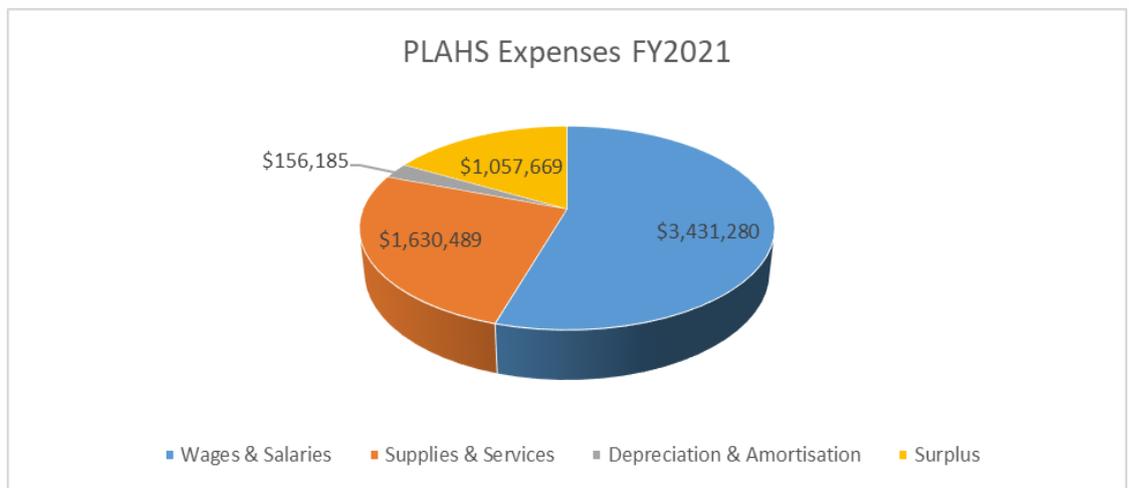
Administration Report

27 funding agreements (approx. \$5.5 million income – including funds rolled over from FY2020) coupled with income generated from Medicare (approx. \$508 K – includes Practice Incentives Payments).

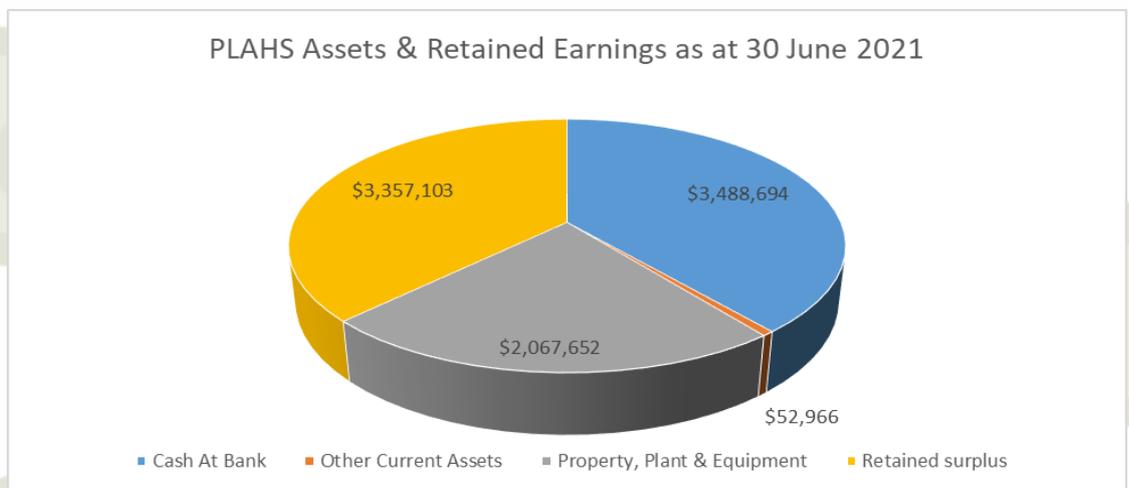
Other income includes funds from Covid-19 Government Stimulus package & rental received from Headspace.

Total Revenue for the period being \$6.27, an increase of 5.98% on FY2020.

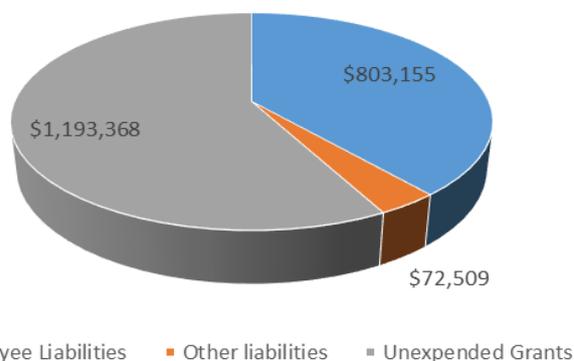
Major operational expenditure line continues to be salary and wages.



Strong Balance Sheet Position:



PLAHS Liabilities as at @ 30 June 2021



I would like to acknowledge our Funding Bodies and thank them for their continued support:

- Department of Health (IAHP)
- National Indigenous Australians Agency NIAA
- Country Outback Health (CoBH)
- National Aboriginal Community Controlled Health Organisation (NACCHO)
- Aboriginal Health Council South Australia (AHCSA)
- Eyre & Far North Local Health Network (EFNLHN),
- Drug & Alcohol Services SA(DASSA)
- Country SA PHN
- GPEX
- DSS
- Rural Doctors Workforce Agency (RDWA)
- South Australia Health Medical Research Institute (SAHMRI)
- Wellness SA

Building and infrastructure:

As noted in the highlights to ensure the building remains fit for purpose, a works program has commenced, replacing windows, removing asbestos, replacing ceiling tiles, creating additional consulting rooms. These works will not only make the building safe and provide a better working environment but assist with the “client journey” as clients access PLAHS services.

With the acquisition of 20 Tobruk Terrace it gives PLAHS scope to increase service delivery on the one site - alternatives and building for purpose are currently being workshopped – stay tuned as BOM, the PLAHS team and community develop plans for this space. The same can be said for 13 Haigh Street as PLAHS now have the ability to develop the site to best suit community needs.

Administration Report

Staffing:

PLAHS employed a total of 53 employees throughout the year. Total salary and wage costs for the year equated to \$3.43 million

Our workforce remains stable with a suitable mix of aboriginal and non-aboriginal employees.

PLAHS STAFFING MIX

36 
Aboriginal

17 
Non Aboriginal

Information Management and Technology (IMT):

IMT continues to be outsourced by Hood Sweeney Technology with responsibilities for periodic software and hardware updates along with day to day IT problem solving.

Accreditation:

GPA Accreditation – PLAHS continues to have all accreditations & registrations in place.

RACGP accreditation successful March 2021 – this is a three year cycle – expiry March 2024.

Summary:

The PLAHS teams continues to explore strategies to expand and increase revenue streams, as this provides opportunities for PLAHS to enhance service delivery and expand culturally appropriate services and programs, which fall outside of Government funded projects.

In closing I would like to thank Carolyn Miller and the Administration team for their continued support; the assistance of Vanessa and Sarah at Vision Beyond Business, and the wider PLAHS team as we continue to provide high quality healthcare to our local community.

Thank you and I look forward to a wonderful 2022 - there really are some exciting things on the horizon – lets continue to work as one and provide client centric service to our Community.

Teresa Szumski

Business Services Manager



UCL & Workforce Report

Education & Training (E&T)

Number of Aboriginal students (PLAHS staff & community) enrolled in VET/University/Other accredited Education & Training	Sem 2 2020	Sem 1 2021
	29	37
Number of Aboriginal Professional Development (PD) Activities	215	150
Number of all staff enrolled in Accredited E&T	29	41
Number of all staff undertaking PD activities	316	262
Percentage of all students completing accredited studies and PD	95.7%	85.7%
Percentage of all staff completing studies and PD	96.8%	95.7%
Percentage of Aboriginal staff completing accredited E&T and PD	95.8%	94.2%

Accredited Education & Training

In the reporting period, four staff completed the Certificate IV in Aboriginal and/or Torres Strait Islander Primary Health Care Practice, with a further three students continuing. Current staff studies include Master of Nursing Diabetes Education & Management; Graduate Certificate in Primary Health Care (Diabetes Education & Management); Bachelor of Nursing; UniSA Indigenous Pathways Program; Diploma in Narrative Approaches for Aboriginal People; Aboriginal and/or Torres Strait Islander Maternal and Infant Care Skill Set – Clinical; Provide First Aid; Cardiopulmonary Resuscitation (CPR) and the Quitskills Smoking skillset.

Staff Professional Development Activities

In addition to accredited studies many staff professional development activities were undertaken including but not limited to: Eye Health Education and Use of Retinal Camera; Prostate Cancer; Autism Spectrum Disorder; Allergies and Antibiotics; Tackling Indigenous Smoking In-service; COVID 19 information and vaccination training programs; Diabetes Medication; Safe and Quality use of Medicines; Kidney Health; Syphilis & other Sexually Transmitted Infections; Aboriginal LGBTQIA+; Work Health & Safety; Chest Pain and Seizure; 'The Breathless Patient'; Asthma/COPD Medication; and the Indigenous Youth Mobility Program. For the forthcoming RACGP accreditation staff also undertook update training on the required standards. The regular Wednesday afternoon staff training timeslot also provided a range of relevant topics and information updates including with external services.

COVID-19 continued to impact on 2021 staff education, with the need to substitute online/E-Learning for face-to-face training. COVID 19 information and vaccination training programs have continued throughout.

Mandatory training for all PLAHS staff includes: Provide First Aid; annual Cardio-Pulmonary Resuscitation updates for all clinical staff; Safe Environments for Children & Young People; Hand Hygiene/Infection Control; Cultural Awareness and Communicare Training.

PLAHS Workforce and Qualifications

Of the 44 employees (including those on extended leave) at 30/6/2021, 63.6% were Aboriginal with the Senior Management Team 66% Aboriginal. PLAHS has also continued as a host employer for two Aboriginal Health Worker trainees during the reporting period.

Aboriginal staff with at least one completed accredited VET/University qualification occupied 22 positions across PLAHS along with 17 non Aboriginal staff.

The *PLAHS Employees Enterprise Agreement 2019* has the nominal expiry date of 31 March 31st 2022 and consideration of renegotiation procedures and issues is already underway.

Positions Advertised Externally

Senior Manager Client Services
Health Data Analyst
Medical Receptionist
Care Coordinator

Positions Filled via Internal Processes or Temporary Employment Register

Acting Team Leader, Chronic Condition Self-Management (fixed-term)
Aboriginal Health Worker – temporary transfer for experience and upskilling to Child & Maternal Health Team
Medical Receptionist (casual)
Aboriginal Researcher – PLAHS/Adelaide Rural Clinical School
General Practitioner x3 (2x casual; 1x contractor)

Positions Vacated (1/7/2020 - 30/6/2021)

Aged Home Care Worker
Indigenous Health Project Officer
Medical Receptionist (casual) x2
Tobacco Action Worker
Aboriginal Health Worker Child & Maternal Health
Aboriginal Community Support Worker
Senior Manager Client Services
GP Registrar

Reasons for leaving as per Exit Interview Report include:

Career opportunities
Personal/family reasons
Relocating to another area

Sue Mills

Coordinator
Unique Centre of Learning





It's time to get vaccinated.

Protect *yourself* | Protect your *family* | Protect your *mob*.

Call PLAHS on 86830162 to book your covid-19 vaccination today

Wash your hands today... Keep germs away!

COVID-19

A song to help make sure you clean your hands for 20 seconds!



Black fella,
white fella



It doesn't matter
what your colour



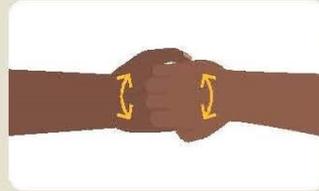
As long as you
a true fella



As long as you
a real fella



All the people
of different races



With different lives
in different places



It doesn't matter
what your name is



We got to have
lots of changes



We need more brothers
if we're to make it



We need more sisters
if we're to save it



Are you the one who's gonna
stand up and be counted?



Are you the one who's gonna
be there when we shout it?



Are you the one who's always
ready with a helping hand?

COVID-19
SLOW THE
SPREAD



Credit: ABC Indigenous @ www.abc.net.au/indigenous

Finance Report

**Port Lincoln Aboriginal Health Service Inc.
Financial Statements
For the Year Ended 30 June 2021**



Port Lincoln Aboriginal Health Service Inc.
Financial Statements
For the year ended 30 June 2021

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Port Lincoln Aboriginal Health Service Inc.

STATEMENT OF PROFIT OR LOSS AND OTHER COMPREHENSIVE INCOME FOR THE YEAR ENDED 30 JUNE 2021

	Note	2021 \$	2020 \$
Grant revenue	2	5,511,678	4,840,038
Other Revenues	2	764,305	1,074,393
Net Gain on Disposal of Non Current Assets	4	-	7,292
Employee Benefits Expense		(3,431,280)	(3,479,446)
Supplies and Services	3	(1,630,849)	(1,697,781)
Depreciation and Amortisation	8	(156,185)	(141,850)
Current year operating surplus		<u>1,057,669</u>	<u>602,646</u>
Other comprehensive income		-	-
Total comprehensive income for the year		<u>1,057,669</u>	<u>602,646</u>

The accompanying notes form part of these financial statements.

Port Lincoln Aboriginal Health Service Inc.

STATEMENT OF FINANCIAL POSITION AS AT ENDED 30 JUNE 2021

	Note	2021 \$	2020 \$
ASSETS			
CURRENT ASSETS			
Cash and cash equivalents	5	3,488,694	2,699,555
Accounts receivable and other debtors	6	22,751	71,568
Other current assets	7	30,215	33,420
TOTAL CURRENT ASSETS		3,541,660	2,804,543
NON CURRENT ASSETS			
Property, plant and equipment	8	2,067,652	1,739,932
TOTAL NON CURRENT ASSETS		2,067,652	1,739,932
TOTAL ASSETS		5,609,312	4,544,475
LIABILITIES			
CURRENT LIABILITIES			
Accounts payable and other payables	9	183,177	303,614
Unexpended Grants		1,193,368	1,045,070
Financial liabilities	10	34,206	67,168
Employee provisions	11	681,962	681,371
TOTAL CURRENT LIABILITIES		2,092,713	2,097,223
NON CURRENT LIABILITIES			
Financial liabilities	10	38,303	29,758
Employee provisions	11	121,193	118,060
TOTAL NON CURRENT LIABILITIES		159,496	147,818
TOTAL LIABILITIES		2,252,209	2,245,041
NET ASSETS		3,357,103	2,299,434
EQUITY			
Retained surplus		3,357,103	2,299,434
TOTAL EQUITY		3,357,103	2,299,434

The accompanying notes form part of these financial statements.

Port Lincoln Aboriginal Health Service Inc.

STATEMENT OF CHANGES IN EQUITY FOR THE YEAR ENDED 30 JUNE 2021

Note	Retained surplus \$	Total equity \$
Balance at 1 July 2019	1,696,743	1,696,743
Comprehensive income		
Operating Surplus for the year	602,646	602,646
Adjustment directly to retained earnings	45	45
Total equity movements attributable to members of PLAHS	<u>602,691</u>	<u>602,691</u>
Balance at 30 June 2020	<u>2,299,434</u>	<u>2,299,434</u>
Balance at 1 July 2020	<u>2,299,434</u>	<u>2,299,434</u>
Comprehensive income		
Operating Surplus for the year	1,057,669	1,057,669
Total equity movements attributable to members of PLAHS	<u>1,057,669</u>	<u>1,057,669</u>
Balance at 30 June 2021	<u>3,357,103</u>	<u>3,357,103</u>

The accompanying notes form part of these financial statements.

Port Lincoln Aboriginal Health Service Inc.

STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 30 JUNE 2021

	Note	2021 \$	2020 \$
CASH FLOWS FROM OPERATING ACTIVITIES			
Receipts from funding bodies and customers		6,763,445	6,425,104
Interest received		22,437	15,968
Payments to suppliers and employees		(5,488,421)	(5,051,888)
Net cash generated from operating activities	14	<u>1,297,461</u>	<u>1,389,184</u>
CASH FLOWS FROM INVESTING ACTIVITIES			
Proceeds from sale of property, plant and equipment		-	19,545
Payment for property, plant and equipment	8	(458,563)	(205,031)
Net cash from/(used in) investing activities		<u>(458,563)</u>	<u>(185,486)</u>
CASH FLOWS FROM FINANCING ACTIVITIES			
Repayment of finance liabilities		(49,759)	(56,500)
Net cash from/(used in) financing activities		<u>(49,759)</u>	<u>(56,500)</u>
Net increase/(decrease) in cash held		789,139	1,147,198
Cash at beginning of the financial year		2,699,555	1,552,357
Cash at end of the financial year	5	<u><u>3,488,694</u></u>	<u><u>2,699,555</u></u>

The accompanying notes form part of these financial statements.

Port Lincoln Aboriginal Health Service Inc

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2021**NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES****Basis of Preparation**

Port Lincoln Aboriginal Health Service Inc applies Australian Accounting Standards – Reduced Disclosure Requirements as set out in AASB 1053 *Application of Tiers of Australian Accounting Standards*.

The financial statements are general purpose financial statements that have been prepared in accordance with Australian Accounting Standards – Reduced Disclosure Requirements of the Australian Accounting Standard Board (AASB), and the Australian Charities and Not-for-profits Commission Act 2012. The association is a not-for-profit Association for financial reporting purposes under Australian Accounting Standards.

Australian Accounting Standards set out accounting policies that the AASB has concluded would result in financial statements containing relevant and reliable information about transactions, events and conditions. Material accounting policies adopted in the preparation of the financial statements are presented below and have been consistently applied unless stated otherwise.

The financial statements, except for the cash flow information, have been prepared on an accrual basis and are based on historical costs, modified, where applicable, by the measurement at fair value of selected non-current assets, financial assets and financial liabilities. The amounts presented in the financial statements have been rounded to the nearest dollar.

(a) Revenue and Other Income*Grant and Donation Income*

Grant income is accounted for in accordance with the terms established in individual grant agreements. Where an agreement is enforceable and contains sufficiently specific performance obligations the income is either recognised over time as the work is performed or recognised at the point in time that the control of the services pass to the recipient. Where the association has received assets (including cash) to acquire or construct a non-financial asset, the asset is to be controlled by the association and there is a refund liability if the terms and conditions of the grant are not met, then the asset is recognised as a contract liability on receipt and recorded as income as the performance obligation to acquire or construct the asset is completed.

Donations and bequests are recognised as revenue when received.

Interest Revenue

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

Service Revenue

Revenue from the rendering of a service is recognised upon the delivery of the service to the customer.

All revenue is stated net of the amount of goods and services tax.

**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2021**

(b) Fair Value of Assets and Liabilities

The association measures some of its assets at fair value on recurring basis. Fair value is the prices the association would receive to sell an asset or would have to pay to transfer a liability in an orderly (ie unforced) transaction between independent, knowledgeable and willing market participants at the measurement date.

As fair value is a market-based measure, the closest equivalent observable market pricing information is used to determine fair value. Adjustments to market values may be made having regard to the characteristics of the specific asset or liability. The fair values of assets and liabilities that are not traded in an active market are determined using one or more valuation techniques. These valuation techniques maximise, to the extent possible, the use of observable market data.

To the extent possible, market information is extracted from either the principal market for the asset or liability (ie the market with the greatest volume and level of activity for the asset or liability) or, in the absence of such a market, the most advantageous market available to the Association at reporting date (ie the market that maximises the receipts from the sale of the asset or minimises the payment made to transfer the liability, after taking into account transaction costs and transport costs).

For non-financial assets, the fair value measurement also takes into account a market participant's ability to use the asset in its highest and best use, or to sell it to another market participant that would use the asset in its highest and best use.

The fair value of liabilities and the associations own equity instruments (excluding those related to share-based payment arrangements) may be valued, where there is no observable market price in relation to the transfer of such financial instrument, by reference to observable market information where such instruments are held as assets. Where this information is not available, other valuation techniques are adopted and, where significant, are detailed in the respective note to the financial statements.

c) Property, Plant and Equipment

Plant and Equipment

Plant and equipment are measured on the cost basis and are therefore carried at cost less accumulated depreciation and any accumulated impairment losses. In the event the carrying amount of plant and equipment is greater than its estimated recoverable amount, the carrying amount is written down immediately to its estimated recoverable amount and impairment losses recognised either in profit or loss or as a revaluation decrease if the impairment losses relate to a revalued asset. A formal assessment of recoverable amount is made when impairment indicators are present (refer to Note 1(f) for details of impairment).

The cost of fixed assets constructed within the association includes the cost of materials, direct labour, borrowing costs and an appropriate portion of fixed and variable overheads.

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

Port Lincoln Aboriginal Health Service Inc

**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2021**

Depreciation

The depreciation amount of all fixed assets, including buildings and capitalised leased assets, is depreciated on a straight-line basis over the asset's useful life commencing from the time the asset is held ready for use. Leasehold improvements are depreciated over the shorter of either the unexpired period of the lease or the estimated useful lives of the improvements.

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

Buildings	2.5%
Motor Vehicles	25%
Other Plant and Equipment	10% - 50%

The assets' residual valued and useful lives are reviewed and adjusted, if appropriate, at the end of each reporting period.

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

(d) Leases

At inception of a contract, the Association assesses if the contract contains or is a lease. If there is a lease present, a right-of-use asset and a corresponding lease liability is recognised by the Association where the Association is a lessee. However all contracts that are classified as short-term leases (lease with remaining lease term of 12 months or less) and leases of low value assets are recognised as an operating expense on a straight-line basis over the term of the lease.

Initially the lease liability is measured at the present value of the lease payments still to be paid at commencement date. The lease payments are discounted at the interest rate implicit in the lease. If this rate cannot be readily determined, the Association uses the incremental borrowing rate.

Lease payments included in the measurement of the lease liability are as follows:

- fixed lease payments less any lease incentives;
- variable lease payments that depend on an index or rate, initially measured using the index or rate at the commencement date;
- the amount expected to be payable by the lessee under residual value guarantees;
- the exercise price of purchase options, if the lessee is reasonably certain to exercise the options;
- lease payments under extension options if lessee is reasonably certain to exercise the options; and
- payments of penalties for terminating the lease, if the lease term reflects the exercise of an option to terminate the lease.

Port Lincoln Aboriginal Health Service Inc

NOTES TO THE FINANCIAL STATEMENTS
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The right-of-use assets comprise the initial measurement of the corresponding lease liability as mentioned above, any lease payments made at or before the commencement date as well as any initial direct costs. The subsequent measurement of the right-of-use assets is at cost less accumulated depreciation and impairment losses.

Right-of-use assets are depreciated over the lease term or useful life of the underlying asset whichever is the shortest.

Where a lease transfers ownership of the underlying asset or the cost of the right-of-use asset reflects that the Association anticipates to exercise a purchase option, the specific asset is depreciated over the useful life of the underlying asset.

(e) Financial Instruments

Initial recognition and measurement

Financial assets and financial liabilities are recognised when the Association becomes a party to the contractual provisions to the instrument. For financial assets, this is equivalent to the date that the association commits itself to either purchase or sell the asset (ie trade date accounting is adopted).

Financial instruments are initially measured at fair value plus transaction costs except where the instrument is classified 'at fair value through profit or loss' in which case transaction costs are expensed to profit or loss immediately.

Trade receivables are initially measured at the transaction price if the trade receivables do not contain a significant financing component or if the practical expedient has been applied as specified in AASB 15.63.

Classification and subsequent measurement

Financial liabilities

Financial liabilities are subsequently measured at:

- amortised cost; or
- fair value through profit and loss.

A financial liability is measured at fair value through profit and loss if the financial liability is:

- a contingent consideration of an acquirer in a business combination to which AASB 3 applies
- held for trading; or
- initially designated as at fair value through profit or loss.

All other financial liabilities are subsequently measured at fair value, amortised cost using the effective interest method. The effective interest method is a method of calculating the amortised cost of a debt instrument and of allocating interest expense in profit or loss over the relevant period.

The effective interest rate is the internal rate of return of the financial asset or liability. That is, it is the rate that exactly discounts the estimated future cash flows through the expected life of the instrument to the net carrying amount at initial recognition.



Port Lincoln Aboriginal Health Service Inc

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2021

A financial liability is held for trading if it is:

- incurred for the purpose of repurchasing or repaying in the near term;
- part of a portfolio where there is an actual pattern of short-term profit taking; or
- a derivative financial instrument (except for a derivative that is in a financial guarantee contract or a derivative that is in an effective hedging relationship).

Any gains or losses arising on changes in fair value are recognised in profit or loss to the extent that they are not part of a designated hedging relationship.

The change in fair value of the financial liability attributable to changes in the issuer's credit risk is taken to other comprehensive income and is not subsequently reclassified to profit or loss. Instead, it is transferred to retained earnings upon derecognition of the financial liability.

If taking the change in credit risk in other comprehensive income enlarges or creates an accounting mismatch, then these gains or losses should be taken to profit or loss rather than other comprehensive income.

A financial liability cannot be reclassified.

Financial assets

Financial assets are subsequently measured at:

- amortised cost
- fair value through other comprehensive income; or
- fair value through profit and loss

on the basis of the two primary criteria, being

- the contractual cash flow characteristics of the financial asset; and
- the business model for managing the financial assets

A financial asset is subsequently measured at amortised cost when it meets the following conditions:

- the financial asset is managed solely to collect contractual cash flows; and
- the contractual terms within the financial asset give rise to cash flows that are solely payments of principal and interest on the principal amount outstanding on specified dates.

A financial asset is subsequently measured at fair value through other comprehensive income when it meets the following conditions:

- the contractual terms within the financial asset give rise to cash flows that are solely payments of principal and interest on the principal amount outstanding on specified dates; and
- the business model for managing the financial asset comprises both contractual cash flows collection and the selling of the financial asset.

By default, all other financial assets that do not meet the conditions of amortised cost and the fair value through other comprehensive income's measurement condition are subsequently measured at fair value through profit and loss.

Derecognition

Derecognition refers to the removal of a previously recognised financial asset or financial liability from the statement of financial position.

Derecognition of financial liabilities

A liability is derecognised when it is extinguished (ie when the obligation in the contract is discharged, cancelled or expires). An exchange of an existing financial liability for a new one with substantially modified terms, or a substantial modification to the terms of a financial liability, is treated as an extinguishment of the existing liability and recognition of a new financial liability.

The difference between the carrying amount of the financial liability derecognised and the consideration paid and payable, including any non-cash assets transferred or liabilities assumed, is recognised in profit or loss.

Derecognition of financial assets

A financial asset is derecognised when the holder's contractual rights to its cash flows expires, or the asset is transferred in such a way that all the risks and rewards of ownership are substantially transferred.

All of the following criteria need to be satisfied for derecognition of a financial asset:

- the right to receive cash flows from the asset has expired or been transferred;
- all risk and rewards of ownership of the asset have been substantially transferred; and
- the Association no longer controls the asset (ie it has no practical ability to make unilateral decisions to sell the asset to a third party).

On derecognition of a financial asset measured at amortised cost, the difference between the asset's carrying amount and the sum of the consideration received and receivable is recognised in profit or loss.

Impairment

The Association recognises a loss allowance for expected credit losses on financial assets that are measured at amortised cost or fair value through other comprehensive income.

Loss allowance is not recognised for financial assets measured at fair value through profit or loss.

Expected credit losses are the probability-weighted estimate of credit losses over the expected life of a financial instrument. A credit loss is the difference between all contractual cash flows that are due and all cash flows expected to be received, all discounted at the original effective interest rate of the financial instrument.

The Association used the following approaches to impairment, as applicable under AASB 9:

- the general approach;
- the simplified approach;

General approach



Port Lincoln Aboriginal Health Service Inc

**NOTES TO THE FINANCIAL STATEMENTS
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Under the general approach, at each reporting period, the Association assessed whether the financial instruments are credit impaired, and if:

- the credit risk of the financial instrument increased significantly since initial recognition, the Association measured the loss allowance of the financial instruments at an amount equal to the lifetime expected credit losses; and
- there was no significant increase in credit risk since initial recognition, the Association measured the loss allowance for that financial instrument at an amount equal to 12-month expected credit losses.

Simplified approach

The simplified approach does not require tracking of changes in credit risk in every reporting period, but instead requires the recognition of lifetime expected credit loss at all times.

This approach is applicable to:

- trade receivables; and
- lease receivables.

In measuring the expected credit loss, a provision matrix for trade receivables was used taking into consideration various data to get to an expected credit loss (ie diversity of its customer base, appropriate groupings of its historical loss experience, etc).

Recognition of expected credit losses in financial statements

At each reporting date, the Association recognised the movement in the loss allowance as an impairment gain or loss in the statement of profit or loss and other comprehensive income.

The carrying amount of financial assets measured at amortised cost includes the loss allowance relating to that asset.

Assets measured at fair value through other comprehensive income are recognised at fair value with changes in fair value recognised in other comprehensive income. An amount in relation to change in credit risk is transferred from other comprehensive income to profit or loss at every reporting period.

For financial assets that are unrecognised (eg loan commitments yet to be drawn, financial guarantees), a provision for loss allowance is created in the statement of financial position to recognise the loss allowance.

f) Impairment of Assets

At the end of each reporting period, the Association reviews the carrying amounts of its tangible and intangible assets to determine whether there is any indication that those assets have been impaired. If such an indication exists, the recoverable amount of the asset, being the higher of the asset's fair value less costs of disposal and value in use, is compared to the asset's carrying amount. Any excess of the asset's carrying amount over its recoverable amount is recognised in profit or loss.

Port Lincoln Aboriginal Health Service Inc

**NOTES TO THE FINANCIAL STATEMENTS
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Where the assets are not held primarily for their ability to generate net cash inflows – that is, they are specialised assets held for continuing use of their service capacity – the recoverable amounts are expected to be materially the same as fair value.

Where it is not possible to estimate the recoverable amount of an individual asset, the Association estimates the recoverable amount of the cash-generating unit to which the asset belongs.

Where an impairment loss on a revalued individual asset is identified, this is recognised against the revaluation surplus in respect of the same class of asset to the extent that the impairment loss does not exceed the amount in the revaluation surplus for that class of asset.

(g) Employee Provisions

Short-term employee benefits

Provision is made for the association's obligation for short-term employee benefits. Short-term employee benefits are benefits (other than termination benefits) that are expected to be settled wholly before 12 months after the end of the annual reporting period in which the employees render the related service, including wages, salaries and sick leave. Short-term employee benefits are measured at the (undiscounted) amounts expected to be paid when the obligation is settled.

The association's obligations for short-term employee benefits such as wages, salaries and sick leave are recognised as a part of current trade and other payables in the statement of financial position.

Other long-term employee benefits

Provision is made for employees' annual leave entitlements not expected to be settled wholly within 12 months after the end of the annual reporting period in which the employees render the related service. Other long-term employee benefits are measured at the present value of the expected future payments to be made to employees. Expected future payments incorporate anticipated future wage and salary levels, durations of service and employee departures, and are discounted at rates determined by reference to market yields at the end of the reporting period on government bonds that have maturity dates that approximate the terms of the obligations. Any remeasurements of obligations for other long-term employee benefits for changes in assumptions are recognised in profit or loss in the periods in which the changes occur.

The association's obligations for long-term employee benefits are presented as non-current provisions in its statement of financial position, except where the association does not have an unconditional right to defer settlement for at least 12 months after the reporting date, in which case the obligations are presented as current provisions.

(h) Cash and Cash Equivalents

Cash and cash equivalents include cash on hand, deposits held at-call with banks, other short-term highly liquid investments with original maturities of three months or less, and bank overdrafts.

(i) Accounts Receivable and Other Debtors

Accounts receivable and other debtors include amounts due from members as well as amounts receivable from customers for goods sold in the ordinary course of business. Receivables expected to

Port Lincoln Aboriginal Health Service Inc

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2021

be collected within 12 months of the end of the reporting period are classified as current assets. All other receivables are classified as non-current assets.

Accounts receivable are initially recognised at fair value and subsequently measured at amortised cost using the effective interest method, less any provision for impairment. Refer to Note 1(f) for further discussion on the determination of Impairment losses.

(j) Goods and Services Tax (GST)

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

Receivables and payables are stated inclusive of the amount of GST receivable or payable. The net amount of GST recoverable from, or payable to, the ATO is included with other receivables or payables in the statement of financial position.

Cash flows are presented on a gross basis. The GST components of cash flows arising from investing or financing activities which are recoverable from, or payable to, the ATO are presented as operating cash flows included in receipts from customers or payments to suppliers.

(k) Income tax

The association is not subject to income tax and therefore no income tax expense or income tax payable is shown in the financial statements.

(l) Accounts Payable and Other Payables

Accounts payable and other payables represent the liabilities outstanding at the end of the reporting period for goods and services received by the association during the reporting period that remain unpaid. The balance is recognised as a current liability with the amounts normally paid within 30 days of recognition of the liability.

(m) Provisions

Provisions are recognised when the association has a legal or constructive obligation, as a result of past events, for which it is probable that an outflow of economic benefits will result and that outflow can be reliably measured. Provisions recognised represent the best estimate of the amounts required to settle the obligation at the end of the reporting period.

(n) Comparative Figures

When required by Accounting Standards or for improved presentation of the financial report, comparative figures have been adjusted to conform to changes in presentation for the current financial year.

(o) Critical Accounting Estimates and Judgements

The Board of Management evaluate estimates and judgements incorporated into the financial statements based on historical knowledge and best available current information. Estimates assume a reasonable expectation of future events and are based on current trends and economic data, obtained both externally and within the Association.

**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2021**

Key Estimates

(i) Impairment

The freehold land and buildings were independently valued at 17 August 2017 an independent valuer. The valuation was based on the fair value less costs of disposal. The critical assumptions adopted in determining the valuation included the location of the land and buildings, the current strong demand for land and buildings in the area and recent sales data for similar properties. The valuation resulted in a revaluation decrement of \$1.17 million being recognised for the year ended 30 June 2018.

At 30 June 2021, the Board of Management reviewed the key assumptions made by the valuers at 17 August 2017. They have concluded that these assumptions remain materially unchanged and are satisfied that carrying amount does not exceed the recoverable amount of land and buildings at 30 June 2021

(ii) Useful lives of Property, Plant and Equipment

As described in Note 1(d), the Association reviews the estimated useful lives of property, plant and equipment at the end of each annual reporting period

Key Judgements

(i) *Performance obligations under AASB 15*

To identify a performance obligation under AASB 15, the promise must be sufficiently specific to be able to determine when the obligation is satisfied. Management exercises judgement to determine whether the promise is sufficiently specific by taking into account any conditions specified in the arrangement, explicit or implicit, regarding the promised goods or services. In making this assessment, management includes the nature/ type, cost/ value, quantity and the period of transfer related to the goods or services promised.

(ii) *Lease term and Option to Extend under AASB 16*

The lease term is defined as the non-cancellable period of a lease together with both periods covered by an option to extend the lease if the lessee is reasonably certain to exercise that option; and also periods covered by an option to terminate the lease if the lessee is reasonably certain not to exercise that option. The options that are reasonably going to be exercised are a key management judgement that the Association will make. The Association determines the likeliness to exercise the options on a lease-by-lease basis looking at various factors such as which assets are strategic and which are key to future strategy of the Association

(iii) *Employee benefits*

For the purpose of measurement, AASB 119: *Employee Benefits* defines obligations for short-term employee benefits as obligations expected to be settled wholly before 12

Port Lincoln Aboriginal Health Service Inc

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2021

months after the end of the annual reporting period in which the employees render the related services. As the association expects that all of its employees would use all of their annual leave entitlements earned during a reporting period before 12 months after the end of the reporting period, the association believes that obligations for annual leave entitlements satisfy the definition of short-term employee benefits and, therefore, can be measured at the (undiscounted) amounts expected to be paid to employees when the obligations are settled.

(p) Economic Dependence

Port Lincoln Aboriginal Health Service Inc is dependent on the Department of Health for the majority of its revenue used to operate the business. At the date of this report, the Board of Directors has no reason to believe the Department will not continue to support Port Lincoln Aboriginal Health Service Inc.

(q) New and Amended Accounting Policies Adopted by the Association

The Association has assessed the impact of the new and amended Australian Accounting Standards and Interpretations not yet implemented and have concluded that the amending standards are not expected to have a material impact on the Association's financial statements

Port Lincoln Aboriginal Health Service Inc.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2021

2 Revenue and Other Income

	2021	2020
	\$	\$
Grant Revenue		
State and Commonwealth government grants	5,511,678	4,840,038
Total grant revenue	5,511,678	4,840,038
Other revenue:		
Interest	19,633	18,772
Medicare Income	508,554	440,489
Wage Subsidy	70,574	310,256
National Disability Insurance Scheme funds	75,000	167,192
Other	90,544	137,684
Total other revenue	764,305	1,074,393
Total Revenue and Other Income	6,275,983	5,914,431

3 Supplies and Services

	2021	2020
	\$	\$
Accreditation	3,550	12,274
Accounting and audit fees*	165,001	154,091
Advertising, promotional products & sponsorship	36,325	47,324
Bad debts written off	-	1,138
Bank fees	49	34
Catering expenses & venue hire	11,094	3,380
Cleaning, cleaning supplies and waste removal	87,056	74,432
Community project and program costs	193,334	262,841
Consultancy fees	41,316	19,608
Computer, IT and Website costs	55,018	69,404
Grant repayments	-	4,887
Insurance - workcover	55,562	47,817
Insurance - general	55,494	49,141
Interest and Penalties	1,821	5,088
Legal Costs	4,072	11,639
Electricity	17,407	19,216
Mallee Park Projects	-	-
Management Expenses and panel fees	24,308	36,095
Medical and clinical expenses	115,041	150,975
Medical practitioner fees	373,037	224,424
Motor Vehicle Expenses	47,272	64,118
Optical and client support expenses	8,844	6,063
PATS scheme	-	2,625
Printing, stationary & office supplies	38,989	21,686
Postage	4,967	6,242
Program supplies & Library resources	730	-
Provision for doubtful debts	-	(17,423)
Rates & taxes	6,130	8,070
Repairs, maintenance and minor equipment	74,125	124,937
Security	11,434	15,014
Staff recruitment, training & amenities	23,210	31,027

Port Lincoln Aboriginal Health Service Inc.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2021

Subscriptions	29,715	33,887
Sundry expenses	68,149	47,157
Telephone	33,289	26,207
Training wage subsidy	28,912	87,618
Travel allowances, meeting costs & fares	15,188	36,263
Uniforms	410	10,482
Total Supplies and Services	1,630,849	1,697,781

* Audit fees paid/payable to the Auditors in relation to the audit of the 2020/21 financial report are \$22,400 (2020:\$21,900). No other non-audit services were provided by the Auditors.

4 Net Gain(Loss) on Disposal of Non Current Assets

	2021	2020
	\$	\$
Proceeds from disposal	-	19,545
Less net book value of assets disposed	-	(12,253)
Total	-	7,292

5 Cash and cash equivalents

	2021	2020
	\$	\$
Cash at bank	2,286,053	1,194,225
Cash on hand	300	300
Term Deposit	1,202,341	1,505,030
Total Cash and cash equivalents	3,488,694	2,699,555

6 Accounts Receivable and Other Debtors

	2021	2020
	\$	\$
Grant funding receivable	-	-
Trade receivables	22,751	55,138
Provision for impairment of receivables	-	-
Other receivables	-	16,430
Total Accounts Receivable and Other Debtors	22,751	71,568

7 Other current assets

	2021	2020
	\$	\$
Prepayments	30,215	33,420
Total Other current assets	30,215	33,420

Port Lincoln Aboriginal Health Service Inc.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2021

8 Property, Plant and Equipment

	2021	2020
	\$	\$
Land and Buildings		
(i) Oxford Street, Port Lincoln		
Land & Buildings (at independent valuation, 17/08/2017)	1,273,712	1,139,888
Less accumulated depreciation	(74,348)	(52,862)
	<u>1,199,364</u>	<u>1,087,026</u>
(ii) Haigh Street, Port Lincoln		
Land & Buildings (at independent valuation, 17/08/2017)	210,000	210,000
	<u>210,000</u>	<u>210,000</u>
(iii) Tobruk Tce, Port Lincoln		
Land and Buildings at cost	190,000	-
	<u>190,000</u>	<u>-</u>
Total Land and Buildings	<u>1,599,364</u>	<u>1,297,026</u>
Plant and Equipment		
Plant and equipment		
At cost	1,003,240	965,891
Less accumulated depreciation	(771,154)	(710,801)
	<u>232,086</u>	<u>255,090</u>
Motor vehicles		
At cost	212,146	184,047
Less accumulated depreciation	(118,064)	(92,399)
	<u>94,082</u>	<u>91,648</u>
Right of use assets		
At cost	127,410	153,426
Less accumulated depreciation	(54,581)	(57,258)
	<u>72,829</u>	<u>96,168</u>
Total Completed Works	<u>1,998,361</u>	<u>1,739,932</u>
Work in progress	69,291	-
Total Property, Plant and Equipment	<u>2,067,652</u>	<u>1,739,932</u>

On 17 August 2017 the freehold land and buildings held by the association were valued by an independent valuer. The fair value of the freehold land and buildings was determined to be \$1,335,000.

Port Lincoln Aboriginal Health Service Inc.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2021

Movements in carrying amounts

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

	Land and Buildings \$	Motor Vehicles \$	Plant and Equipment \$	Right of use assets \$	Total \$
2020					
Balance at beginning of the year	1,299,900	58,574	177,104	49,862	1,585,440
Additions at cost	14,887	63,911	126,233	103,564	308,595
Received free of charge	-	-	-	-	-
Disposals	-	(12,253)	-	-	(12,253)
Assets written off	-	-	-	-	-
Reclassifications	-	-	-	-	-
Depreciation expense	(17,761)	(18,584)	(48,247)	(57,258)	(141,850)
Carrying amount at the end of the year	1,297,026	91,648	255,090	96,168	1,739,932
2021					
Balance at beginning of the year	1,297,026	91,648	255,090	96,168	1,739,932
Additions at cost	323,824	28,099	37,349	39,547	428,819
Received free of charge	-	-	-	-	-
Disposals	-	-	-	(14,205)	(14,205)
Assets written off	-	-	-	-	-
Reclassifications	-	-	-	-	-
Depreciation expense	(21,486)	(25,665)	(60,353)	(48,681)	(156,185)
Carrying amount at the end of the year	1,599,364	94,082	232,086	72,829	1,998,361

9 Accounts Payable and Other Payables

	2021 \$	2020 \$
CURRENT		
Trade creditors	110,112	239,967
Accrued Expenses	-	14,500
Other current payables	73,065	49,147
Total Accounts Payable and Other Payables	183,177	303,614

10 Financial Liabilities

	2021 \$	2020 \$
CURRENT		
Vehicles Leases Payable	34,206	67,168
Total Current Financial Liabilities	34,206	67,168
NON-CURRENT		
Vehicles Leases Payable	38,303	29,758
Total Non-Current Financial Liabilities	38,303	29,758
Total Financial Liabilities	72,509	96,926

Port Lincoln Aboriginal Health Service Inc.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2021

11 Employee Provisions

	2021	2020
	\$	\$
CURRENT		
Annual leave entitlements	257,772	300,060
Long service leave entitlements	337,959	313,766
Accrued Wages	64,444	49,000
Provision for RDO	14,871	15,282
Provision for TOIL	6,916	3,263
Total Current Employee Provisions	681,962	681,371
NON-CURRENT		
Long service leave entitlements	121,193	118,060
Total Non-Current Employee Provisions	121,193	118,060
Total Employee Provisions	803,155	799,431

Provisions include amounts accrued for annual leave. Based on past experience, the association expects the full amount of the annual leave balance to be settled within the next 12 months. Further these amounts must be classified as current liabilities since the association does not have an unconditional right to defer settlement of these amounts in the event the employees wish to use their leave entitlements.

12 Capital and Leasing Commitments

	2021	2020
	\$	\$
(a) Operating Lease Commitments		
House Rent	10,153	9,858
Total Operating Lease Commitments	10,153	9,858
Operating lease commitments are payable:		
- not later than 12 months	10,153	9,858
	10,153	9,858

Motor Vehicle leases are recorded as financial liabilities in Note 10 in accordance with AASB 16. The lease agreement attached to the rental property did not exceed 12 months beyond the reporting date so was not treated as a lease under AASB 16 for financial reporting purposes.

Port Lincoln Aboriginal Health Service Inc.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2021

13 Related Party Transactions

Board of Management

Sitting fees of \$14,750 (2020:\$11,780) were paid to members of the Board in their capacity as members. No other entity that the above members are associated with has received funds other than through dealings with the Association in the ordinary course of business and on normal commercial terms and conditions.

	2021	2020
	\$	\$
(a) Key Management Personnel		
Short term benefit	456,199	379,739
Post Employment Benefit	36,281	34,932
Total Compensation	<u>492,480</u>	<u>414,671</u>

(b) **Other Related Parties**

Other related parties include close family members of key management personnel, and entities that are controlled or jointly controlled by those key management personnel individually or collectively with their close family members.

During the year ended 30 June 2021 Port Lincoln Aboriginal Health Service Inc entered into a contract with NGH Nominees Pty Ltd, a company for which board members Harry Miller and Neville Bilney act as Directors, to provide consulting services. Total payments made to NGH Nominees during 2020-21 are \$40,000 (2020: \$35,045)

Transactions between related parties and/or their close family members, are on normal commercial terms and conditions no more favourable than those available to other persons unless otherwise stated.

14 Cash Flow Information

	2021	2020
	\$	\$
Reconciliation of Cash Flow from Operating Activities with Current Year Operating Surplus		
Operating Surplus	1,057,669	602,646
Non-cash flows:		
Depreciation and amortisation expense	156,185	141,850
Loss/(Gain) on disposal of plant and equipment	-	(7,292)
Changes in assets and liabilities:		
(Increase)/decrease in accounts receivable and other debtors	48,817	91,104
(Increase)/decrease in other current assets	3,205	(7,737)
Increase/(decrease) in accounts payable and other payables	27,861	453,189
Increase/(decrease) in employee provisions	3,724	115,424
Cash flows provided by Operating Activities	<u>1,297,461</u>	<u>1,389,184</u>

Port Lincoln Aboriginal Health Service Inc.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2021

15 **Contingent Liabilities**

There are no contingent liabilities as at 30 June 2021.

16 **Financial Risk Management**

The Association's financial instruments consists mainly of deposits with banks, accounts receivable and accounts payable. The Association does not have any derivative financial instruments as at 30 June 2021.

The totals for each category of financial instruments, measured in accordance with AASB 9: *Financial Instruments* as detailed in the accounting policies to these financial statements, are as follows:

	2021	2020
	\$	\$
Financial Assets		
Current		
Cash and cash equivalents	3,488,694	2,699,555
Accounts receivable and other debtors	22,751	71,568
Total Financial Assets	3,511,445	2,771,123
Financial Liabilities		
Current		
Accounts payable and other payables	183,177	303,614
Lease liabilities	34,206	67,168
Total Current Financial Liabilities	217,383	370,782
Non Current		
Lease liabilities	38,303	29,758
Total Non Current Financial Liabilities	38,303	29,758
Total Financial Liabilities	255,686	400,540

The Board of Management monitors the association's transactions and reviews the effectiveness of controls relating to credit risk, financial risk, and interest rate risk.

The Board of Management's overall risk management strategy seeks to ensure that the association meets its financial targets, while minimising potential adverse effects of cashflow shortfalls.

The main risks the association is exposed to through its financial instruments are interest rate risk, liquidity risk and credit risk. There have been no substantive changes in the types of risks the association is exposed to, how these risks arise, or the Board of Management's objectives, policies and processes for managing and measuring the risks from the previous period.

a. Liquidity Risk

Liquidity risk arises from the possibility that the association might encounter difficulty in settling its debt or otherwise meeting its obligations related to financial liabilities. The association manages this risk through the following mechanisms:

- preparing forward-looking cash flow analysis in relation to its operational, investing and financing activities; and
- only investing surplus cash with major financial institutions.

Cash flows realised from financial assets reflect management's expectation as to the timing of realisation. Actual timing may therefore differ from that disclosed.

Port Lincoln Aboriginal Health Service Inc.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2021

a. Credit Risk

Exposure to credit risk relating to financial assets arises from the potential non-performance by counterparties of contract obligations lead to a financial loss to the association.

Credit risk is managed through maintaining procedures (such as the utilisation of systems for the approval, granting and removed of credit limits, regular monitoring of exposure against such limits, and monitoring of the financial stability of significant customers and counterparties) ensuring to the extent possible, that members and counterparties to transactions are of sound credit worthiness.

Risk is also minimised through investing surplus funds in financial institutions that maintain a high credit rating or in entities that the committee has otherwise cleared as being financially sound.

Credit risk exposures

The maximum exposure to credit risk by class of recognised financial assets at balance date is equivalent to the carrying value and classification of those financial assets (net of any provisions) as presented in the balance sheet.

The association has no significant concentration of credit risk with any single counterparty or group of counterparties.

c. Market risk

Interest Rate Risk

The association is not exposed to any significant interest rate risk.

Fair Value Estimation

The carrying values of financial assets and financial liabilities approximate fair values:

	2021 \$	2021 \$	2020 \$	2020 \$
	Net carrying value	Net fair value	Net carrying value	Net fair value
Financial Assets				
Current				
Cash and cash equivalents*	3,488,694	3,488,694	2,699,555	2,699,555
Accounts receivable and other debtors*	22,751	22,751	71,568	71,568
Total Financial Assets	3,511,445	3,511,445	2,771,123	2,771,123

Port Lincoln Aboriginal Health Service Inc.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2021

Financial Liabilities

Current

Accounts payable and other payables*	183,177	183,177	303,614	303,614
Lease liabilities	34,206	34,206	67,168	67,168
Total Current Financial Liabilities	217,383	217,383	370,782	370,782

Non Current

Lease liabilities	38,303	38,303	29,758	29,758
Total Non Current Financial Liabilities	38,303	38,303	29,758	29,758
Total Financial Liabilities	255,686	255,686	400,540	400,540

The fair values disclosed in the above table have been determined based on the following methodologies:

- * Cash on hand, accounts receivable and other debtors, and accounts payable and other payables are short-term instruments in nature whose carrying amount is equivalent to fair value. Accounts payable and other payables exclude amounts relating to the provision for annual leave, which is outside the scope of AASB 139.

17 Fair Value Measurement

The association measures and recognises the following asset at fair value on a recurring basis after initial recognition:

- Land and buildings

The association does not subsequently measure any liabilities at fair value on a recurring basis, or any assets or liabilities at fair value on a non-recurring basis.

(a) Fair Value Hierarchy

AASB 13 Fair Value Measurement requires the disclosure of fair value information according to the relevant level in the fair value hierarchy. This hierarchy categories fair value measurements into one of three possible levels based on the lowest level that a significant input can be categorised into. The levels are outlined below:

- Level 1:* quoted prices (unadjusted) in active markets for identical assets and liabilities
- Level 2:* inputs other than quoted prices included within Level 1 that are observable for
- Level 3:* unobservable inputs for the asset or liability

The fair value of assets and liabilities that are not traded in an active market is determined using one or more valuation techniques. These valuation techniques maximise, to the extent possible, the use of observable market data. If all significant inputs required to measure fair value are observable, the asset or liability is included in Level 2.

Port Lincoln Aboriginal Health Service Inc.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2021

Valuation Techniques

The association selects valuation techniques that are appropriate in the circumstances and for which sufficient data is available to measure fair value. The availability of sufficient and relevant data primarily depends on the specific characteristics of the asset or liability being measured. The valuation techniques selected by the association are consistent with one or more of the following valuation approaches:

- Market approach: uses prices and other relevant information generated by Market transactions involving identical or similar assets or liabilities.
- Income approach: converts estimated future cash flows or Income and expenses into a single current (i.e. discounted) value
- Cost approach: reflects the current replacement cost of an asset at its current service capacity.

Each valuation technique requires inputs that reflect the assumptions that buyers and sellers would use when pricing the asset or liability, including assumptions about risks. When selecting a valuation technique, the association gives priority to those techniques that maximise the use of observable inputs and minimise the use of unobservable inputs. Inputs that are developed using market data (such as publicly available information on actual transactions) and reflect the assumptions that buyers and sellers would generally use when pricing the asset or liability are considered observable, whereas inputs for which market data are not available and therefore are developed using the best information available about such assumptions are considered unobservable.

The following table provides the fair value of the association's assets measured and recognised on a recurring basis after initial recognition, categorised within the fair value hierarchy.

Recurring fair value measurements	Note	Level 1 \$	Level 2 \$	Level 3 \$	Total \$
Land at independent value	8	-	423,000	-	423,000
Buildings at independent value	8	-	912,000	-	912,000
Total assets recognised at fair value		-	1,335,000	-	1,335,000

18 Unsubstantiated Expenses

In 2018/19 a matter was referred to the South Australian Police in relation to anomalies in the financial accounts. At the time of publishing this financial report the matter was still being investigated by SAPOL and the outcome was not known.

19 Association Details

The principal place of business for the Association is:
Port Lincoln Aboriginal Health Service Inc.
19A Oxford Street, Port Lincoln SA 5606

20 Events After Balance Sheet Date

There have been no material events after the reporting date that have not been recognised in the financial report.

21 Impact of COVID-19 Pandemic

Whilst there has been no material financial impact to PLAHS operations at this point in time it is unknown how this may play out as the pandemic environment continues. Whilst grant funding streams remain constant there may be an impact on Medicare receipts. This is being continually monitored by the PLAHS finance team to reduce risk.

Port Lincoln Aboriginal Health Service Inc.
For the year ended 30 June 2021
RELATED PARTY DECLARATION BY THE BOARD MEMBERS

In accordance with S35(5) of the South Australian Associations Incorporation Act 1985, the Board must report on:

- a) Whether or not, during the financial year to which the accounts relate –
- i) no officer of the Association
 - ii) no firm of which an officer is a member, and
 - iii) no body corporate in which an officer has a substantial financial interest in; has received or become entitled to receive a benefit as a result of a contract between the officer, firm or body corporate and the Association.
- b) Whether or not, during the financial year to which the accounts relate, the officer has received directly or indirectly from the association any payment or other benefit of a pecuniary value, and if so the general nature and extent of that benefit.

Officers of the Association include Board members and the Executive (Chief Executive Officer, Business Manager and Manager Client Services). As employees of the Association, the Executive have employment contracts with the Association.

The Board confirms that there are no other items to report in relation to S35(5) other than the item disclosed in Note 13.

This statement is signed in accordance with a resolution of the Board and is signed for and on behalf of the Board by:



Board Member



Board Member

Port Lincoln Aboriginal Health Service Inc.
For the year ended 30 June 2021

FINANCIAL DECLARATION

The Board of Management declare that in their opinion:

- (a) the accounts present fairly the results of the operations of the association for the financial year and the state of affairs of the association as at the end of the financial year; and
- (b) there are reasonable grounds to believe that the association is able to pay all of its debts, as and when they become due and payable; and
- (c) the financial statements and notes satisfy the requirements of the Australian Charities and Not-for-profits Commission Act 2012.

Signed in accordance with subsection 60.15(2) of the Australian Charities and Not-for-profit Commission Regulation 2013 and Division 2 Section 35 (2) (c) of the South Australian Associations Incorporations Act 1985.

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


.....

Board Member


.....

Board Member

Dated this 4th day of November 2021

AUDITOR'S INDEPENDENCE DECLARATION

In accordance with section 60-40 of the Australian Charities and Not-for-profits Commission Act 2012, I am pleased to provide the following declaration of independence to the directors of Port Lincoln Aboriginal Health Service Incorporated.

As lead Audit Partner for the audit of the financial report of Port Lincoln Aboriginal Health Service Incorporated for the year ended 30 June 2021, I declare that to the best of my knowledge and belief, there have been no contraventions of:

- a). The auditor independence requirements as set out in the Australian Charities and Not-for-profits Commission Act 2012 in relation to the audit; and
- b). Any applicable code of professional conduct in relation to the audit.



Simon Smith CA, FCPA
Partner

Dated: 7th day of November 2021

Galpins

Accountants, Auditors
& Business Consultants

David Chant CA, FCPA
Simon Smith CA, FCPA
David Sullivan CA, CPA
Jason Seidel CA
Renaë Nicholson CA
Tim Muhlhausler CA
Aaron Coonan CA
Luke Williams CA, CPA
Daniel Moon CA



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ABN: 30 630 511 757

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under Professional Standards Legislation

INDEPENDENT AUDITOR'S REPORT

To the members of Port Lincoln Aboriginal Health Service Inc.

Report on the Audit of the Financial Report

Audit Opinion

We have audited the financial report of Port Lincoln Aboriginal Health Service Inc. (the Association), which comprises the statement of financial position as at 30 June 2021, the statement of profit and loss and other comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies, and the board of management declarations.

In our opinion, the accompanying financial report of the Association is in accordance with Division 60 of the *Australian Charities and Not-for-profits Commission Act 2012* (the ACNC Act), including:

- (i) giving a true and fair view of the Association's financial position as at 30 June 2021 and of its financial performance for the year then ended; and
- (ii) complying with Australian Accounting Standards – Reduced Disclosure Requirements and Division 60 of the *Australian Charities and Not-for-profits Commission Regulation 2013*.

Basis for Opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Report section of our report. We are independent of the Association in accordance with the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110: *Code of Ethics for Professional Accountants (including Independence Standards)* (the Code) that are relevant to our audit of the financial report in Australia, and we have fulfilled our other ethical responsibilities in accordance with the Code.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Responsibility of Committee for the Financial Report

The committee of the Association are responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards – Reduced Disclosure Requirements and the ACNC Act and for such internal control as the committee determines is necessary to enable the preparation of the financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error.

In preparing the financial report, the committee is responsible for assessing the Association's ability to continue as a going concern, disclosing, as applicable, matters relating to going concern and using the going concern basis of accounting unless management either intends to liquidate the Association or to cease operations, or has no realistic alternative but to do so.

The committee is responsible for overseeing the Association's financial reporting process.

Auditor's Responsibility for the Audit of the Financial Report

Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this financial report.

As part of an audit in accordance with Australian Auditing Standards, we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial report, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Association's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by management.
- Conclude on the appropriateness of management's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Association's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial report or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Association to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial report, including the disclosures, and whether the financial report represents the underlying transactions and events in a manner that achieves fair presentation.

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

GALPINS ACCOUNTANTS, AUDITORS & BUSINESS CONSULTANTS



Simon Smith CA, FCPA, Registered Company Auditor
Partner

07 / 11 / 2021

Client Services Report

First thank you to Sarah Davey for her work in the first half of the year as a Manager Client Services, and to her, and the senior and operational teams generosity in helping me orientate into the role.

The COVID-19 pandemic has occupied much of our time and efforts and had a significant impact on community services and programs. Our focus has been on keeping the community safe, keeping staff safe and working cooperatively with other AHCCHO's, SA Health and EFNLHN.

We have been highly proactive to support vaccination coverage rates and to be prepared for any outbreak by promoting vaccination, releasing immunisers and distributing information to supporting the EFNLHN and working with EFNLHN immunisers and AHCSA public health doctors to PLAHS COVID-19 immunisation events

As soon as Pfizer became available we applied and got approval to start immunisations from 04 October 2021. This continues to be the priority with the immunisation drive at PLAHS supported by outreach, transport, and a promotional campaign.

PLAHS is also fully prepared for COVID-19 with a roadmap to take us through any lockdowns or outbreaks and to ensure we are prepared for the new normal of 80% immunisation coverage. We have had consistent feedback that this work is leading the state.

Another key focus in my role has been to review services so that plans are in place to make key changes in the New Year to improve the clinical areas, reduce wait times and improve coordination by reducing multiple appointments. I have also been working closely with key partners such as the Port Lincoln Hospital and mental health services to improve working relationships.

Despite the immense challenges this year, the team have continued to work hard to deliver as many core services as possible and to advocate around areas of need including mental health, better starts for kids and tobacco and other lifestyle issues.

Antoinette Liddell continues to oversee the health team as Clinical Coordinator.

One of the highlights this year has been establishing a new Pain Clinic where clients are able to see the pain specialist, pharmacist, psychologist and physiotherapist in one visit. Kylie van Rooijen has continued as the part time pharmacist to assist with medication reviews

and medication quality and management. There has been a change to the staffing profile by increasing the number of health workers and nurses in the team as preparation for a new Aboriginal Health Practitioner clinic to start in 2022.

Dr Alex van Rooijen has continued as the primary GP, supported by Dr Neville Carlier and Dr Lauren Christian. Thanks go to all of the health team, including Jerome AhKit Burgoyne and Shanae Coulthard who regularly step into team leadership to cover leave.

Under Warren Clements the SEWB team has made improvements in case management to continue to provide support to families and individuals including through some very challenging and sad events.

The team works closely with many providers including the Eyre Mental Health with referrals and daily visits to discuss clients and support, along with FVLS and Yarredi on the Family Safety framework. COVID-19 numbers restrictions have impacted on the men and young men Lifestyle and Respect program partnership with Peter Williams Gym and the Men's Yarning Circle and the women's group Art Therapy due to the departure of the facilitator.

While the Puyu Wanti program funding was ceased nationally, this loss is being offset by integrating cessation prevention into the work of all of the teams and by working in partnership with AHCSA who won the state wide contract. SEWB has worked with West Coast Youth and Communities to establish programs for a new Wellbeing Centre including yarning circles, healthy lifestyle activities and drugs and other substance abuse prevention. It continues the work with SAHMRI on Methamphetamines in Aboriginal Communities and the We Can Do This project.

Many thanks also to Maryanne Clements who again stepped in to coordinate the chronic diseases team whilst Sarah Davey is on 12 months leave to do a project with AHCSA. The team has focused on care coordination, connecting with community via telephone, and setting up healthy lifestyle activities such as the walking group. Maryanne is supported by a strong team, including Ronald Carbine who has stepped up into acting team leadership to cover leave.

This year has seen the ITC program embedded and further work is being done to expand access for community members. The visits of specialists have been supported, including the highly successful occupational therapy outreach for older clients.



Client Services Report

Thanks go to Julie Glass, Manager of the Child and Maternal Health team for continuing to provide a high level of care through regular clinics and school child health screening.

A regular paediatrician service continues and Ana Tu has joined us to provide psychologist sessions each month. Dr Lauren Christian continues to provide strong support to the area through ante-natal care and child health checks.

Our AMIC team has been expanded with Tamika Miller as an AMIC trainee working alongside Debra Flavel. Much thanks go to all of the team, including Debra Flavel for also taking on leadership of the team to cover leave.

It has also been a year of personal achievement across all the programs with particular congratulations to the four staff across SEWB, CCSM and CMH on achieving Certificate IV in Aboriginal Health Work.

Finally, many thanks to the entire team for their hard work during this very difficult year, and to Carolyn Miller for her supportive and forward thinking leadership.

Kind Regards

Margo MacGregor

Senior Manager, Client Services





Above: Community member Reggie Woods and RN Leanne at one of PLAHS' Covid-19 vaccination clinics

Below: Visiting Dietician Rachel providing food and nutritional education during cooking at Play Group



STOP THE SPREAD

STAY STRONG

PROTECT
OUR ELDERS,
PROTECT OUR
CULTURE



OUR ELDERS ARE AMONGST THE MOST VULNERABLE TO CORONAVIRUS (COVID-19) ALONG WITH:

- People with weaker immune systems due to pre-existing medical conditions such as asthma, diabetes, heart disease
- People who are already feeling sick or have the flu

OUR ELDERS ARE LIVING TREASURES, GUIDING US AND HELPING TO KEEP OUR CULTURES STRONG. THEY'VE DONE SO MUCH FOR US, LET'S GO THE EXTRA YARDS TO KEEP THEM SAFE.

- Keep your physical distance but not emotionally, reach out in other ways to show you care.
- Let's keep connected and look out for our Elders during this difficult time.



SHOW YOU CARE

FURTHER INFORMATION

SA Government COVID-19 website
www.covid-19.sa.gov.au

AHCSA COVID-19 website
www.ahcsa.org.au



STOP THE SPREAD

STAY STRONG

CORONAVIRUS AND GOOD HYGIENE



CORONAVIRUS (COVID-19) IS SPREAD THROUGH CLOSE CONTACT WITH A PERSON WHO HAS THE VIRUS.

The virus can also be spread when droplets fall onto a surface like a table or door handle where you put your hands. If you touch these surfaces, and then touch your face, you could be exposed to the virus.

Stop the spread of coronavirus by washing your hands often with soap and running water, for at least 20 seconds. Alcohol based hand sanitiser can also be used.

Cover your cough or sneeze with a tissue or bended elbow, and put used tissues in the bin.

Try not to touch your eyes, nose and mouth.

Masks are not required to be worn by healthy people. They are only needed for health care workers or people with coronavirus or symptoms of the virus.



USE
TISSUES



PLACE
TISSUES
IN BIN



COUGH
OR SNEEZE
INTO
ELBOW



WASH
HANDS

FURTHER INFORMATION

SA Government COVID-19 website
www.covid-19.sa.gov.au

AHCSA COVID-19 website
www.ahcsa.org.au



STOP THE SPREAD

STAY STRONG

TIPS TO STAY POSITIVE

- Keep to a daily routine
- Stay in touch with friends and family
- Practice your culture and traditions from home if you can. For example, sharing stories and family history
- Get your news about coronavirus (COVID-19) from reliable sources
- Exercise and eat well



- Get a good sleep, aim for 8 hours per night
- Avoid using tobacco, drugs or alcohol to deal with stress and worry
- Be patient and kind to others, it's a challenging time for everyone
- Get some fresh air
- Your moods may change and you could experience sadness, anxiety, frustration, and fear. Get help if you can't shake these feelings or they worsen.

Contact your local clinic or one of the services below

SUPPORT SERVICES

- SA COVID-19 Mental Health Support Line (8am to 8pm, 7 days): 1800 632 753
- Lifeline Australia: 13 11 14
- Alcohol & Drug Information Service (ADIS): 1300 13 1340



SLEEP WELL



EAT WELL



KEEP CULTURE STRONG



GET ACTIVE

FURTHER INFORMATION

SA Government COVID-19 website
www.covid-19.sa.gov.au

AHCSA COVID-19 website
www.ahcsa.org.au



Government of South Australia

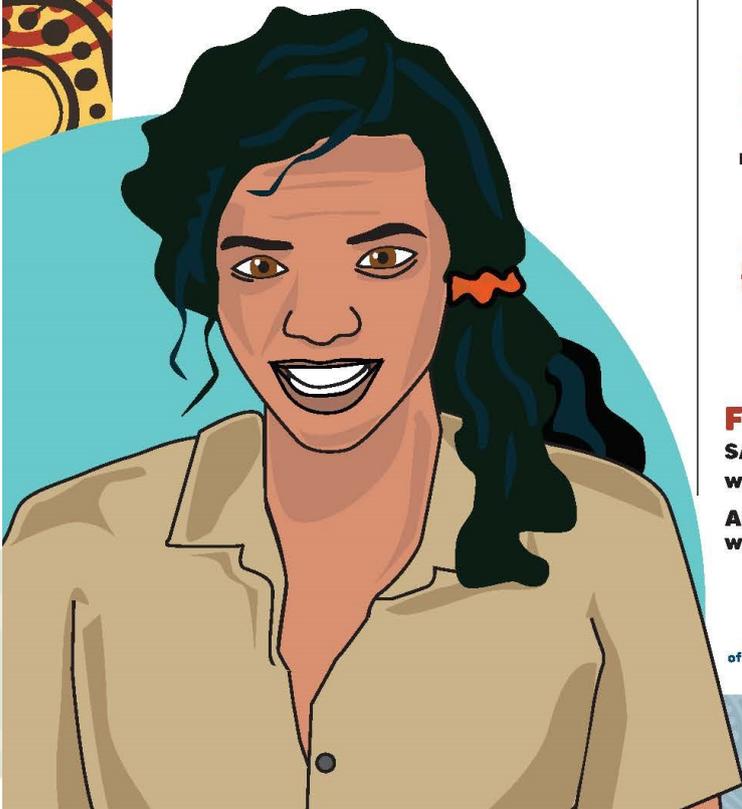


Aboriginal Health Council of South Australia Ltd.
our health, our choice, our way

STOP THE SPREAD

STAY STRONG

SOCIAL DISTANCING PROTECTS OUR MOB



EVERYONE CAN HELP BY SOCIAL DISTANCING.

Follow restrictions in place for numbers allowed at social gatherings and other activities. For current information on restrictions in place visit www.covid-19.sa.gov.au



DISTANCE
APART



STAY
AT HOME



SOCIAL
MEDIA



PHONE
CALLS



NO HANDSHAKES



FOOT BUMPS
ARE OK



DON'T
SHARE FOOD



DON'T
SHARE SMOKES

FURTHER INFORMATION

SA Government COVID-19 website
www.covid-19.sa.gov.au

AHCSA COVID-19 website
www.ahcsa.org.au





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