



Port Lincoln Aboriginal Health Service Inc.

Annual Report 2022-23





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Health Service Inc.*

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Vision, Mission, Values

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.

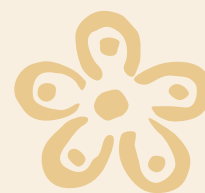
Our Values:

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

Board of Management



David Dudley
Chairperson



Neville Bilney
Vice-Chairperson



Barry (Jack) Johncock Snr
Board Member



Iris Clements
Secretary, Board Member



Tosha Sambo
Treasurer



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,
2021-22



Haydn Davey
Chairperson
2019-2021

Strategic Priorities

Strategic Priority One A Healthy Space

Improve both the physical infrastructure and the facilities at PLAHS to provide a safe and effective workplace and an environment that promotes a person-centred approach to primary health including comfort and cultural consideration.



Strategic Priority Two Address the needs

Deliver clinical programs that address the health needs of the local Aboriginal Community.

Strategic Priority Three Targeted Programs

Develop and deliver programs, in partnership with the community and external agencies to improve well-being and reduce the harm to individuals, family and the community.



Strategic Priority Four Partnerships with purpose

Develop and strengthen collaborative relationships between PLAHS and other service providers, Aboriginal organisations, advocacy groups and all levels of government in pursuit of our Vision.

Strategic Priority Five A strong and capable workforce

Develop our workforce in line with the capabilities we need for now and the future.



Chairpersons Report

I am honoured to present the Chairpersons Annual Report for the 2022/23. It has been a year of growth, challenges and achievements for PLAHS and I would like to take this opportunity to highlight some of the key accomplishments and developments.



Overview of the Year.

This past year PLAHS has continued to focus on service delivery and support the community and continue to assure that the best service and support is delivered. I would like to acknowledge the everlasting hard work put in by our staff, even though we have had disruptions and challenges over the last 12 month, the organisation and staff continue to deliver a great service.

The organisation has been successful in gaining extra funding to assist in the improvements of the reception and clinical area, and to lift the attic area roofing to have access to extra office space for staff which is scheduled to be completed January 2024. We have also been able to access funding to have 4 (3 bedroom) units built for staff on our Haigh Street property which will hopefully be completed by mid-next year. We also have plans in hopefully gaining extra funding to have a community hub built on the vacant block of land on Tobruk Terrace.

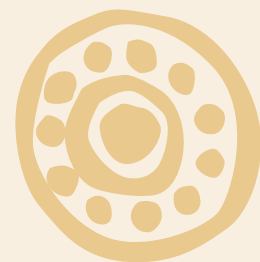
PLAHS continues to receive ongoing funding from DOH, NIAA, EFNLHN, NACCHO and SA Wellbeing and we have currently 44 staff employed fulltime and will hopefully extend to 50 in 2023/24, we also currently have 1 fulltime doctor and are working towards hopefully having a male and female part-time doctors in 2023/24 to assist with our current GP workforce.

Finally, I would like to thank my Board of Directors along with the Chief Executive Officer, Senior Management, staff and also the visiting specialist who have all contributed greatly in making PLAHS successful and allowing us to have the opportunity in delivering a good and effective service to clients now and into the future.

Yours in health

David Dudley

Chairperson



CEO Report

Part of 2022/2023 we were still in the midst of covid and also trying to work through what living with covid is going to be like. It is amazing that the new normal is normal even though we don't hear or see much of covid anymore, and it actually feels great to not be controlled as to what we can and cannot do. But be mindful that Covid is still here and I still encourage our Community to be vaccinated.



PLAHS have been successful in a submission for 4 staff units which will be built on Haigh Street. This project will commence in September 2023 and plan on having this completed in 2024. The upgrade of the clinic and reception area have been completed and planning on lifting the attic upstairs for more office space for the SEWB team and additional staff through SAWCAN funded projects. PLAHS have put in for a Community hub building to be located on our Tobruk Terrace property behind our Health Service and should hear in Nov 2023 whether we will progress to the next stage of this project.

As we continue to improve by reviewing our policies and procedures, preparing for our Clinical and Organisational Accreditation which takes time to get through, these are all ongoing projects that we need to maintain so that when we are being reviewed every 2 – 3 years.

Our technology systems are quite highly advanced and very reliable. We have a sign in/out system. We are currently implementing HR/IT systems on line.

Health, Child and Maternal and Chronic Disease continue to work through with clients their health journey and support them, and to monitor them through their recalls and follow ups with health assessments. This is not all they do they do other tasks.

Social and Emotional Wellbeing teamwork through the social and emotional side of clients and assist them in the right direction by referrals, provide men's, womens and young mens programs for our Community.

PLAHS have been successful in receiving small grants throughout the year from NACCHO, our continued ongoing funding through DOH, EFNLHN, NIAA, Wellbeing SA to do specific health projects around promotion and education.

Our Board members have been receiving internal/external training to support them as Board members around Governance and financial training.

Job vacancies continue to cause problems in filling positions. I encourage Community members to be job ready and have all the checks ready when applying for our vacant positions. Currently our workforce is around 45 staff with it increasing to 50 in the next few months.

PLAHS are members of the SAWCAN group which is made up of the 5 ACCHO CEO's from 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.

Dr Alex is still our Senior GP providing clinical services, and PLAHS continues to be able to maintain our local contracted Doctors who continue to consult at our Service, thank you to Dr. Lauren, Dr Lucas and our Registrar who have been working for us during this financial year. PLAHS are always trying to engage in more GP times to provide clinical services to our clients and have 1 – 2 obstetricians would be ideal to support our families. There is ongoing negotiations around Doctors so in 2023 and 2024 will see more GP practising at PLAHS on a part-time basis.

I wish to thank the local Services to whom we refer to, to assist our clients with additional services such as Eyre and Far North Local Health Network, Mallee Park, West Coast Youth, SA Housing, Education Department, COBH, and our SAWCAN partners and others that have supported our community this year.

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 internally so that our clients can have further support in their health journey. And a very big thankyou to our clients/Community who continue to use our service and support our staff to be better in providing culturally safe environment and a great health service.

PLAHS continue to review our Specialist Services provided through RDWA. I wish to thank David who has 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. To my Senior Staff, Warren and Shanae who have been by my side in guiding changes that has been required on a day to day basis. To my Business team Teresa and VBA who have managed grants, building works, assets and finances, HR, Accreditation and IT, and to all the PLAHS staff who have come to work and soldiered on in extreme circumstances to provide a service to our Community in difficult situations, I thank you.

Carolyn Miller

CEO PLAHS



Administration Report

Admin continues to have oversight of finance, asset & infrastructure, accreditation, human resources, and Information technology (IT).

I would like to thank Sue Mills, Meredith Carlier and Brenton Williams for their contribution to PLAHS and their continued support.



PLAHS continues to engage Vision Beyond Advisory and Hood Sweeney Technology to support us with external Finance and IT respectively.

PLAHS engages many local service contractors to assist with asset & infrastructure – the teams have been very supportive and continue to provide excellent service. The team from Arbon Building and Penna Planning Design have been integral to our planning regarding capital projects – I thank them for their support and guidance in planning projects.

Highlights for FY2023

- Completion of refurbishment of Main Clinic and Oxford Terrace Clinic Area.
- Success in renewal and obtaining new funding opportunities.
- Successful application to DoH IAHP Major Capital works – to build 4 residential units to support staff housing on property situated at 13 Haigh Street Port Lincoln - expected start date is September 2023 – foundations and ground works – build to start early Jan 2024.
- Continued alliance with SAWCAN – this has provided a vehicle for additional support in the NDIS, Elder Care, Tackling Indigenous Smoking, and community connector programs; it continues to provide PLAHS with the ability to foster a collaborative approach which is culturally appropriate and fit for purpose.

- Whole of organisation Accreditation – ASES – Expiry 2026.
- Successful negotiation of Employee Enterprise Bargaining Agreement.

Capital works program

- Refurbish clinical areas – completed
- Lifting of attic – all plans approved – scheduled construction August 2023 – expected occupancy January 2024
- Motor vehicle fleet – 4 new vehicles – current fleet number is now 14
- Preparing project for 20 Tobruk Terrace Port Lincoln
- Construction of perimeter fence – delayed start – July 2023

Information Management and Technology (IMT)

IMT continues to be outsourced by Hood Sweeney Technology (HST) with responsibilities for periodic software and hardware updates – HST are very capably supported by Brenton Williams who trouble shoots onsite and oversees the day-to-day IT problem solving.

IT initiatives implemented during the year:

- Continual Cyber security training
- Developing Essential 8 Strategy
- Transition to ELMO (Human Resource Information System) to streamline HR processes (WIP)
- Transition to SharePoint (WIP)

Accreditation

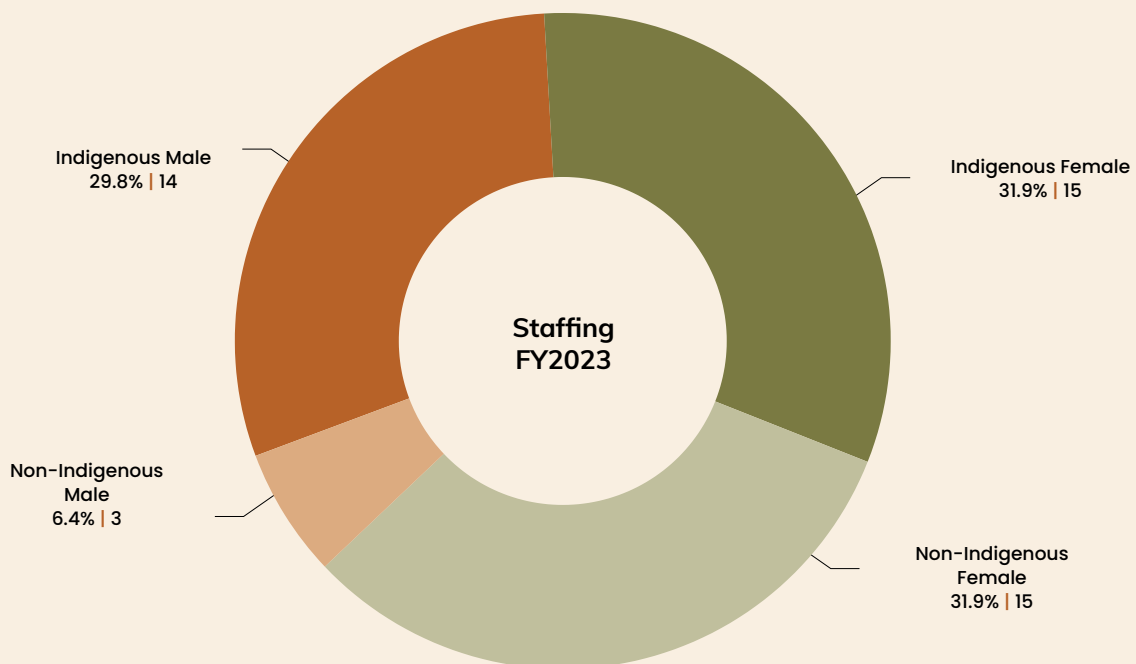
PLAHS continues to have all accreditations & registrations in place:

- RACGP accreditation expiry March 2024
- Australian Service Excellence Standards (ASES) – whole of organisation accreditation – completed August 2022

Staffing

PLAHS employed a total of 47 employees throughout the year (61.7 ASTI and 38.35% non-ASTI).

Total salary and wage costs for the year equated to \$3.84 million.



Finance

PLAHS continues to be in a strong fiscal position.

PLAHS adopted budget for 2022/23 included combined capital & operational expenditure of \$14.4 million to be funded via a mix of income streams including Commonwealth and State government grants, Medicare receipts and own funds.

Note this included \$4.63 million spend for project at 20 Tobruk terrace – funding that we were unsuccessful in obtaining – project is currently on hold.

Very Strong Liquidity Position with Current Asset Ratio being 3.33 times.



Summary

The Admin team continues to work hard and provide support to the BOM, clinical teams (Primary Health Care and Social Emotional Wellbeing Team) and the community. We continue to explore opportunities which enables PLAHS to focus on core business strategies and vision into the future.

I am excited for what 2024 will bring – some of the key outcomes we are striving for are :

Economic growth and positive healthcare outcomes for the community.

- Introduce AHP clinic and continue to streamline clinical workflows.
- Introducing meaningful achievable KPIs - which will ultimately result in improved health outcomes for the community.
- Create career pathways and partner with education to encourage school leavers to see PLAHS as an employer of choice.
- Implement aged care program and continue with support services, i.e., ITC and NDIS.
- Introduce locum GPs to cover gaps in GP service delivery.
- Continue staff training and education to ensure a skilled and capable workforce.

Governance and leadership.

- Celebrate 30-year anniversary.
- Business structure change to company.
- Staff leadership and development training; complete rollout of HRIMS project - ELMO.
- RACGP accreditation.
- Strengthen relationships with local partners, SAWCAN, and the like.
- BOM continues finance and leadership training.

Environmental sustainability.

- Environmental sub-committee.

Capital works program.

- Construct perimeter fence.
- Complete attic project.
- 13 Haigh Street project.
- Develop and design “PLAHS Healthcare Wellbeing Hub” at 20 Tobruk Terrace - community consultation, which is fit-for-purpose.
- Refurbish staff and public amenities in the existing primary health care building.

Teresa Szumski

Business Manager

Acknowledgment of Funding Bodies

- 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)
- Shine SA
- NIAA
- Country SA PHN
- RACGP/ACRRM
- DHS
- Rural Doctors Workforce Agency (RDWA)
- Wellness SA
- SA Government – Department of Health
- Gpex
- Indigenous Health Services Pharmacy Support Program (IHSPS)

Unique Centre of Learning (UCL) & Workforce Report

Reporting period 1/7/2022 – 30/6/2023



Education & Training

Number of Aboriginal students (PLAHS staff & community) enrolled in VET/ University/ Other accredited Education & Training

Number of Aboriginal students (PLAHS staff & community) enrolled in VET/University/Other accredited Education & Training	Sem 2 2022	Sem 1 2023
Number of Aboriginal Professional Development (PD) Activities	60	41
Number of all staff enrolled in Accredited E&T	41	30
Number of all staff undertaking PD activities	123	69
Percentage of all students completing accredited studies and PD	95.9	97.1
Percentage of all staff completing studies and PD	95.7	97.9
Percentage of Aboriginal staff completing accredited E&T and PD	82.6	95.1

Accredited Education & Training

Once again renovations and lack of suitable learning space education and training opportunities for community and staff have been limited in the reporting period.

However, accredited completions included Certificates III and IV in Aboriginal and/or Torres Strait Islander Primary Health Care Practice, with a further two staff continuing via traineeships. Other completions included the Bachelor of Nursing, Diploma in Indigenous Health-Centred Leadership and Management, Diploma of Narrative Approaches for Aboriginal People (Counselling Group and Community Work), Indigenous Renal Dialysis Training Program, Aboriginal Mental Health First Aid, Provide First Aid and Enhanced Syphilis Response.

Staff Professional Development Activities

In addition to accredited studies staff professional development activities undertaken included: Chronic Disease Care Planning, Sexual Health, Triage in General Practice, Leadership and Team Development, Enhanced Amputation Care for Aboriginal People in SA, Cyber Security, Chronic Kidney Disease – Early Detection and Management, Safe Environments for Children and Young People – and more.

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, Communicare Training, and Bullying and Harassment.

PLAHS Workforce and Qualifications

Of the 38 staff (including those on extended leave, non-engagement or secondment) at 30/6/2022, 55.3% were Aboriginal, with the Senior Management Team 66% Aboriginal.

Aboriginal staff with at least one completed accredited VET/University qualification occupied 18 positions across PLAHS along with 17 non-Aboriginal staff.

Positions Advertised Externally

- Health Promotion Officer
- Registered Nurse/Registered Midwife
- Medical Receptionist
- Practice Manager
- Health Service Manager
- Aged Care Support Coordinator
- Aged Care Connector

Positions Filled via Internal Processes or Temporary Employment Register

- Health Promotion Officer
- Medical Receptionist
- Executive Support Officer
- Aboriginal Hospital Liaison Officer
- Driver

Positions Vacated (1/7/2022 - 30/6/2023)

- Practice Manager
- Driver x2
- Aboriginal Health Worker
- Aboriginal Health Worker, Child & Parental Health
- Medical Receptionist
- Health Service Manager

Reasons for leaving as per Exit Interview Report include:

- New career opportunities / change / challenges - 3
- Personal/family reasons - 2
- Relocating to another area - 1

Sue Mills

Coordinator, Unique Centre of Learning



Integrated Team Care (ITC) Report



The Integrated care team this year has continued to go from strength to strength.

Apart from the supplemental services that is on offer through the team. One big thing with a steep learning curve was the client journey in June 2023 that was to be undertaken by both the Coordinator and his Team Manager, unfortunately ended up only being the coordinator. However, this did point out to the coordinator just how daunting it might be for someone on a first-time health journey to Adelaide and visiting specialist medical providers.

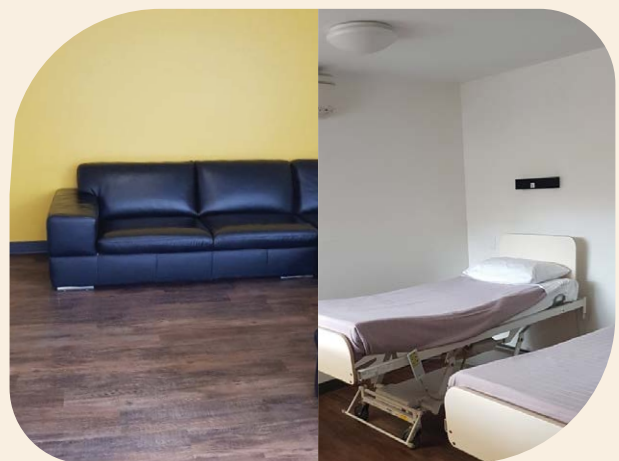
It was a world wind trip lasting just the one night in Adelaide with no time to catch a breath it seemed. Visits were made to the CSAPHN, RAH, WCH, Kangawodli and Adelaide Heart Clinic. Improving what networking over the phone and via emails was the aim putting faces to a name. First stop was the RAH HUB at the RAH and meeting the Aboriginal Health Practitioners that connect and assist our clients from here in Port Lincoln. It was a warm welcoming experience that I was greeted with by all that worked there. I just wish that I could remember all their names, this obviously means I need another trip and take pen and paper to make sure there are no mistakes in who I talk to not to mention photos as well. They were also presented with an oversized shirt from the ITC program and Tote bag as a thank you for all the help they provided and continue to provide to PLAHS and the Eyre peninsula and West Coast.

Then it was onto Country SA Primary Health Network to learn of an initiative (trial) run by NSW Health and meet the Manager for CSAPHN ITC program all were very welcoming and it was good to see the team behind the face of CSAPHN ITC. An ITC oversize Shirt was also presented there as well.

Last trip of the day was to the accommodation known and loved by all Kangawodli The people I met there were the ladies that I have talked to for so long and the work they do to get PLAHS and Peninsula clients in there is an amazing job sometimes at short notice.



Neil ITC visit to Adelaide



Kangawodli spaces freshen up



Gabi (Left) and Hayley (Right)



Brianna Cornish (Left) GP Liaison Nurse, Christine Mogg (Right) GP Liaison Nurse Rural.

Gabi and Hayley were friendly and welcoming provided a tour of Kangawodli and its update facilities.

Shane was their boss who sadly would have been a happy man after the AFL Grand Final as I believe he is a Collingwood supporter.

During this year the team at Kangawodli as also given the spaces a freshen up.

So ended my first day. The second day was just as packed I visited the RAH once again this time it was to see the GP Liaison team and as an extension GP Liaison rural staff.

Again, it was great to chat and hear from them about what challenges they face in helping our client and all from the Peninsula and West Coast. As have all the people I have mentioned to this point. Once again, a shirt was presented in appreciation.

The next in the day was more of an official rather than a catch up and introduction it involved a taxi ride to across town to Adelaide Heart Clinic and a discussion with the Practice Manager with the biggest result being that the Specialist were willing to Bulk Bill our clients, though they didn't want to us telehealth with our clients.

After this was another taxi ride to the Women's and Children's Hospital Liaison Team totalling three for more Networking and discussion about how our clients are assisted. Unfortunately, by now you may have guessed that I can only recall two names at a time I need pen and paper. However again I was more that welcomed and at the they gratefully took me through the hospital in attempt to find their GP liaison Team.

However, this was not to be, and time was coming to a quick end for my visit I hope that there is another chance in the future to go again and see if staff have changed, get more photos of our colleagues, and importantly get all their names, maybe that is why I need another colleague to come on the next Client Journey.



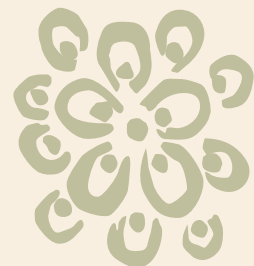
Neil ITC visit to Adelaide

Other things that have come into the Integrated Team Care has been Clients getting a better night's sleep and waking refreshed. For the next day their partner's to as there was no snoring or a person not breathing then suddenly breathing again. Shoes recommended by the Podiatrist so as they can get to walking group, every Tuesday morning now 10am during summer watch for text. Working towards Health Assessments and immunisations has worked into clinical team. Cardiac education discussion with both Women's and Men's groups. Discussion on becoming full fee-paying members of the SA Ambulance. IN put into a seminar on men's health was enlightening to the writer as it was pointed out that there was few statistics on the Australian population and fewer still on the Aboriginal population. Cancer education was also discussed it groups.

Looking forward it I hoped that ITC will do more in health coordination (Walking Group). Other things are Advocacy at medical appointments in conjunction with a Health Worker (Practitioner). Preventable (Primary) care relating to at risk heart problems community approach. Health assessments walking group, gym group, aqua aerobics group. Here's to another exciting 12 months of Challenges and success.

Neil Dunning RN

Integrated Team Care (ITC) Coordinator



Health Team Report



As this year has been full of change, I would like to extend a special thanks go to the clinic team for stepping up and continuously working hard to maintain services under all of the change pressures and also supporting me through some of the recent changes within PLAHS.

Thank you to Natasha Johncock who had stepped up within the Health Team last year as the Health Team Leader while I had stepped up into the Health Services Manager role. Another thanks to all the members of the Health Team; Donna Sellen, Winnie Santos, Samantha Tressider, Correna Franklin, and our Pharmacist Kylie Van Rooijen. Within the Health Team, we welcome back to the team Maryanne Clements, Ronald Carbine and Kerry Green who have and will continue to provide the community with GP Management Plans and Team Care Arrangements.

We have farewelled both Kingsley Bilney and Jerome Ahkit Burgoyne as they are Leave from PLAHS for 6-12 months to explore new opportunities. The Health Team wish both Kingsley and Jerome all the best and hope to see them return in the future.

Dr Alex van Rooijen has continued to provide an excellent service as our primary GP, supported by Dr Lauren Christian and Dr Grace Morcom. Both Alex and I would like that thank the community for their patience as Alex was our only available GP at PLAHS from April - June. This year we had farewelled Dr Grace as our full time Registrar at PLAHS, but we have since welcomed a new part time GP Dr David Edwards who provides a GP service on Tuesday and Wednesdays.

In my role and the Health Team Leader / Acting Health Services Manager, my focus with the support from Senior Management, have been increasing GP appointments and allocating days for community member to present to the clinic to have their Health Assessments and GPMP's completed. The Health Team have become more opportunistic in having recalls completed when you present to the clinic.

The health team have been working with Child and Parental Health in attending school screenings this year on it's first year back since COVID.

We have been liaising with Jack and Derick at CLONTARF (PL High School) on ways to have 715's signed off for our young men. We were successful in signing of 35+ students over 2 days dedicated for the CLONTARF students.

It has also been a year of personal achievement across all the programs. Congratulations to staff achieving Certificate IV in Aboriginal Health Work or near completion.

Finally, many thanks to the entire PLAHS team for all the hard work we have been able to achieve over the past 12 months as a team. A huge thanks to our CEO, Carolyn Miller for your ongoing support and leadership over the past year.

Shanae Coulthard

Health Team Leader

Child Parental Health Team Report



Sep 2022 saw COVID restrictions ease and allow the team to get back to normal function. The CPH got back out into the community screening children and visiting families in their homes

- We continue to partner SAMHRI for research in childhood obesity and anaemia research.
- Antenatal care- 341 Midwife consults
- Postnatal care - 114 Community midwife consults
- School screening returned, 229 students screened up to June 23
- Dr Freason (women health) ceased services at PLAHS Dec 22
- Dr Judith Stanley commenced (Womens Health) June 23
- Dr Gamage (PAED) consulted -153 children
- Dr Josh Jervis Bardy (ENT)-106 consulted
- Audiology - 101 consults
- Dietitian - consulted with 18 families
- Dr Lucas - offering 2x clinic a month for obstetrics 22 clinics for the year
- 130 - CHC completed by GP's, this number is lower than usual, this is due to COVID and decreased access to GP's
- 95% of children are up to date with Imms
- 70% women are up to date with Cervical cancer screening
- 40% pregnant smoke - far to high
- 86 Children seen in the Healthy Kids Clinic (PLCC)
- 81% Birth weights are normal
- 41- ASQ's completed (developmental screening)
- 33- referral 0-4yrs for allied health support
- Mammograms not well attended in 2022 due to COVID and lack of support

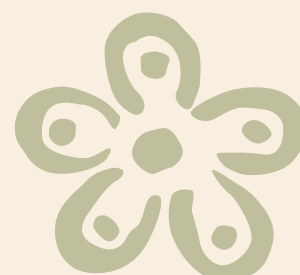
It has been acknowledged that the (Stronger FamiliesHome visiting program) needs to be a separate stand alone program, with its own funding.

This has been on our action plan for several years, but is required to be separate to current services, as a standalone program with specific training and staff dedicated to program-such like Nunkuwarnin Yunti. (Family Partnership Program).

The CPH has endured several disruptions, moving several times, lack of training from AHCSA for AHW's and staff having extended leave- position vacant. This increased pressures, but we managed to support each other and still get great outcomes and maintain service for the Women and children of the community.

Julie Glass

Program Manager Child & Maternal Health
Registered Nurse/Midwife



Social Emotional Well Being (SEWB) Team Report



The Social Emotional Well Being (SEWB) Team has been through some changes over the past twelve months with staff coming and going.

The SEWB Team for some time also had the Chronic Disease Team come under their team structure.

This has now reverted back to the old way of operating which has proved to be a better way of operating and a more client focused and engaging our clients to have their Care Plans assessed and follow up actions completed.

Well done to Shanae and the Clinic Team and Maryanne, Ronald and Kerry from the Chronic Disease team who have done an excellent job under a lot of pressure and short staffed in their teams. Through a team's effort they have been able to get a lot of our clients back into PLAHS for Care Plan Reviews and getting clients up to date with their health checks.

The SEWB Team is also short staffed and positions will need to be advertised and filled.

Our SEWB Team is made up of

- Clifford Warrior Senior Case Manager Youth, D&A
- Christina Lake Senior Case Manager Adults, Women's Group
- Ann Burns Councillor, Family Support and Advocacy
- Jermaine Miller Case Worker
- Jeremy Cooby Support Worker
- David Dudley Support Worker
- Neil Dunning Nurse, ITC Program
- Racheal Ware NDIS Coordinator
- Dennis Stokes Health Promotion Officer

South Australian West Coast ACCHO Networks Positions to be filled

- SAWCAN NDIS
- SAWCAN Aged Care Coordinator

- SAWCAN Age Care Connector
- SAWCAN Cancer Support Promotion Officer
- SAWCAN Tackling Indigenous Smoking Officer

Some of the SEWB activities we have been delivering in 2023

- Youth and Young Men Group, involving
- Respect Workshops with Williams Boxing
- Basketball Competition
- Golf Competition
- SAWCAN Community Connect program connecting disadvantaged clients to support services and case management

Men's & Elders Groups

Men's and Elders Group, weekly gatherings at MPFC. This group have held programs for:

- BBQ's
- RSL, Recognising Aboriginal Returned Soldiers
- Healthy Heart Workshop
- Men's Bowel Cancer and Prostate Cancer information session
- Young Boys for self community family and culture identity
- Public Trustee and Next of Kin
- Lawn Bowels Competition
- Pool Competition
- Gathering of elders to discuss community issues
- Bingo



Men's Group at Mallee Park



Eddy Bililey working out at the Gym



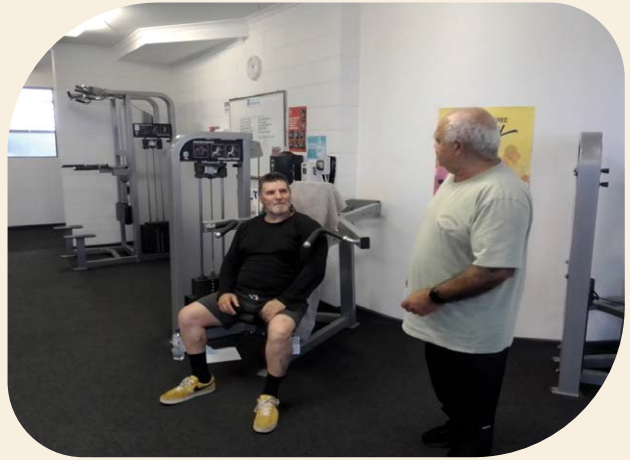
Men's Pool Comp at the RSL, Uncle Lloyd Larking and Goon Wilson.



Young Men playing Golf



Gerald and Roy Wilson at Men's Group



Tony Miller and David Bryan at Men's Gym Program



Men's Group Garden Bed



Men Group Recognition for ATSI Returned Soldiers.



Three Wise Men Eddy, Haydn and Gary



Peter Mongoo, Boddy Shane Dudley, and Harry Miller Jnr



Haydn Davey Snr Men's Gym not 10 pin bowling



Men's Gym



Duanne Johncock Men's Golf Day



Master Chef's Ronald and Jermaine



Lawn Bowles. Rocky and Uncle Lloyd



Marcus and the lads.



Edward Jappy Betts



Healthy Lifestyle Cooking at MPFC



Healthy Lifestyle Cooking at MPFC



Golf Day

Some comments from the men in the group :

- Its good for men to sit down and talk and express their beliefs and feeling and get feedback. Talk about problems don't bottle them up. We can support each other.
- Great place to come and sit down and talk to others. A lot of knowledge around the table.
- I believe this group can go places and get stronger. Makes you feel good to catch up and have a laugh.
- Jeremy has brought in some good people to talk to us especially the Healthy Heart Program and RSL Returned Soldiers . This was good information and got those that have had open heart talking about their own experience and life changes they have had to make
- Great to get together and talk about issues in the community. Plan what we want to do in the group, give your own ideas and thoughts with no judgement.
- We need to keep this place going and if possible have more days here its good healing place for us men, good laugh and good healthy food we have.
- Like the information workshops we have. We need to get more of our men to come along and being involved.
- Board members, CEO come along to a meeting to see what's actually happening. To see firsthand and listen to our issues.
- Its better than sitting at home all day, The men's shed allows us to gather and yarn, it's a social gathering with no demands or expectations. Just be ourselves. Its good to catch up with old mates and yarn.

Women's Group

- Art Therapy Workshops
- Aqua Aerobics
- Health Lifestyle Gym Program
- Young Girls Respect for self community family and culture identity
- Wyatt Foundation community support and advocacy
- Community Bingo activity
- Hampers Delivery
- Clothing Box Delivery



Women's Group Art Therapy Workshops



Women's Group Art Therapy Workshops



Women's Group Art Therapy Workshops



Women's Group Art Therapy Workshops



Women's Group PLAHS Beauty Boutique



Walking Group

Planned

- ITC/NDIS Expo held in October 2023
- Elders Bingo Day October and December at MPFC
- Young Men's Cultural Respect Activity with Port Lincoln High School (last term)
- Community Family Day at MPFC (November)

This will involve various organisations with information and promotional material to help clients access NDIS and ITC funding and supports.

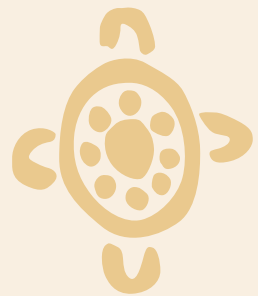
Mobile Clinic, SEWB and the Clinic hope to utilize the PLAHS Van and deliver more Health Checks and Vaccinations for Covid and Flu vaccinations and ensure our people/community are kept safe.

SEWB have applied for and received some small grant to support some of our programmes.

- Wellbeing SA Cancer Awareness – Prostate and Bowel
- Wellbeing SA Youth and Elders Programme
- Cancer Council Cancer Bowel Screenings
- White Ribbon Council
- Rural Health – Defibrillators
- St Johns First Aid Training

Warren Clements

Senior Manager, SEWB

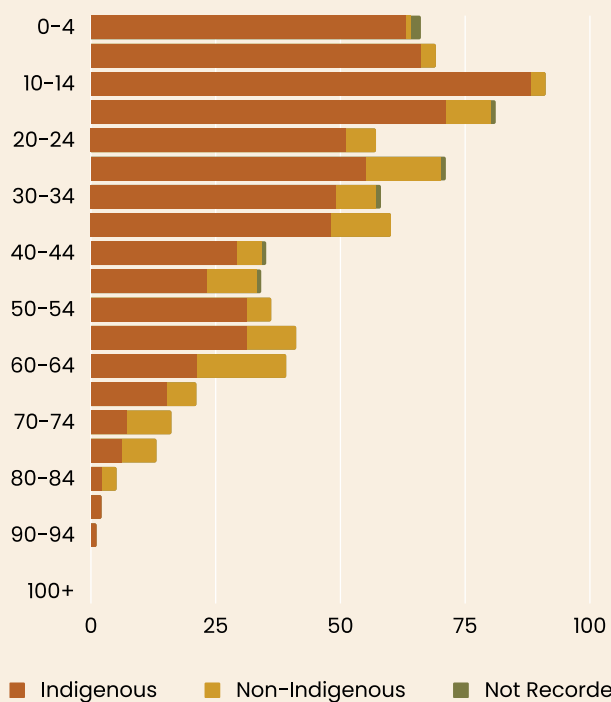


PLAHS Key statistics for FY2023

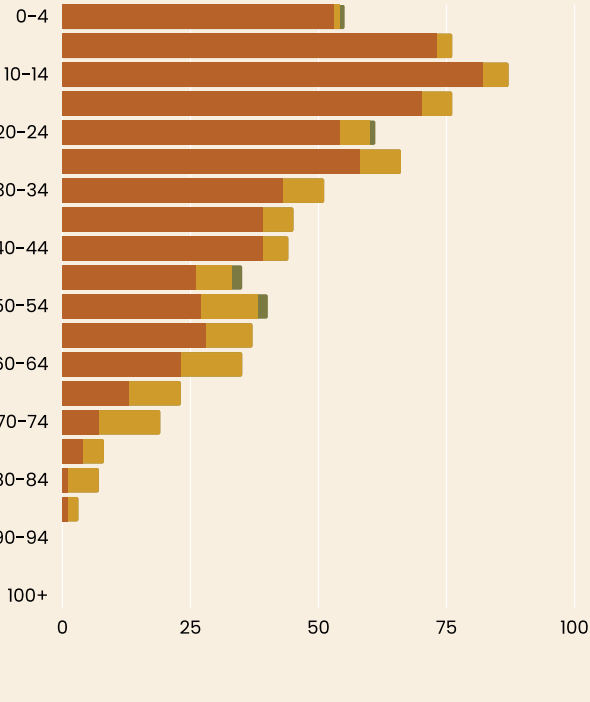
Clients by Age

Total Clients : 1,564

Female Clients : Total 796



Male Clients : Total 768



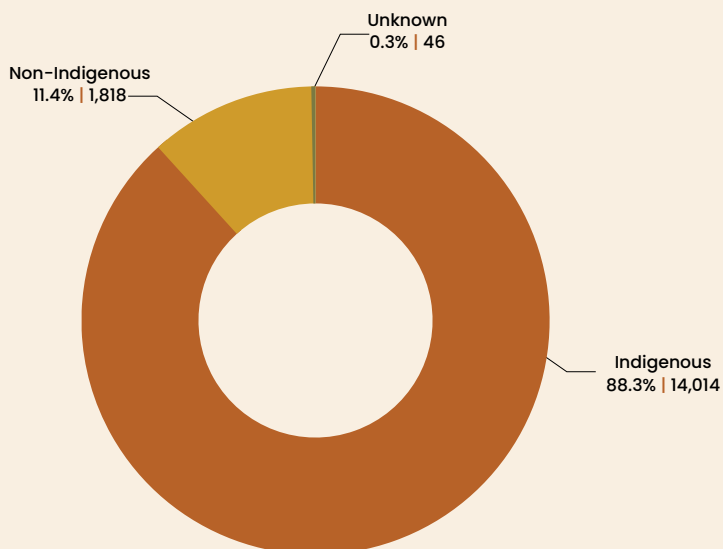
Transport Contacts

Transport Contacts : Total 1,935



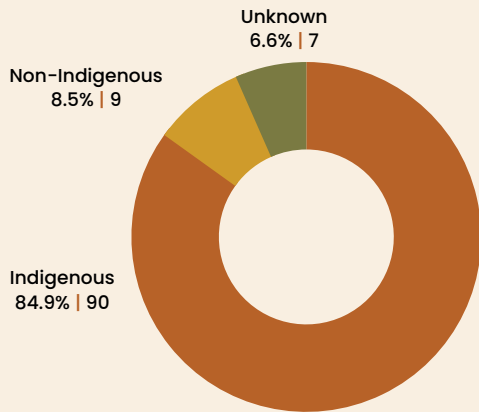
Episodes of Care

Episodes of Care : Total 15,878

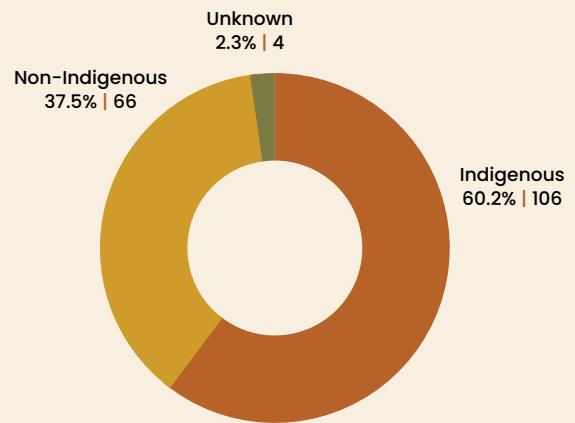


Program Data

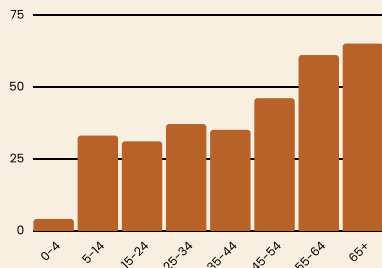
New Patients : Total 106



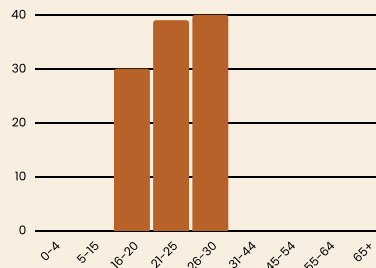
Covid-19 Immunisations : Total 176



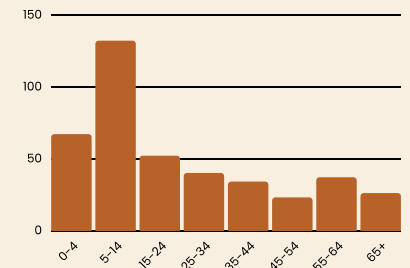
Influenza Vaccinations : Total 312



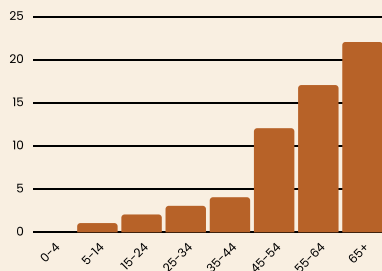
STI Checkups : Total 109



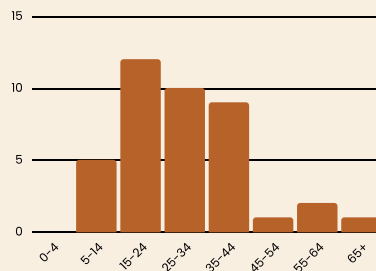
Aboriginal Health Assessments : Total 411



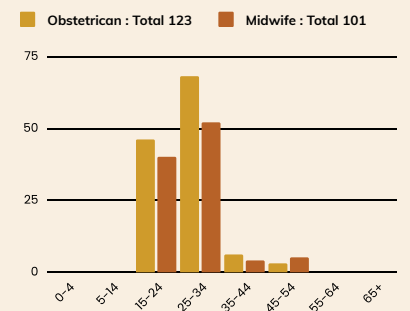
GP Management Plans : Total 61



Mental Health Treatment Plans : Total 40



Obstetrician Antenatal and Midwife Appointments



Annual Report for SAWCAN

South Australian West Coast ACCHO Network (SAWCAN)

This year Port Lincoln Aboriginal Health Service has continued its regional partnership with four other ACCHOs along the Eyre Peninsula and Far West Coast regions, including:

The SAWCAN consortium work collaboratively to:

- Build capacity within the region to achieve improved health and wellness outcomes for Aboriginal peoples
- Demonstrate a strengths-based approach to achieving large-scale solutions
- Share and co-operate with each other to utilise mutual skills, experience and specialist knowledge
- Leverage opportunities by advocating as one voice
- Become a central point of contact that provides advice and direction to external parties on Aboriginal-specific funds and programs coming into our region where it relates to health and wellbeing
- Act as a point of truth-telling and a support to each other



SAWCAN Team

Our Founding Directors

The SAWCAN Directors is comprised of the CEOs of each of our partner organisations.



Cindy Zbierski, CEO of Nunyara
Aboriginal Health Service.
Inaugural Chairperson of SAWCAN



Carolyn Miller, CEO of Port Lincoln
Aboriginal Health Service.
Director of SAWCAN



Joanne Badke,
CEO of Tullawon Health Service.
Director of SAWCAN



Sharon Yendall, General Manager
of Oak Valley Maralinga.
Director of SAWCAN



Zell Dodd, CEO of Yadu Health
Aboriginal Corporation.
Director of SAWCAN

Sadly, we said goodbye to Sharon Yendall, General Manager at Oak Valley Maralinga and Zell Dodd, CEO of Yadu Health Aboriginal Corporation. We sincerely thank both Sharon and Zell for the leadership, strength and expertise they brought to not only their respective communities, but also to SAWCAN. We wish them well in their future endeavours. Their substantive Director roles will be automatically transferred to their organisations' incoming Chief Executive Officers.

Launch of the SAWCAN Strategic Plan

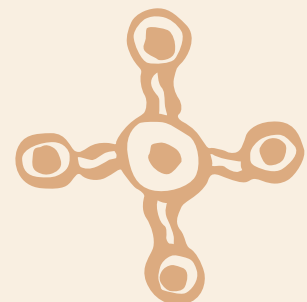
After many months of work, SAWCAN were proud to launch their Strategic Plan for 2023-2028 in March 2023. This work was led by the Directors and Executive Manager, Polly Paerata with the support of Coolamon Advisors. We thank Jennifer Bennett and Katrina Fanning for their hard work and commitment to this process.

The plan identifies four Strategic Outcomes that we will focus on over the next five years.



For more information, or for an electronic copy of our Strategic Plan please reach out to sawcan@sawcan.org.au

We give our sincere thanks to the Fay Fuller Foundation, Cages Foundation and Dusseldorp Forum, whom without their investment and belief in our way of doing business this would not be possible.



Our Regional Project Work

We continue to work on some large regional projects across the Eyre and Far West Coast region. These projects include:

Aboriginal Disability Alliance

Commencing in 2020 and funded through Department of Social Services, this is SAWCAN's longest-standing regional program. The project focusses on four core objectives:

1. Improved understanding of our services and regions
2. Increase community understanding and awareness of the NDIS
3. Improve access to the NDIS for Aboriginal people, their families and carers
4. Creating sustainable, culturally-appropriate disability services (future-proofing the project)

Since the program's inception, we have:

- Supported 126 Aboriginal peoples across our region to access the NDIS
- Worked with 211 families to help them to understand how to use their NDIS plan
- Partnered with various agencies (including government and non-government) to hold 13 community information sessions
- Advocated on behalf of 89 NDIS participants to support NDIS plan and funding changes
- Held 45 information sessions with external service providers whom we work with, or who support Aboriginal peoples living with a disability
- Conducted 76 internal staff training sessions to build capacity and awareness across our ACCHOs in the NDIS space
- Facilitated 84 peer support meetings (for NDIS workers) to support in the sharing of information, good news stories and ways of working that can be adopted in other communities

We have also had the privilege of working with the National Aboriginal Community Controlled Health Organisation (NACCHO), First Peoples Disability Network and the Coalition of Peaks to inform national policy changes.

Elder Care Support

Funded through NACCHO, the Elder Care Support (ECS) program aims to support Elders across our region in accessing My Aged Care services (both in home support and residential care) and increase community awareness and understanding of aged care services.

The three key aims of the program are to:

5. Reduce barriers experienced by Aboriginal people across the aged care journey
6. Increase the number of Aboriginal people accessing Aged Care services
7. Increase the number of Aboriginal people receiving Aged Care on Country

This is a brand new program for SAWCAN and the region and we are excited to be able to offer this support to our communities in the 2023-24 financial year.

Leading this program on behalf of the region is Shellander Champion.

Community Connections Program

Funded through the Department of Human Services, the Community Connections program aims to help Aboriginal Peoples living across the Eyre and Far West Coast region to access culturally appropriate supports to increase their independence and build stronger social and community connections.

This year we were able to successfully recruit support workers at Nunyara, Port Lincoln, Yadu and Tullawon to work with their most vulnerable and isolated community members to connect them with services and community groups. We are pleased to report that this program was able to support 146 peoples across our communities during this period.

Unfortunately, we have chosen not to continue with this program post-30 June 2023 due to a rigid program model that affected our ability to provide flexible services to our communities. Communities should be aware that their local ACCHO will continue to provide these connection and support services to their communities despite this program no longer being funded.

Strong Bubs, Strong families

The Strong Bubs, Strong Families is a new regional program that commenced in March 2023. It focusses on improving the quality, timeliness and access to culturally safe systems and resources Aboriginal children (prenatal to two years of age) and their families.

Leading this program on behalf of SAWCAN is Mary-Anne Williams who is a Registered Nurse / Remote Area Nurse. Over the next three years, we will be:

- Increasing local ACCHO workforce capacity to screen, assess and refer children at key developmental milestones using the ASQ-TRAK tools and resources
- Co-designing the development of a series of culturally specific resources with local communities to support parents with child development
- Supporting local ACCHOs to deliver support groups for positive parenting and supporting the wellbeing of the family as a whole
- Supporting local ACCHOs to improve internal systems and processes to facilitate better collaboration between health and education systems

Continuity of Care Project

Over the past eighteen months, SAWCAN has been working in partnership with SA Health to review and develop a continuity of care model to support Aboriginal mothers, non-Aboriginal mothers of Aboriginal babies and children aged 0-4. The main aim of this piece of work is to take a systems approach to how continuity of care can be improved for this cohort. To date, our participation has been via attendance at state-wide meetings to share experiences of Aboriginal mothers, non-Aboriginal mothers of Aboriginal babies and children aged 0-4 in our region in order to inform change. We are excited to announce that in the coming financial year our region will be funded to test various activities that support continuity of care with the hope that we will be able to provide vital information which will inform the formal implementation of this program (ear-marked for 2024-2025). In early 2024, community members will be able to seek the services of a new worker (title yet to be defined) who can support Aboriginal mothers, non-Aboriginal mothers of Aboriginal babies and children aged 0-4 in their care journey within the ACCHO, hospitals and mainstream GP services.

What's next?

The 2023 -2024 financial year is going to be a busy one! SAWCAN and its partner organisations are expecting an influx of new programs and initiatives designed to better support our communities. The challenge for all of us is to be able to find suitably trained workforce who wish to work in these spaces. Our new projects include:

- Tackling Indigenous Smoking
- Culture Care Connect – suicide prevention
- Research and data
- Foetal Alcohol Spectrum Disorder community awareness and education

From a SAWCAN perspective, we will also have a significant focus on improving our internal systems to ensure that we can continue to grow and support the communities in bringing resources, programs and services to the Eyre and Far West Coast.

Thank you

On behalf of the Board of Directors, we thank our SAWCAN staff for their hard work and dedication throughout the year. Our growth and successes would not be possible without you.

Financial Statements



Statement of Profit or Loss

Port Lincoln Aboriginal Health Service Inc.

STATEMENT OF PROFIT OR LOSS AND OTHER COMPREHENSIVE INCOME FOR THE YEAR ENDED 30 JUNE 2023

	Note	2023 \$	2022 \$
Grant Revenue	2	6,127,132	5,657,702
Other Revenues	2	716,887	776,485
Gain on Revaluation of Land and Buildings	7	-	571,318
Employee Benefits Expense		(3,848,965)	(3,985,858)
Supplies and Services	3	(2,074,604)	(1,651,991)
Depreciation and Amortisation	7	(174,694)	(135,324)
Current year operating surplus		<u>745,756</u>	<u>1,232,332</u>
Other comprehensive income		-	-
Total comprehensive income for the year		<u>745,756</u>	<u>1,232,332</u>

Statement of Financial Position

Port Lincoln Aboriginal Health Service Inc.

STATEMENT OF FINANCIAL POSITION AS AT ENDED 30 JUNE 2023

	Note	2023 \$	2022 \$
ASSETS			
CURRENT ASSETS			
Cash and cash equivalents	4	3,556,260	3,624,140
Accounts receivable and other debtors	5	146,596	37,500
Other current assets	6	-	32,527
TOTAL CURRENT ASSETS		<u>3,702,856</u>	<u>3,694,167</u>
NON CURRENT ASSETS			
Property, plant and equipment	7	3,919,922	3,378,666
TOTAL NON CURRENT ASSETS		<u>3,919,922</u>	<u>3,378,666</u>
TOTAL ASSETS		<u>7,622,778</u>	<u>7,072,833</u>
LIABILITIES			
CURRENT LIABILITIES			
Accounts payable and other payables	8	228,051	462,484
Unexpended grants		1,052,996	1,099,657
Financial liabilities	9	80,216	46,120
Employee provisions	10	753,157	756,402
TOTAL CURRENT LIABILITIES		<u>2,114,420</u>	<u>2,364,663</u>
NON CURRENT LIABILITIES			
Financial liabilities	9	122,419	43,443
Employee provisions	10	50,748	75,292
TOTAL NON CURRENT LIABILITIES		<u>173,167</u>	<u>118,735</u>
TOTAL LIABILITIES		<u>2,287,587</u>	<u>2,483,398</u>
NET ASSETS		<u>5,335,191</u>	<u>4,589,435</u>
EQUITY			
Retained surplus		5,335,191	4,589,435
TOTAL EQUITY		<u>5,335,191</u>	<u>4,589,435</u>

Statement of Change in Equity

Port Lincoln Aboriginal Health Service Inc.

STATEMENT OF CHANGES IN EQUITY FOR THE YEAR ENDED 30 JUNE 2023

	Retained surplus \$	Total equity \$
Balance at 1 July 2021	3,357,103	3,357,103
Comprehensive income		
Operating Surplus for the year	1,232,332	1,232,332
Total equity movements attributable to members of PLAHS	1,232,332	1,232,332
Balance at 30 June 2022	4,589,435	4,589,435
Balance at 1 July 2022	4,589,435	4,589,435
Comprehensive income		
Operating Surplus for the year	745,756	745,756
Total equity movements attributable to members of PLAHS	745,756	745,756
Balance at 30 June 2023	5,335,191	5,335,191

Statement of Cash Flows

Port Lincoln Aboriginal Health Service Inc.

STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 30 JUNE 2023

	Note	2023 \$	2022 \$
CASH FLOWS FROM OPERATING ACTIVITIES			
Receipts from funding bodies and customers		6,637,043	6,980,058
Interest received		51,219	10,941
Payments to suppliers and employees		(6,153,264)	(5,997,587)
Net cash generated from operating activities	13	534,998	993,412
CASH FLOWS FROM INVESTING ACTIVITIES			
Proceeds from sale of property, plant and equipment		-	-
Payment for property, plant and equipment	8	(543,228)	(817,162)
Net cash from/(used in) investing activities		(543,228)	(817,162)
CASH FLOWS FROM FINANCING ACTIVITIES			
Repayment of finance liabilities		(59,650)	(40,804)
Net cash from/(used in) financing activities		(59,650)	(40,804)
Net increase/(decrease) in cash held		(67,880)	135,446
Cash at beginning of the financial year		3,624,140	3,488,694
Cash at end of the financial year	4	3,556,260	3,624,140

Board of Management Financial Declaration

Port Lincoln Aboriginal Health Service Inc.

For the year ended 30 June 2023

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.

David G Dudley

.....

Board Member

Barry Johncock

Barry Johncock (Oct 10, 2023 08:50 GMT+10:5)

.....

Board Member

Dated this day of 2023

Oct 9, 2023

Auditor's Independence Declaration

Port Lincoln Aboriginal Health Service Incorporated For the year ended 30 June 2023

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 2023, 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.



Jessica Kellaway CA, CPA, Registered Company Auditor
Partner

Dated: 19th day of September 2023

Independent Auditor's Report

Galpins

Accountants, Auditors
& Business Consultants



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AUSTRALIA • NEW ZEALAND

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Galpins Trading Pty Ltd
ABN: 89 656 702 886

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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 2023, 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 2023 and of its financial performance for the year then ended; and
- (ii) complying with Australian Accounting Standards – Simplified Disclosures and Division 60 of the *Australian Charities and Not-for-profits Commission 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 – Simplified Disclosures 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



Jessica Kellaway CA, CPA, Registered Company Auditor
Partner

10 / 10 / 2023



Artwork Credit : Jillian Larking



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