PORT LINCOLN ABORIGINAL HEALTH SERVICE LTD.

ANNUAL REPORT

2025-2026



ACKNOWLEDGEMENT OF COUNTRY

Port Lincoln Aboriginal Health Service (PLAHS) acknowledges the Barngarla people as the traditional owners and custodians of the lands and waters where we live and work. We pay deep respect to Elders past, present, and emerging. We also acknowledge and respect all Aboriginal and Torres Strait Islander people who call this region home. We honour their enduring spiritual connection to Country, their rich cultural heritage and their reslience.

CULTURAL NOTICE

Aboriginal and Torres Strait Islander readers are advised that this report contains the names and images of people who have passed away.

Cover artwork by Jillian Larking

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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



Barry (Jack) Johncock
Chairperson/Director



Tosha Sambo
Treasurer/Director



Travis Nash
Public Officer/Director



Iris Clements
Secretary/Director



Sharon Waye-Hill
Director



Josphine Bilney
Director



Damien Kelly
Director

PAST CHAIRPERSONS

Iris Burgoyne*
Inaugural Chairperson 1993-94

Jennifer Johncock
1994-95

Tomas Liddle*
1995-96

Peter Burgoyne
1996-97, 1998-99

Lloyd Larking
1997-98

Kirt Dudley
1999-2000

Les Kropinyeri*
2000-01, 2001-02, 2002-03, 2004-05, 2007-08, 2008-09, 2009-10, 2012-13, 2013-14

David Dudley Snr
2003-04, 2014-15, 2017-18, 2021, 2022-23, 2023-24, 2024-25

Brenton Richards*
2005-06, 2006-07

Arlene Burgoyne*
2010-11, 2011-12

Neville Bilney
2015-16, 2016-17, 2021-22

Haydn Davey
2019-2021

** Deceased*

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 wellbeing 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

BARRY (JACK) JOHNCOCK

Chairperson

As I reflect on the past year, I feel both honoured and privileged to have been entrusted by our members with the role of Chairperson of Port Lincoln Aboriginal Health Service (PLAHS). Having served on the Board of Management for several years, it is a responsibility I accept with great pride, and I thank the membership for the confidence they have placed in me following the Annual General Meeting in November.

This reporting period has been one of growth, change and strategic direction for our organisation. The Board has worked diligently alongside management to guide PLAHS through an important phase of development, including the completion of our Strategic Plan 2026-2031. This plan provides a clear vision for the future and will help ensure we continue to meet the health and wellbeing needs of our community while remaining strong, sustainable and culturally responsive.

I am also pleased to welcome three new Directors to the Board of Management: Damien Kelly, Sharon Waye-Hill and Josie Bilney. Each brings valuable knowledge, skills and lived experience from health, child protection and broader community sectors. Their perspectives will strengthen our governance and help shape the future direction of the organisation. I also acknowledge and thank our continuing Directors, Tosha Sambo, Travis Nash and Iris Clements, whose experience, dedication and commitment provide invaluable continuity and leadership.

PLAHS continues to grow and expand its services while remaining true to its purpose of delivering culturally safe, high-quality health care for Aboriginal and Torres Strait Islander people. Every achievement of the organisation is driven by a shared commitment to improving health outcomes and supporting stronger communities.

On behalf of the Board, I extend our sincere appreciation to our funding and program partners, including the Department of Health, Disability and Ageing, NACCHO, the National Indigenous Australians Agency (NIAA), Eyre and Far North Local Health Network (EFNLHN), SAWCAN and the many other organisations that work alongside us. Your support enables us to deliver essential programs and services that benefit our community every day.

I would also like to acknowledge and sincerely thank our Chief Executive Officer, Carolyn Miller, and the entire operational team. Carolyn's unwavering commitment to PLAHS, our clients and the broader community is exceptional. Under her leadership, the organisation continues to grow, innovate and maintain the highest standards of care. We are fortunate to have such a dedicated and professional team serving our community.

A special acknowledgement must also be made to former Chairperson **David Dudley Snr**. David provided dedicated leadership to PLAHS over many years and served both the organisation and community with commitment. We extend our sincere thanks for his many years of service and the significant contribution he made to strengthening the organisation and supporting its continued growth. We wish him all the very best for the future.

The members have also recently made the important decision to change the organisation's name to Galinyala Aboriginal Health Service Ltd. This marks an exciting new chapter in our journey. While our name is changing, our commitment to community remains the same. The transition provides us with an opportunity to strengthen our identity, enhance service delivery and position the organisation for future growth and success.

As Chairperson, I am excited about what lies ahead. We have a dedicated Board, an exceptional workforce and a community that continues to guide and support our vision. Together, we will continue building an organisation that our people can be proud of for generations to come.

Thank you for your ongoing support.

Barry (Jack) Johncock
Chairperson
Port Lincoln Aboriginal Health Service Ltd



ACKNOWLEDGEMENT OF SERVICE AND CONTRIBUTION

MR LES KROPINYERI

During the 2025–26 reporting period, PLAHS mourned the passing of Mr Les Kropinyeri, a respected community leader, former Director, and long-serving Chairperson of the Port Lincoln Aboriginal Health Service.

Les made a significant contribution to the growth, governance and success of PLAHS over many years. He served as Chairperson in 2000–01, 2001–02, 2002–03, 2004–05, 2007–08, 2008–09, 2009–10, 2012–13 and 2013–14, providing strong leadership and unwavering commitment to the principles of Aboriginal community control.

Throughout his years of service, Les advocated for better health outcomes for Aboriginal people and worked to ensure that PLAHS remained responsive to the needs and aspirations of the community it serves. His guidance and dedication helped strengthen the organisation and contributed to the foundation upon which PLAHS continues to grow today.

Beyond his contribution to PLAHS, Les was widely respected for his service to the broader Aboriginal community. His leadership, wisdom and commitment have left a lasting legacy that will continue to be remembered by those who had the privilege of working alongside him.

The Board of Directors, Members and Staff extend their sincere condolences to Les's family, friends and community. We acknowledge with gratitude his many years of service, leadership and advocacy, and honour the enduring contribution he made to PLAHS and the wider community.

PLAHS respectfully acknowledges and thanks Les Kropinyeri for his outstanding service and lasting contribution to Aboriginal community-controlled health care.

2025-26 AT A GLANCE

A snapshot of the care, connection and community support our teams delivered this year.

1,599
CLIENTS
Aboriginal and/or Torres Strait Islander clients make up 85%

21,449
EPISODES OF CARE

750
ABORIGINAL HEALTH ASSESSMENTS
up from 700 in 2024-25

291
GP MANAGEMENT PLANS
more than double last year

633
FLU VACCINATIONS
up from 549 in 2024-25

356
DIPHTHERIA VACCINES
two community clinics at Mallee Park

7,389
PHONE CALLS ANSWERED
by our reception team

2,807
TRANSPORT TRIPS
to GP, specialist and allied health appointments

352
CHILD HEALTH CHECKS
92% of children fully immunised

219
MIDWIFE APPOINTMENTS
antenatal and postnatal care

54
STAFF

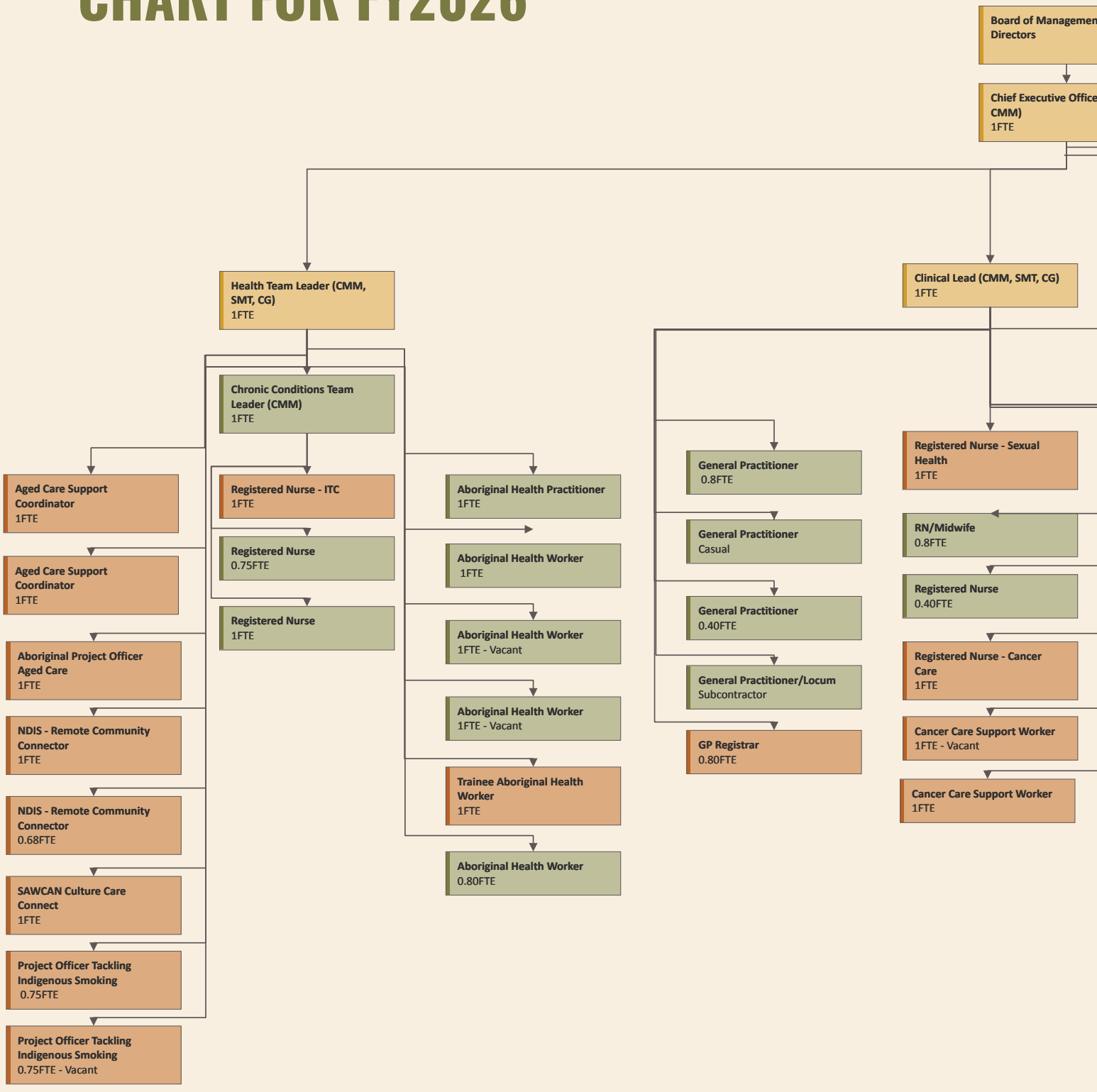
500
TRAINING ENROLMENTS

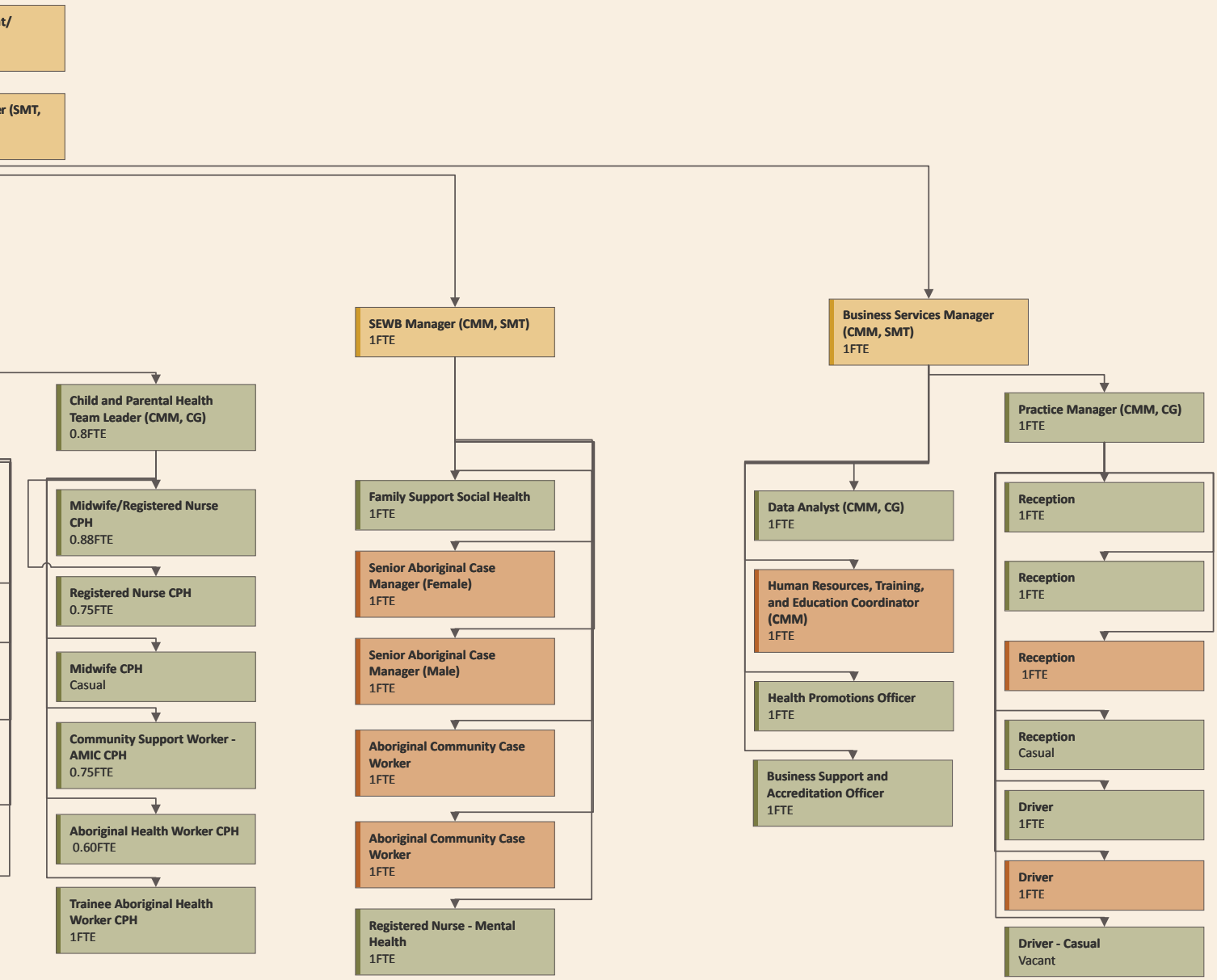
$9.65M
REVENUE AND OTHER INCOME
up 14.2% on 2024-25

60+
COMMUNITY MEMBERS
at our major wellbeing workshop

2
CCSM OUTREACH SERVICES
meeting clients where they are

PLAHS ORGANISATIONAL CHART FOR FY2026




t/
r (SMT,
Child and Parental Health Team Leader (CMM, CG) 0.8FTE
Midwife/Registered Nurse CPH 0.88FTE
Registered Nurse CPH 0.75FTE
Midwife CPH Casual
Community Support Worker - AMIC CPH 0.75FTE
Aboriginal Health Worker CPH 0.60FTE
Trainee Aboriginal Health Worker CPH 1FTE
SEWB Manager (CMM, SMT) 1FTE
Family Support Social Health 1FTE
Senior Aboriginal Case Manager (Female) 1FTE
Senior Aboriginal Case Manager (Male) 1FTE
Aboriginal Community Case Worker 1FTE
Aboriginal Community Case Worker 1FTE
Registered Nurse - Mental Health 1FTE
Business Services Manager (CMM, SMT) 1FTE
Data Analyst (CMM, CG) 1FTE
Human Resources, Training, and Education Coordinator (CMM) 1FTE
Health Promotions Officer 1FTE
Business Support and Accreditation Officer 1FTE
Practice Manager (CMM, CG) 1FTE
Reception 1FTE
Reception 1FTE
Reception 1FTE
Reception Casual
Driver 1FTE
Driver 1FTE
Driver - Casual Vacant

PLAHS KEY STATISTICS FOR FY2026

BRENTON WILLIAMS

Data Analyst



CLIENTS BY AGE AND GENDER

1,599

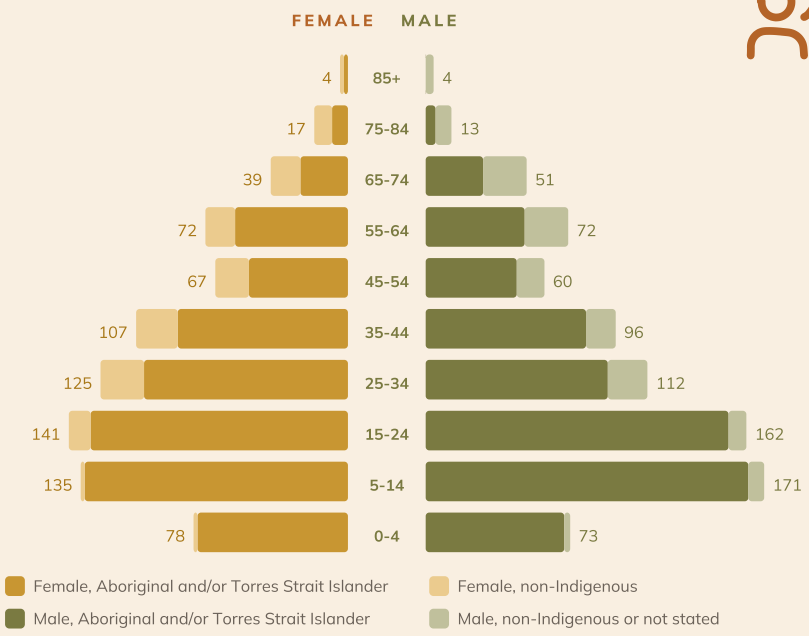
total clients at 30 June 2026

(compared with 1,592 in 2024-25)

785
FEMALE

814
MALE

2024-25: 779 female
and 813 male



EPISODES OF CARE

21,449

in 2025-26, down from 22,092 in 2024-25

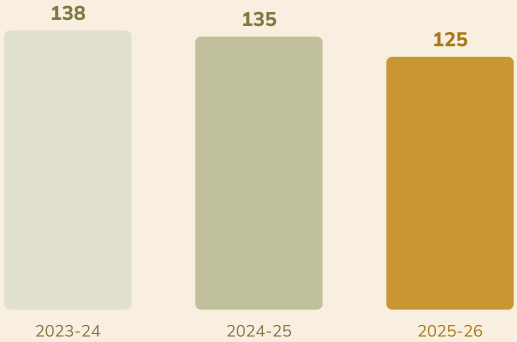


89% of episodes were with Aboriginal and/or Torres Strait Islander clients
Lighter shade: non-Indigenous or not stated

NEW PATIENTS

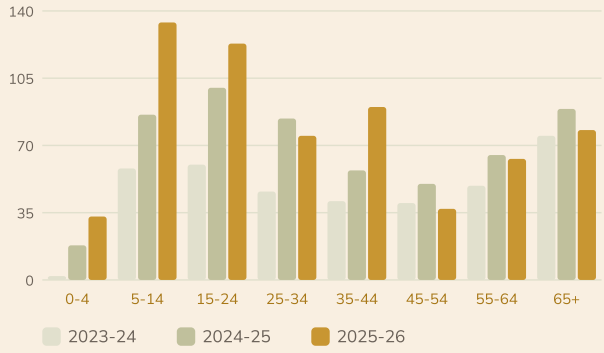
125 in 2025-26

105 Aboriginal and/or Torres Strait Islander



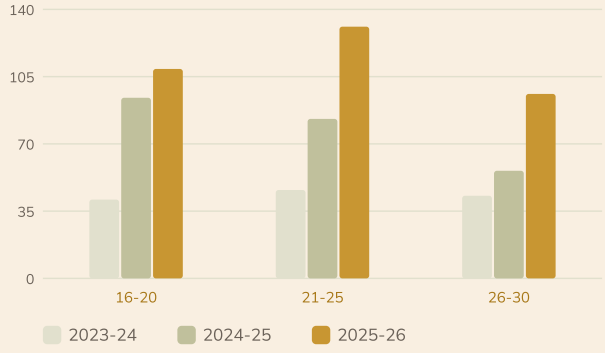
INFLUENZA VACCINATIONS

633 in 2025-26
up from 549 in 2024-25



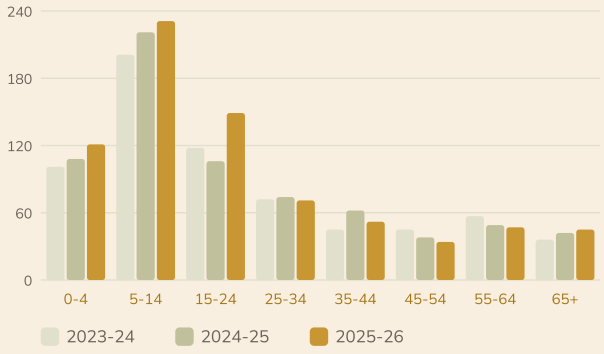
STI CHECK-UPS (16-30 YEARS)

336 in 2025-26
up from 233 in 2024-25



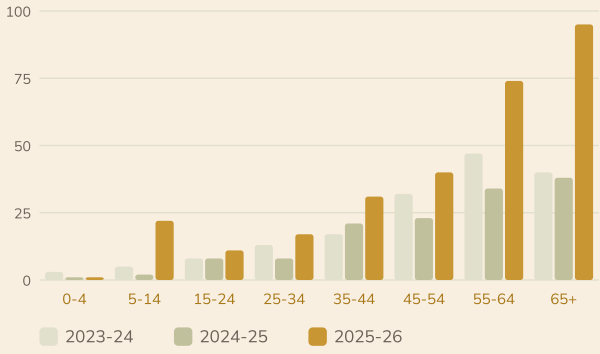
ABORIGINAL HEALTH ASSESSMENTS

750 in 2025-26
up from 700 in 2024-25



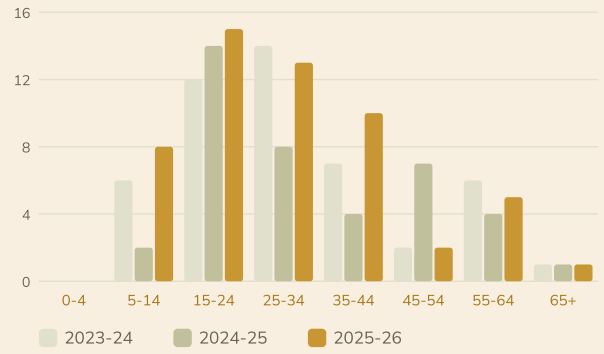
GP MANAGEMENT PLANS

291 in 2025-26
up from 135 in 2024-25



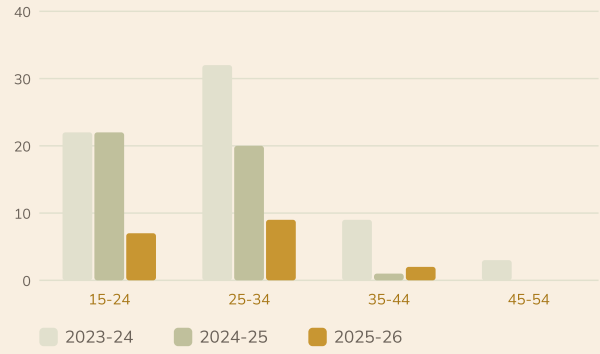
MENTAL HEALTH TREATMENT PLANS

54 in 2025-26
up from 40 in 2024-25



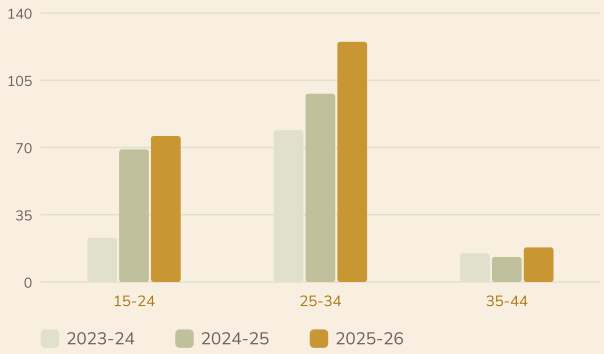
GP ANTENATAL APPOINTMENTS

18 in 2025-26
down from 43 in 2024-25



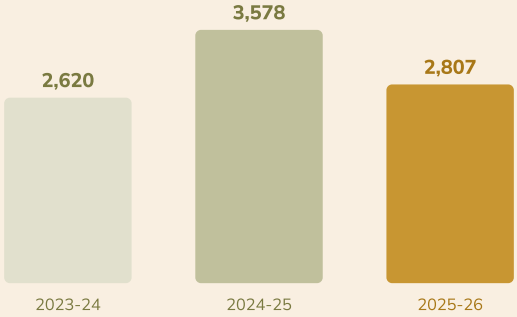
MIDWIFE APPOINTMENTS

219 in 2025-26
up from 180 in 2024-25



TRANSPORT SERVICES

2,807 in 2025-26
trips to appointments





Women's Health Day at Mallee Park, February 2026



CEO REPORT

CAROLYN MILLER

CEO PLAHS

It has been another productive year for Port Lincoln Aboriginal Health Service (PLAHS), with a strong focus on continuous improvement, service delivery, workforce development, and community wellbeing.

Throughout the year, significant progress has been made in strengthening our organisational systems and processes. Our policies and procedures are now integrated within our IT systems, allowing for automatic review reminders and ensuring compliance with quality improvement requirements. These enhancements support our commitment to providing safe, effective, and accountable services to our community.

Clinical Services and Performance

PLAHS continues to closely monitor clinical performance to ensure we meet our service delivery targets. Weekly reporting enables us to track key activities including Health Assessments, GP Management Plans, Mental Health Care Plans, vaccinations, and general practitioner consultations. Follow-up care and referrals remain an important part of our integrated approach to supporting the health and wellbeing of our community.

I would like to acknowledge our dedicated General Practitioners, whose expertise and commitment are essential in reviewing and overseeing patient care plans, ensuring the highest standard of clinical care is provided.

Workforce Growth and Recruitment

Recruitment and retention continue to be a priority across the organisation. I am pleased to report that the majority of positions have now been filled, strengthening our capacity to meet community needs.

A significant achievement this year has been the successful engagement of a part-time Female Obstetric GP, who will join PLAHS for a 12-month period. This appointment will enhance access to Obstetric and women's health services, and provide additional support for our clients.

Infrastructure and Service Expansion

PLAHS continues to invest in infrastructure improvements to ensure our facilities remain welcoming, professional, and fit for purpose.

We were also successful in securing grant funding for a new dental chair. This exciting development will enable the establishment of a dental service, which is anticipated to commence operation in April 2027 from the rear of the former Headspace building. This service will significantly improve access to oral health care for our community.

Social and Emotional Wellbeing

The Social and Emotional Wellbeing (SEWB) team continues to play a critical role in supporting individuals and families within our community.

During the year, a comprehensive review of the program was undertaken to ensure the team has the appropriate systems, resources, and workforce required to deliver high-quality services. With the team now fully staffed, we are well-positioned to strengthen service delivery and address future challenges and opportunities.



SAWCAN Community Expo at Mallee Park, June 2026



SAWCAN Community Expo at Mallee Park, June 2026

SAWCAN Programs and Partnerships

Through the SAWCAN programs, including Tackling Indigenous Smoking (TIS), Elder Care, Community Connector (NDIS), and Culture Care Connect, PLAHS continues to provide a broad range of community support services. These programs complement our existing health services and create additional pathways of support for community members.

As a member of the SAWCAN alliance, alongside Aboriginal Community Controlled Health Organisations from Port Lincoln, Whyalla, Yalata, and Oak Valley, PLAHS actively contributes to regional planning, collaboration, and advocacy on key health priorities.

This year, we were pleased to secure ongoing funding through NACCHO for several SAWCAN programs. This funding supports the employment of 11 additional staff members, with 99% identifying as Aboriginal, further strengthening our commitment to Aboriginal workforce development and community-led service delivery.

Acknowledgements

I would like to sincerely thank our many partners and stakeholders who continue to support PLAHS and the broader community. In particular, I acknowledge the support and collaboration of the NACCHO, the Department of Health our SAWCAN partners, Eyre and Far North Local Health Network, Mallee Park, West Coast Youth and Community Support, SA Housing, the Department for Education, COBH, Headspace, and many others who contribute to positive outcomes for our clients.

I also extend my appreciation to the Allied Health Professionals and visiting specialists who provide services through PLAHS, as well as those contracted to fill service gaps and ensure our clients can access comprehensive care close to home.

Most importantly, I thank our clients and community members for their continued trust, support, and engagement. Your feedback and participation help us maintain a culturally safe, responsive, and high-quality health service.

PLAHS also continues to review and strengthen specialist services delivered through RDWA to ensure community needs are met now and into the future.

Finally, I would like to acknowledge and thank our Board Chair, Jack, together with all Board Members, for their leadership, governance, and commitment throughout the year. I also extend my sincere appreciation to the Senior Leadership Team, Warren, Teresa, Shanae, and Caitlyn, whose guidance and support have been invaluable.

To our Business Services team, including Teresa and VBA staff, thank you for your management of grants, infrastructure projects, assets, finances, human resources, accreditation, and information technology. And to every PLAHS staff member, thank you for your dedication, resilience, and unwavering commitment to our community. Your professionalism and willingness to continue delivering services during challenging circumstances are greatly appreciated.

Together, we continue to strengthen PLAHS and improve health outcomes for our community. I look forward to building on these achievements in the year ahead.



ADMINISTRATION REPORT

TERESA SZUMSKI

Business Manager

Strong Foundations, Stronger Futures

At PLAHS, quality healthcare is supported by more than clinical services. Behind every appointment, community program, outreach visit and health initiative is a dedicated team working to ensure our organisation remains strong, sustainable and responsive to the needs of our community.

Throughout 2025-26, our Administration team played an important role in strengthening the systems, processes, and people that support service delivery. From workforce support and financial stewardship to information management, accreditation, health promotion and continuous improvement, the team worked together to create a strong foundation that enables our clinicians and frontline staff to focus on delivering high-quality care to community.

Supporting Our Community Through Strong Systems and Teamwork

This year was one of growth, adaptation and collaboration. The organisation was fortunate to be supported by Brenton Williams, Health Data and IT, whose work in health data, reporting, information systems and quality improvement helped strengthen organisational decision-making and reporting capabilities. Alexandra Hines, Business Support and Accreditation Officer, supported HR, business operations, quality systems and accreditation activities, helping ensure that documentation and governance requirements remained well managed throughout the year.

During the year, Molly Szumski, HR and Training Coordinator, and Gagan Kaur, Health Promotion Officer, commenced parental leave. While taking time to welcome and care for their growing families, both remained connected to the organisation and continued to provide valuable support when needed. Molly assisted with the review of policies and procedures in March, contributing to key quality improvement and accreditation activities, while Gagan resumed support from April 2026, working one day each week to assist with health promotion initiatives and maintain important connections with the team and community. Their ongoing contribution reflects the strong commitment and sense of connection that exists within the PLAHS family.

In February 2026, the Practice Managers team joined the broader Administration Team, creating a more connected and collaborative approach to supporting clinical services, organisational operations and quality initiatives. This integration strengthened communication across the organisation and reinforced our shared commitment to delivering the best possible outcomes for community.

Commitment to Quality and Continuous Improvement

One of the most significant projects undertaken during the year was preparation for the next cycle of RACGP accreditation. Working closely with the clinical team, administration staff dedicated considerable time to reviewing and strengthening policies, procedures and supporting documentation within Logiqc. This work supported the RACGP self-assessment due in May 2026 and laid the groundwork for the onsite accreditation visit scheduled for October 2026 as part of our ongoing commitment to quality healthcare and continuous improvement.

This was truly a whole-of-organisation effort. Clinical staff, managers and support teams worked side by side to ensure our systems, records and processes reflect the high standard of care delivered every day. The project demonstrated the organisation's commitment to excellence, accountability, and providing culturally safe, high-quality services to our community.

Looking Ahead

While much of this work happens behind the scenes, its impact is felt throughout the organisation and across the community. Strong governance, reliable systems, quality improvement, and well-supported staff all contribute to better outcomes for the people we serve.

The dedication, flexibility and commitment shown by our Administration team throughout 2025-26 has helped ensure PLAHS remains well positioned to continue delivering responsive, community-controlled healthcare now and into the future.

Strong systems and strong teamwork help create healthier futures for our community.

SOUND FINANCIAL MANAGEMENT

Responsible stewardship, capable people and strong systems

2025-26 OVERVIEW

Throughout 2025-26, PLAHS maintained disciplined financial controls while managing rising operating costs, progressing infrastructure priorities, and securing new program funding. Reliable payroll, reconciliation, reporting and audit processes supported by management, the Board, and funding bodies. This work was strengthened by a committed administration team and close collaboration with the clinical team.

YEAR AT A GLANCE

$875K
MBS INCOME
10% increase on 2024-25

$582,500
DENTAL FUNDING
Approved across FY2026-FY2028

$10.538M
IAHP ALLOCATION
Total for FY2027 and FY2028

Balance sheet strength and financial position

At 30 June 2026, PLAHS reported total assets of $10.09 million and total liabilities of $2.36 million, resulting in net assets of $7.72 million. Compared with 30 June 2025, net assets increased by $13,184 and total liabilities reduced by $408,108. This confirms a stable financial position and a substantial asset base supporting ongoing service delivery and future priorities.

The balance sheet was supported by property, plant and equipment of $6.91 million and cash and cash equivalents of $2.28 million. Total current assets were $3.18 million, broadly consistent with $3.15 million in FY2025. Cash reduced by $742,800, while accounts receivable and other debtors increased from $98,892 to $865,030, indicating that a greater proportion of current resources was held as receivables rather than cash at 30 June 2026.

Independent property valuations were reflected in the year-end balance sheet based on market values as at 30 June 2026. The valuations resulted in increased values for the properties at 15 Romas Way and 1–4/20 Matilda Street, while 19A Oxford Terrace recorded a modest reduction. These movements represent point-in-time market assessments for financial reporting purposes and do not necessarily reflect the properties' condition, service capacity or the cumulative cost of improvements undertaken over time, particularly in the higher building-cost environment experienced in recent years.

Total liabilities decreased by 14.7%, supported by a reduction in unexpended grants from $1.41 million to $752,835. Employee leave provisions increased during the year, including annual leave and long service leave provisions, and will continue to require active monitoring. Overall, net assets represented 76.6% of total assets at year end, demonstrating a sound financial base while maintaining appropriate oversight of cash flow, receivables, grant obligations and workforce-related liabilities.

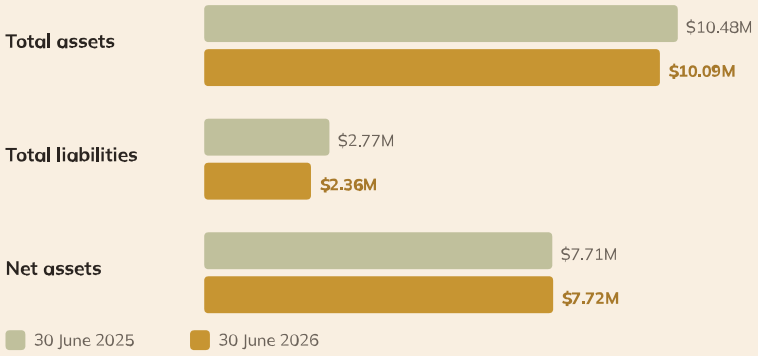
$10.09M
TOTAL ASSETS
down 3.8%

$2.36M
TOTAL LIABILITIES
down 14.7%

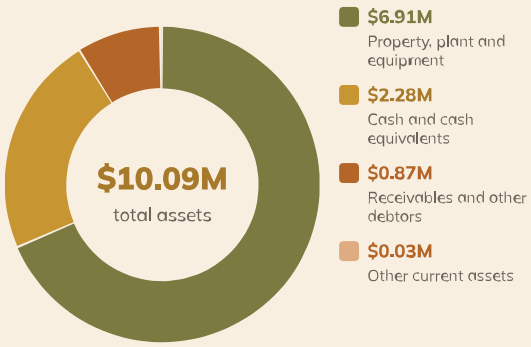
$7.72M
NET ASSETS
up $13,184

76.6%
NET ASSET RATIO
of total assets

BALANCE SHEET AT 30 JUNE



WHAT WE OWN



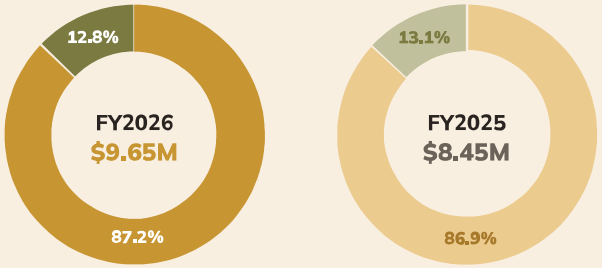
Operational financial performance: FY2026 compared with FY2025

Audited operating results show that revenue and other income increased to $9.65 million in FY2026 from $8.45 million in FY2025, an increase of 14.2%. Employee benefits rose by 5.7% to $5.82 million and supplies and services increased by 13.2% to $2.81 million. Revenue growth therefore exceeded the combined growth rate of these two principal operating cost categories.

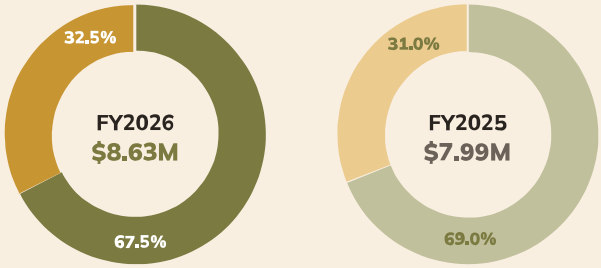
Measure	FY2026	FY2025	Movement
Revenue and other income	$9,647,924	$8,448,104	+$1,199,820 (+14.2%)
Employee benefits	$5,824,352	$5,510,755	+$313,597 (+5.7%)
Supplies and services	$2,808,159	$2,481,051	+$327,108 (+13.2%)
Reported operating surplus	**$13,184**	**$197,868**	**-$184,684**

- **Revenue:** Grant revenue increased by $1.07 million to $8.41 million and remained the main source of operating income. Other revenue increased by $131,105 to $1.24 million, supported by Medicare, interest and rental income.
- **Workforce:** Employee benefits increased by $313,597 to $5.82 million, mainly reflecting higher wages, superannuation and leave-related costs.
- **Operating costs:** Supplies and services increased by $327,108 to $2.81 million. Major increases related to community programs, IT, travel, repairs and maintenance, and medical practitioner services.
- **Underlying position:** Before depreciation and asset revaluation, revenue growth exceeded growth in the two main operating expenditure categories. The reported result was materially affected by non-cash accounting adjustments.

OPERATING REVENUE COMPOSITION



OPERATING EXPENDITURE COMPOSITION



Grant revenue · Other revenue · Employee benefits · Supplies and services

Darker rings FY2026, lighter rings FY2025. Source: Notes 2-4, FY2026 audited financial statements. Values rounded for display.

Operational performance strengthened in FY2026.

Revenue grew by 14.2%, ahead of the 8.0% increase in employee benefits and supplies and services. The surplus reduced to $13,184 after depreciation of $337,388 and a non-cash property revaluation decrease of $664,841.

Cash flow and financial position

Net cash used in operating activities was $258,050 in FY2026, compared with $1.47 million generated in FY2025. This movement was influenced by the increase in receivables and the reduction in unexpended grant liabilities. Cash and cash equivalents declined to $2.28 million, while total assets remained $10.09 million and net assets increased slightly to $7.72 million.

Overall, the audited accounts confirm a stable balance sheet and stronger revenue performance, while also highlighting the need for continued oversight of cash flow, receivables, employee provisions, grant dependency and supplies and services expenditure.

Strong controls and accountable reporting

Weekly payroll and Single Touch Payroll reporting continued throughout the year. Accounts payable, bank reconciliations and ledger reviews were completed through established month-end processes. Digital purchasing approvals supported delegated decision-making and maintained a clear audit trail, while regular financial discussions with leaders and budget holders supported active monitoring of program performance and emerging pressures.

Audit, compliance and funding outcomes

The FY2025 financial audit was completed in September 2025, and the audited statements were presented to the Board and Annual General Meeting. Required financial and activity reports were submitted across funded programs, and an interim audit was completed during 2026. MBS income reached $875,000 for the year, 10% higher than 2024-25. The FY2026 financial audit was completed in September 2026, achieving an unqualified audit outcome. New and approved funding included:

- Dental service funding of $582,500 across FY2026 to FY2028.
- Dementia Australia funding of $30,000 and Preventive Health SA funding of $30,000 for the Youth Girls Empowerment Program.
- NACCHO funding of $52,000 for Diphtheria Response Support and $75,000 for Lung Cancer initiatives.
- Confirmed IAHP funding of $4,947,852.92 for FY2027 and $5,590,182.67 for FY2028, totaling $10,538,035.58 excluding GST.

Prudent cash and investment management

Available cash reserves continued to be managed through term deposits, with rates tested across banking providers. At 30 June 2026, term deposits totaled $2,068,029.53, with interest rates ranging from 5.15% to 5.20%. This supported capital preservation, liquidity, and competitive returns while retaining flexibility for planned commitments.

Assets, infrastructure and operational sustainability

PLAHS continued to invest in its facilities and infrastructure throughout the year, progressing several important projects that support both service delivery and organisational sustainability. Key achievements included the completion of staff bathroom upgrades, installation of CCTV security systems, and completion of the onsite garage. Planning also progressed for future car park improvements, with several projects remaining in progress and scheduled for completion by June 2027.

Looking ahead, the organisation has continued to focus on expanding and enhancing services for the community. Development planning for the Dental Project is underway, while funding opportunities are being actively pursued to support the construction of a new Child and Parental Health Wing on the vacant land adjoining the current clinical facility. This project represents an important future investment in maternal, child, and family health services for the region.

During the year, PLAHS also took back occupancy of 19 Oxford Terrace, previously leased by Headspace. The building is now being utilised to accommodate specialist services, including psychology. This transition provides additional clinical space and supports plans to repurpose the existing group room for the future Dental Clinic, helping maximise the use of existing infrastructure while supporting service expansion and improved access for community.

Collectively, these projects reflect our commitment to creating welcoming, fit-for-purpose facilities that support the delivery of high-quality, culturally safe healthcare both now and into the future.

Property, fleet, insurance and essential services

Staff accommodation and organisational properties continued to be managed through formal leasing arrangements and regular inspections. Independent property valuations were completed for balance sheet purposes, and fleet replacements progressed as leases reached expiry. Required insurance cover remained current across property, motor vehicles, cyber risk, medical malpractice, public liability and association liability.

Managing rising costs

Financial management remained focused on sustainability amid increasing wages, superannuation, and general operating costs. The Enterprise Agreement was finalised and ratified on 12 May 2026, supported by financial modelling for wage increases and backpay. Funding uplifts and program-specific indexation assisted planning while protecting service delivery.

“Sound financial management and strong teamwork give PLAHS the stability to invest in people, services, quality and infrastructure while remaining accountable to community and funding partners.”

A Year of Strong Foundations and Shared Progress

The achievements of 2025-26 reflect the strength of our people, the reliability of our systems, and our shared commitment to community. Across administration, quality, clinical services, finance and operations, teams worked together to strengthen accreditation readiness, improve organisational systems, secure important funding and progress infrastructure priorities. These achievements have placed PLAHS in a strong position to continue delivering culturally safe, responsive, and community-controlled healthcare. As we look ahead, we remain focused on supporting our workforce, using our resources responsibly and building sustainable services that respond to the needs and aspirations of our community.

Together, strong people, sound stewardship, and community leadership provide a strong foundation for healthier futures

UCL AND STAFFING



MOLLY SZUMSKI HR, Training and Education Coordinator

ALEXANDRA HINES Business Support & Accreditation Officer

As at 30 June 2026, PLAHS employed **54 staff members**, representing a **full-time equivalent (FTE) workforce of 42.7**. Throughout the reporting period, **14 new employees** joined the organisation, reflecting PLAHS's ongoing commitment to building workforce capacity and supporting the delivery of quality services to the community.

At 30 June 2026, there were **four vacant positions** across the organisation. During the year, 13 employees resigned, highlighting the continued importance of recruitment, retention and workforce development initiatives to maintain a stable and skilled workforce. Please see below graphs for a breakdown of employee statistics, including employee tenure and gender breakdown.

54
STAFF
at 30 June 2026

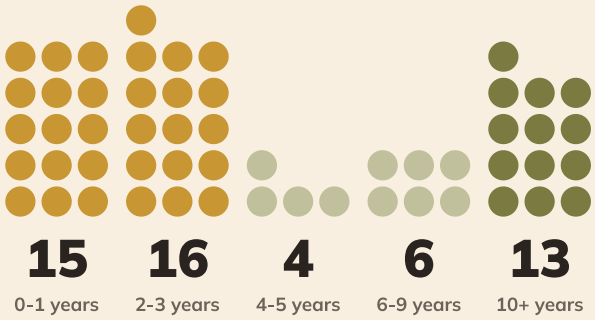
42.7
FTE WORKFORCE
full-time equivalent

14
NEW EMPLOYEES
joined this year

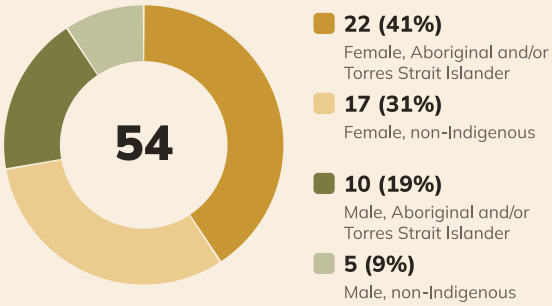
13
RESIGNATIONS
this year

4
VACANT POSITIONS
at 30 June 2026

STAFF TENURE



STAFF BY GENDER AND IDENTITY



A skilled, knowledgeable and culturally responsive workforce is essential to delivering high quality, community-centred care. During the reporting period, PLAHS continued its strong commitment to staff training, education and professional development by supporting employees to undertake nationally recognised qualifications that strengthen clinical practice, community engagement and service delivery capabilities.

Several staff members are currently enrolled in formal vocational education programs, including the **HLT40213 Certificate IV in Aboriginal and/or Torres Strait Islander Primary Health Care Practice, HLT30121 Certificate III in Aboriginal and/or Torres Strait Islander Primary Health Care, Certificate IV in Alcohol and Other Drugs (AOD), and the CHC32015 Certificate III in Community Services.** These qualifications support workforce development across a range of disciplines and enhance our capacity to provide culturally safe, holistic and evidence-based care to Aboriginal and Torres Strait Islander peoples.

PLAHS also celebrated the successful completion of **Prescribing Midwifery** and **AMIC (Aboriginal Maternal Infant Care) training** by members of the Child and Maternal Health Team. This training further strengthens the expertise of the Child and Maternal Health team, and have enabled PLAHS to broaden service delivery and provide more responsive and accessible care to mothers, infants and families within our community.

Through ongoing investment in education and training, PLAHS is building a sustainable workforce, supporting career progression opportunities for staff, and strengthening the skills and knowledge required to meet the evolving needs of our community. This commitment reflects our dedication to excellence in service delivery and to empowering our staff to achieve their professional goals while improving health outcomes for our clients and community.

ANNUAL STAFF EXCELLENCE AWARDS

A special highlight of 2025 was the presentation of the inaugural PLAHS Staff Excellence Awards at the Staff Christmas Celebration in December. These awards were established to recognise and celebrate the exceptional people who make a difference every day through their dedication, professionalism, compassion and commitment to our community.

The awards acknowledge staff who go above and beyond in their roles, support and inspire their colleagues, embrace the values of PLAHS and contribute to improving the health and wellbeing of our clients and community.

We proudly acknowledge the 2025 Staff Excellence Award recipients:

CLIENT SERVICES AWARD

Natasha Johncock

For consistently delivering outstanding service to clients, exceptional teamwork and inspiring others through her commitment to excellence.

INSPIRATIONAL AWARD

Gagan Kaur

For generously sharing knowledge and experience, encouraging colleagues and leading by example through selfless service.

ROOKIE AWARD

Quinishia Skinn-Buzzacott

For the significant contribution, growth and positive impact made in her first 18 months with PLAHS.

VISION AWARD

Brenton Williams

For embracing and championing the values of PLAHS while driving continuous improvement and quality care.

MVP AWARD

Chantal Farr

For exceptional dedication, leadership and contribution across the organisation, consistently making a positive difference to clients and colleagues.

CEO'S CHOICE AWARD

Teresa Szumski

For outstanding commitment, leadership and dedication, and her significant contribution to strengthening operations, supporting staff and advancing our strategic priorities.

In addition to celebrating individual excellence, PLAHS was proud to acknowledge staff members who reached significant employment milestones during 2025. Long service recognition was awarded to team members achieving 5, 10, 15 and 20 years of service, honouring their loyalty, dedication and ongoing contribution to the organisation and the community. These milestones represent years of commitment, professionalism and service, and reflect the strong relationships and continuity that help make PLAHS a trusted and valued Aboriginal Community Controlled Health Organisation.

Congratulations to all award recipients and long-service recipients on this well-deserved recognition. Each of these individuals has contributed to the success of PLAHS in their own unique way, and their dedication, passion and commitment embody the values that underpin our organisation. We thank them for the positive difference they make every day and look forward to continuing this proud tradition of recognising and celebrating excellence and service across our workforce.

MEDICAL ADMINISTRATION TEAM REPORT



LUKE SAMARAKOON

Practice Manager

The Medical Administration Team continued to play a vital role in supporting our clients to access healthcare services through high-quality administrative support and reliable transport services. As the first point of contact for many clients, the team worked hard to ensure a welcoming, culturally safe, and professional experience while assisting with appointments, enquiries, Medicare services, transport coordination, and client support activities.

Throughout the year, the reception team remained focused on providing efficient client-centred support while maintaining accurate records, coordinating appointments, and working closely with clinical staff to ensure smooth daily operations. Our transport service continued to be an essential part of client care, helping community members attend appointments and access healthcare services when transport would otherwise be a barrier.

The Medical Administration Team also continued to work closely with all departments across PLAHS to improve communication, support service delivery, and enhance the overall client experience. Through teamwork, dedication, and a commitment to continuous improvement, the team has strengthened both service delivery and operational efficiency during the year.

The team remains committed to providing high-quality administrative and transport services while continuing to identify opportunities to improve client access, service quality, and health outcomes for our community.

HIGHLIGHTS FOR 2025-26

7,389
PHONE CALLS ANSWERED

Our reception team helped clients with appointments, information, referrals, transport bookings and general health enquiries, all year round.

2,807
TRANSPORT SERVICES

Our transport team got clients safely to GP, specialist, allied health and other appointments, removing a real barrier to care.

IMPORTANT INITIATIVES WE SUPPORTED

- Enrolling community members in **MyMedicare**
- Supporting **Practice Incentives Program** (PIP) initiatives
- Managing **Authority to Obtain and Release** forms

10%
INCREASE IN MEDICARE INCOME

Better processes, accurate claiming and strong teamwork between admin and clinical teams lifted Medicare income on last year.

CHRONIC CONDITION SELF-MANAGEMENT TEAM REPORT



KINGSLEY BILNEY

Team Leader / Aboriginal Health Worker

The CCSM Team is currently made up of the following members:

- **Kingsley Bilney** – Team Leader / Aboriginal Health Worker
- **Winnie Santos** – Registered Nurse
- **Chris Barclay** – Registered Nurse / ITC
- **Correna Franklin** – Registered Nurse

We work closely with the broader Health Team to support key clinical duties within the community. As part of our structured approach, Tuesdays have been designated as dedicated days for GP Management Plan (GPMP) signoffs.

We schedule sessions with each GP throughout the month, providing clients with the flexibility to choose their preferred doctor. Over the past 12 months, our team has placed a strong focus on increasing the number of Care Plan renewals and reviews, ensuring that community members receive continuous, quality care.

We have undertaken a comprehensive review of the Care Plan document, ensuring it includes all relevant health information for each client. This includes immunisation records, diagnosed conditions, health goals, and details of past or upcoming specialist appointments. The aim is to keep each client's health at the centre of their personalised care plan.

The CCSM team manages all our clients living with chronic disease. Our main duties include:

CARE COORDINATION

Developing care plans for clients with conditions such as diabetes, heart disease, respiratory illness and kidney disease, coordinating referrals to specialists, allied health and support services, and following up on treatment and care.

HEALTH PROMOTION AND EDUCATION

Helping clients prevent and self-manage chronic disease, and promoting healthy choices including nutrition, physical activity, quitting smoking and cutting back on alcohol.

SCREENING AND EARLY DETECTION

Regular health checks and chronic disease screening, and identifying people at risk early so we can act sooner.

This collaborative effort improves the management of chronic conditions and reduces hospital admissions.

Specialist Support and Coordination

The CCSM team works collaboratively with visiting specialists to maintain high standards of care for our community:

- **Endocrinologist and Cardiologist**, Dr Hamish Eaton is managed by Winnie Santos. Dr Eaton, provides services every 3 months to the community.
- **Optometry Services,** with Dom Wilson is Managed by Kingsley Bilney. Monthly clinics are focused on annual reviews for clients with diabetes. When Dom is unavailable, we work in partnership with SpecSavers to ensure ongoing access to optometry services.
- **Respiratory Physician**, Dr Shah Shif is managed by Kerry Green (Health Team Registered Nurse), with spirometry testing support provided by CCSM team members Correna Franklin and Neil Dunning. This service supports clients with Asthma and Chronic Obstructive Pulmonary Disease (COPD).

Our goal over the next year is to continue to achieve KPI's and offer a high-quality service to the community.

Outreach Services

The CCSM team has also successfully delivered **two outreach services this year** to support clients who were unable to attend PLAHS. This initiative has helped improve access to care, ensuring that clients who face barriers to attending the service are still able to receive the support and healthcare they need.

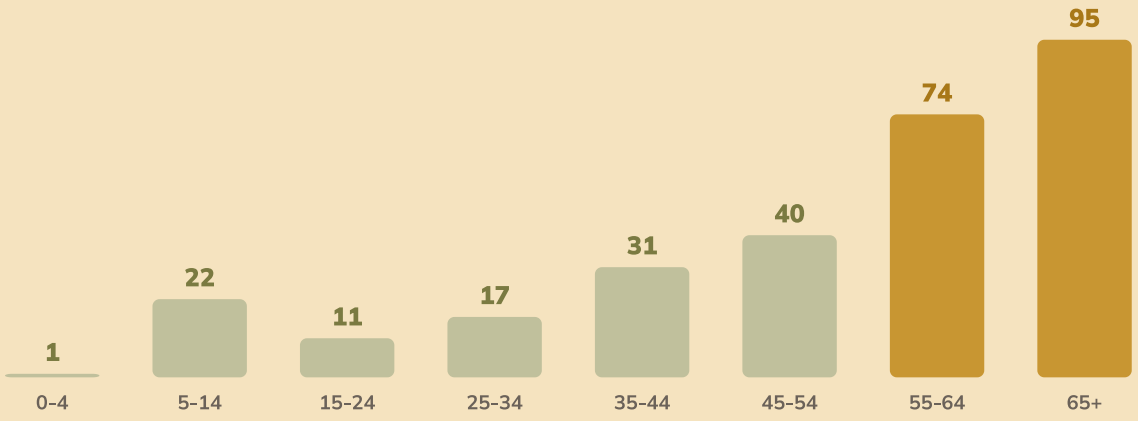
We believe both outreach services have been a great success and have demonstrated the importance of meeting our clients where they are and providing flexible, culturally safe and accessible care within our community.

A **big thank you to Dr Joseph Snyder** for his support and commitment to the outreach service and to the CCSM team. Your contribution has helped make these services possible and has made a positive difference for our clients and community.

GP MANAGEMENT PLANS BY AGE, 2025-26

291 plans completed
more than double 2024-25 (135)

58%
of plans were for clients aged 55+



GP MANAGEMENT PLANS 2025-26

291
PLANS COMPLETED
More than double the 135 in 2024-25

95
CLIENTS AGED 65+
The most plans (32.6%), then 55 to 64 year olds (74, or 25.4%)

58.1%
CLIENTS AGED 55+
169 plans across the two oldest age groups

131
DID NOT ATTEND
Reducing missed appointments is a key opportunity to improve access and engagement

CHILD PARENTAL HEALTH TEAM REPORT



JULIE GLASS

Program Manager Child & Maternal Health

The Child Parental Health (CPH) team continues to support families to meet the medical and developmental needs of women and children in our community. We provide child immunisations, developmental checks, child health checks, school screenings and women's health, as well as antenatal and postnatal care. We also run specialist clinics including paediatrics, ENT, audiology, speech therapy and dietetics, outreach clinics at PLCC and home visits for families who need them.

OUR YEAR IN NUMBERS

MUMS AND BABIES

250	antenatal midwife consults
147	postnatal midwife consults
24	births
245	women seen for women's health

GROWING UP STRONG

352	child health checks
92%	of children fully immunised
168	children screened at school
65	developmental screens (ASQ)

SPECIALIST AND ALLIED HEALTH

76	children seen by our paediatrician
58	children seen by ENT
33	children seen for audiology
76	allied health referrals for 0-4s

LEARNING TOGETHER

83	cervical screens
38	speech therapy consults
31	dietitian consults
24	food safety certificates

Partnerships for Mums and Bubs

A new Memorandum of Understanding (MoU) with Lincoln Medical Centre means our clients can now receive obstetric care from Dr Kay Ajao with GP shared care from Dr Judith Stanley.

We meet monthly with the Women's and Children's Hospital Aboriginal Family Birthing Team, and are working with Port Lincoln Health Service to strengthen Birthing on Country and introduce a Continuity of Care model of midwifery care.

Mia Haseldine has started Aboriginal Maternal Infant Care (AMIC) training through the Aboriginal Health Council of South Australia (AHCSA) with our Aboriginal Maternal Infant Care MoU in place.

Healthy Families

Parent education sessions on healthy cooking, lunchboxes and freezing meals drew large crowds, and 24 people gained their food safety and hygiene certificate through TAFE. Our Women's Health Day at Mallee Park welcomed 35 women, and BreastScreen SA visits are booked for December 2026 and March 2027.

Research

We continue to work with South Australian Health and Medical Research Institute (SAHMRI) and the Telethon Kids Institute on research into Body Mass Index (BMI), anaemia and gestational diabetes.

With Aboriginal Health Worker Shakaya Walsh joining us in February, the CPH team is now much closer to full staffing and well placed to keep supporting healthy mums, bubs and families in the year ahead.

HEALTH TEAM REPORT



SHANAE COULTHARD Heath Team Leader

CAITLIN CLAYER Clinical Lead

The Health Team

- **Natasha Johncock** (Aboriginal Health Practitioner)
- **Jerome Ah Kit Burgoyne** (Aboriginal Health Worker)
- **Isabella Coulthard** (Aboriginal Health Worker)
- **N'Ky Carbine** (Aboriginal Health Worker)
- **Jamelia Haseldine** (Aboriginal Health Worker Trainee)
- **Donna Sellen** (Registered Nurse)
- **Kerry Green (**Registered Nurse)

AHCSA Trainings:

Aboriginal Health Workers that completed or have started their Cert III and/or Cert IV training for 2025-26:

- **N'Ky Carbine** – completed has successfully completed his Cert IV this year in August. N'Ky has grown to be an amazing Aboriginal health worker.
- **Jamelia Haseldine** – commenced her Cert III in March 2026 and is set to complete in early 2027. Jamelia is showing her passion and eagerness to learn and provide the best care possible to community.

Health Checks:

398 Health checks completed for 2025-26

STI rates:

685 STI screenings completed for 2025-26

Women's Health Day was held in February 2026 at Mallee Park, providing women with access to a range of health screenings and educational resources. Services and information available on the day included STI screenings, cervical screening, contraception, the Tackling Indigenous Smoking (TIS) program and the impacts of smoking, pelvic floor exercises, and breast screening information. The event was highly successful and demonstrated strong collaboration between the Health Team, CMH, and SAWCAN teams, who worked together to deliver a valuable and engaging Women's Health Day for the community.

Men's Health Day was held in October 2025, where N'Ky and our STI Nurse Eloise, worked alongside SEWB Case Workers Fred and Chris to provide the men an STI day. Other staff such as Neil, was present to discuss Cancer screenings and Donna provided opportunistic vaccinations to community.

HIGHLIGHTS FOR 2025-26

398
HEALTH CHECKS
1 July 2025 to 30 June 2026

685
STI SCREENINGS
In clinic and at community events

356
DIPHTHERIA VACCINES
Given this year

278
VACCINATED AT TWO CLINICS
200 in June and 78 in August at Mallee Park





GP appointments

During the financial year, the following numbers show the amount of GP appointments where clients did not attend:

- General appointments - 1,317
- AHA appointment - 188
- GPMP appointment – 131

Visiting Specialists

As we have gone into the new financial year for 2026/2027, the graph below shows last year's number of visits that were funded through Rural Doctors Workforce Agency (RDWA).

Specialist	2025-26 visits	2026-27 visits
Hamish Eaton, Endocrinologist and Cardiologist	8	8
Shah Shif, Respiratory Physician	3	3
Heather Brownlee, Psychiatrist	10	10
Ana Tu, Psychologist	10	10
Dom Wilson, Optometrist	12	12
James Blewit, Physiotherapist	12	12
Damon Morrish, Podiatrist	12	12
Rachel Elovaris, Dietitian	9	9
Emily Verrier, Audiologist	4	4
Mark Thompson, Occupational Therapist	9	11
Dilip Kapur, Pain Specialist	11	No longer visiting

Strep A outbreak:

From August 2025 to early 2026, Port Lincoln ATSI community were faced with a Streptococcus outbreak which is the leading cause for Rheumatic Heart Fever and Rheumatic Heart Disease if left untreated. PLAHS were proactive with assessing, swabbing, treating and contact tracing those affected by the Strep A outbreak. PLAHS were provided with a new Point of Care testing machine where we can test for Strep A onsite, where we are provided a result within 20 minutes. The clinical teams have been able to opportunistically test:

- At School Screenings
- At GP appointments
- As walk ins with symptoms (Sore throat, sore joints ect.)

Diphtheria outbreak:

In April 2026, South Australia reported its first case of diphtheria in the APY Lands. Early guidance and support were provided to Aboriginal Community Controlled Health Services by Adelaide's Communicable Disease Control Branch and the Aboriginal Health Council of South Australia (AHCSA). As a result, PLAHS coordinated and delivered two vaccination clinics at Mallee Park, which were held in June and August 2026:

- Vaccination clinic in June 2026 (200 community members vaccinated)
- Vaccination clinic in August 2026 (78 community members vaccinated)
- In total PLAHS have provided 356 Diphtheria Vaccines this year.

OUR WISHLIST FOR 2026-27

Point-of-care testing for cervical screening, with results in one to two hours
Dental services at PLAHS

SOCIAL EMOTIONAL WELL BEING (SEWB) TEAM REPORT



WARREN CLEMENTS

SEWB Manager

The Social and Emotional Wellbeing (SEWB) team continued to provide culturally safe, trauma-aware and community-led services that support the health and wellbeing of Aboriginal individuals, families and communities. Through a holistic approach, the team delivered mental health support, counselling, family support, disability services, aged care support, health promotion and case management programs.

Throughout the year, the SEWB team supported community members through individual and family case management, coordinated care, referrals and wellbeing programs. Community activities included walking groups, men's and women's groups, aqua aerobics, art therapy, family events and workshops, helping to strengthen connection, resilience and social participation. More than 60 community members participated in a major wellbeing workshop during the year.

The team also oversaw a range of specialised programs, including the Tackling Indigenous Smoking (TIS) Program, Remote Community Connectors (NDIS), Elder Care Support Services and Culture Care Connect.

Together, these programs provided practical support, promoted healthier lifestyles, strengthened cultural connections and improved access to essential services for Aboriginal people across the region.

A significant milestone during the year was the transition of the SAWCAN portfolio to the leadership of Shanae Coulthard in February 2026. This change reflected the continued growth of the program and strengthened the organisation's commitment to leadership development and service excellence. The Board acknowledges the contribution of both Warren Clements and Shanae Coulthard in ensuring the ongoing success and growth of the portfolio.

The organisation remains committed to strengthening mental health services, expanding wellbeing initiatives and delivering culturally responsive, community-controlled programs that support healing, connection and improved outcomes for Aboriginal people and families.

YEAR AT A GLANCE

60+
WORKSHOP ATTENDEES
More than 60 people attended a major community wellbeing workshop

All year
COMMUNITY GROUPS
Walking groups, men's and women's groups, aqua aerobics, art therapy and family wellbeing activities continued all year

4
SPECIALISED PROGRAMS
Specialised programs delivered including TIS, Remote Community Connectors (NDIS), Elder Care Support and Culture Care Connect

Feb 2026
SAWCAN TRANSITION
SAWCAN portfolio successfully transitioned to Shanae Coulthard in February 2026

PLAHS WEEKLY PROGRAMS



GAGANDEEP KAUR

Health Promotion Officer

Women's Group

All community women are invited to join the PLAHS Women's Group every Wednesday. Each week, we enjoy a variety of activities including weaving, art and craft, and preparing a healthy lunch together before wrapping up the session.

It's a great space to connect, learn new skills, and support each other in a friendly and relaxed environment. New faces are always welcome!

- Day: Wednesday
- Location: Wellness Centre of PLACC
- Time: 11AM



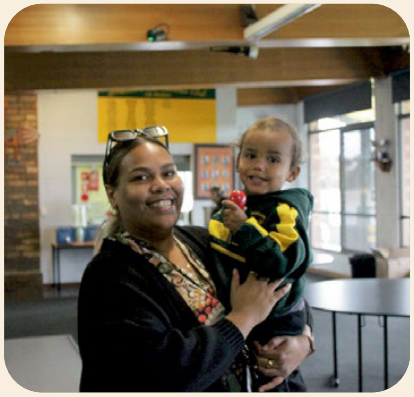




Women's Health Day

On 25 February 2026, PLAHS proudly celebrated Women's Health Day, bringing together women from the community to promote health, wellbeing, and empowerment. The event provided opportunities for health education, meaningful conversations, and access to support services. Participants engaged in a range of activities focused on improving physical, mental, and social wellbeing.

















Elder's Bingo & BBQ

The PLAHS Elders Care Team hosted a successful Elders' Bingo & BBQ, providing a welcoming opportunity for Elders to connect, socialise, and enjoy a day of fun and fellowship. Participants took part in bingo games, shared a delicious barbecue meal, and strengthened community connections in a supportive environment. The event reflected PLAHS's commitment to promoting the wellbeing, inclusion, and cultural respect of our Elders.









NAIDOC Week

Several activities organised throughout the NAIDOC week. Started from NAIDOC March followed by Community cookout and Elder's Lunch Day.

NAIDOC MARCH







COMMUNITY COOKOUT





SILENT DISCO



TIS School Program

The PLAHS Tackling Indigenous Smoking (TIS) Team delivered engaging school education sessions at Port Lincoln Primary School and Port Lincoln Garden School to raise awareness about the harmful effects of smoking and vaping. Through interactive discussions and age-appropriate activities, students learned about the health risks associated with tobacco use and e-cigarettes and the benefits of making healthy lifestyle choices.

These sessions encouraged students to develop knowledge and skills to make informed decisions, resist peer pressure, and promote smoke-free and vape-free environments within their communities. The initiative reflects PLAHS's ongoing commitment to supporting the health and wellbeing of young people through education and prevention programs.







Cancer Care Support Program

During FY2026, PLAHS continued to support Aboriginal and Torres Strait Islander community members through its Cancer Care Support Program. The team provided practical support to clients throughout their cancer journey, including care planning, transport assistance, appointment coordination, and help accessing treatment and support services. Cancer education resources were also developed to improve health literacy and help clients better understand their diagnosis and treatment options.

A strong focus was placed on increasing cancer screening and early detection through community outreach, health promotion activities, and partnerships with local service providers. Dedicated screening days, particularly for lung cancer screening, were established to improve access for community members. During the year, the program completed 12 Cancer Care Plans, supported 26 treatment appointments and 18 oncology appointments, and increased participation in cervical, bowel, lung and prostate cancer screening.

The program also partnered with Jillian Larking to create culturally appropriate cancer awareness resources, helping to raise awareness, encourage screening, and provide meaningful support to community members affected by cancer.







ANNUAL REPORT FOR SAWCAN

South Australian West Coast ACCHO Network (SAWCAN)

This year, Port Lincoln Aboriginal Health Service Ltd continued to be part of SAWCAN, working alongside ACCHOs across the Eyre and Far West Coast on the things we can do better together.

2025-26 was a big year for SAWCAN. We grew, we strengthened our regional programs and we continued to build what our ACCHOs first came together to create.

SAWCAN exists because our ACCHOs recognised that there are some things we can do better together. Across more than 1,300 kilometres, our role is to connect our services, build local capability, advocate with a stronger collective voice and find regional solutions to regional challenges.

This year, we continued to see what that looks like in practice. Our team grew to 17 people, with seven new positions recruited during the year. That growth has given us more capacity to support our ACCHOs, coordinate regional programs and respond to the

priorities our members tell us matter.

Local people. Local services. Regional strength.

A big part of SAWCAN's role is building capability across our region so that more knowledge, skills and support sit within our ACCHOs.

Our clinical workforce work is a good example. We now have 10 Aboriginal Health Practitioners across the SAWCAN region who have completed accredited immunisation provider training. That means more capability within our own services to provide culturally safe immunisation care and less reliance on visiting clinicians.

We have seen that same regional approach in aged care. Registrations through the My Aged Care portal increased by 200% this year, meaning more Elders across our region are now connected into the aged care system and able to access support. We also brought the Elder Care workforce together through regional workshops, strengthened knowledge of the changing aged care system and continued to advocate alongside Elders when the system hasn't worked as it should.

And our Strong Bubs Strong Families work continued to build child and family health capability across the region. All SAWCAN services are now using ASQ-TRAK developmental screening, with more than 350 screenings completed between 2023 and 2026. This means developmental concerns can be identified earlier and families can be connected with support sooner.

Putting community control into practice

Some of SAWCAN's most important work happens behind the scenes.

This year, we continued to strengthen the way research happens across our region. Our Research Framework gives ACCHOs a clear process to decide what research they want to be part of, whether it is right for their service and community and what researchers need to bring to the table.

For us, success isn't about getting as many research projects through the door as possible. It is about making sure the research that does happen is right for community, has a clear benefit and respects the authority of our ACCHOs.

Our framework is already changing the conversation. It gives ACCHOs a stronger position to consider community priorities, their own capacity and the benefit of proposed research before deciding whether to participate. It also takes much of the administrative burden of managing research approaches away from individual CEOs and services.

The same principle sits behind our broader role. We bring our ACCHOs together, share knowledge and resources, build partnerships, advocate on regional issues and create a collective voice when one is needed.

Not everything needs a regional solution. But where working together adds value, SAWCAN provides the structure to make it happen.

2026-27: A big year ahead

The next financial year will be a significant one for SAWCAN.

After growing under the auspice of Tullawon Health Service, SAWCAN is taking the next step and becoming an incorporated organisation in its own right.

For us, this is about much more than a new legal structure or a new ABN. SAWCAN was built from the ground up by our regional ACCHOs. We weren't created by government and we weren't designed somewhere else and brought into our region. Our ACCHOs saw a need, came together and built something that could work for them.

Incorporation is the next step in that story.

There is a lot of work that comes with becoming independent. We started that work well before the end of the financial year by strengthening our employment arrangements, governance, WHS and digital systems, and planning for our own payroll, finance and corporate systems.

But while the organisation around us is changing, what we are here to do isn't. We will keep working behind the scenes so our ACCHOs can remain firmly out front as the leaders of their communities. We will continue providing the vital wrap-around infrastructure to building local workforce, bringing opportunities and resources into our region, advocating together, sharing what works and making sure regional and remote Aboriginal communities have a strong voice in the decisions that affect their health.

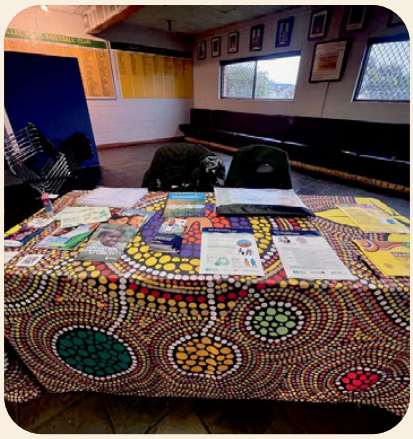
SAWCAN has never been about what we can do on our own. It is about what our ACCHOs can achieve together.

SAWCAN Expo


LEAGUE PREMIERS 1995
LEAGUE PREMIERS
YOUR SMOKING STORY
MALLEE PARK FOOTBALL CLUB
WANNA QUIT THE SMOKES OR VAPES?
PUYU WIYA
PUYU WIYA


ndis
ndis Connector


LEAGUE PREMIERS 1987
LEAGUE PREMIERS 1988
YOUR SMOKING STORY




Micro
39
ppm CO
6.87 %COHb
PLAHS




ELDER CARE
Elder Care Support
Elder Care Support


THE CONSEQUENCES OF SMOKELESS TOBACCO







FINANCIAL STATEMENTS

Port Lincoln Aboriginal Health Service Limited
Financial Statements
For the Year Ended 30 June 2026

ABN:79 159 053 254

STATEMENT OF PROFIT OR LOSS

STATEMENT OF PROFIT OR LOSS AND OTHER COMPREHENSIVE INCOME FOR THE YEAR ENDED 30 JUNE 2026

	Note	2026 $	2025 $
Grant Revenue	2	8,411,216	7,342,501
Other Revenues	2	1,236,708	1,105,603
Gain/(Loss) on Revaluation of Land and Buildings	8	(664,841)	-
Employee Benefits Expense	3	(5,824,352)	(5,510,755)
Supplies and Services	4	(2,808,159)	(2,481,051)
Depreciation and Amortisation	8	(337,388)	(258,430)
Current year operating surplus		13,184	197,868
Other comprehensive income		-	-
Total comprehensive income for the year		13,184	197,868

STATEMENT OF FINANCIAL POSITION

STATEMENT OF FINANCIAL POSITION AS AT 30 JUNE 2026

	Note	2026 $	2025 $
ASSETS			
CURRENT ASSETS			
Cash and cash equivalents	5	2,284,674	3,027,474
Accounts receivable and other debtors	6	865,030	98,892
Other current assets	7	25,374	25,374
TOTAL CURRENT ASSETS		3,175,078	3,151,740
NON CURRENT ASSETS			
Property, plant and equipment	8	6,912,229	7,330,491
TOTAL NON CURRENT ASSETS		6,912,229	7,330,491
TOTAL ASSETS		10,087,307	10,482,231
LIABILITIES			
CURRENT LIABILITIES			
Accounts payable and other payables	9	367,357	385,544
Unexpended grants		648,334	1,302,486
Lease Liabilities	10	70,313	76,932
Employee provisions	11	1,033,167	923,027
TOTAL CURRENT LIABILITIES		2,119,171	2,687,989
NON CURRENT LIABILITIES			
Lease Liabilities	10	107,817	1,981
Employee provisions	11	137,971	83,097
TOTAL NON CURRENT LIABILITIES		245,788	85,078
TOTAL LIABILITIES		2,364,959	2,773,067
NET ASSETS		7,722,348	7,709,164
EQUITY			
Retained surplus		7,722,348	7,709,164
TOTAL EQUITY		7,722,348	7,709,164

STATEMENT OF CHANGE IN EQUITY

STATEMENT OF CHANGES IN EQUITY FOR THE YEAR ENDED 30 JUNE 2026

	Retained surplus $	Total equity $
Balance at 1 July 2024	**7,511,296**	**7,511,296**
Comprehensive income		
Operating Surplus for the year	197,868	197,868
Total equity movements attributable to members of PLAHS	197,868	197,868
Balance at 30 June 2025	7,709,164	7,709,164
Balance at 1 July 2025	7,709,164	7,709,164
Comprehensive income		
Operating Surplus for the year	13,184	13,184
Total equity movements attributable to members of PLAHS	13,184	13,184
Balance at 30 June 2026	7,722,348	7,722,348

STATEMENT OF CASHFLOWS

STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 30 JUNE 2026

	Note	2026 $	2025 $
CASH FLOWS FROM OPERATING ACTIVITIES			
Receipts from funding bodies and customers		8,825,272	9,993,889
Interest received		117,325	82,214
Payments to suppliers and employees		(8,756,108)	(8,088,474)
Net GST paid to ATO		(444,539)	(517,536)
Net cash from/(used in) operating activities	**14**	(258,050)	1,470,093
CASH FLOWS FROM INVESTING ACTIVITIES			
Payment for property, plant and equipment	**8**	(372,522)	(624,669)
Net cash from/(used in) investing activities		(372,522)	(624,669)
CASH FLOWS FROM FINANCING ACTIVITIES			
Repayment of finance liabilities		(112,228)	(104,788)
Net cash from/(used in) financing activities		(112,228)	(104,788)
Net increase/(decrease) in cash held		(742,800)	740,636
Cash at beginning of the financial year		3,027,474	2,286,838
Cash at end of the financial year	**5**	2,284,674	3,027,474

BOARD OF MANAGEMENT FINANCIAL DECLARATION

Port Lincoln Aboriginal Health Service Limited
For the year ended 30 June 2026

DIRECTORS DECLARATION

In accordance with a resolution of the Directors of Port Lincoln Aboriginal Health Service Limited, the Directors of the registered entity declare that, in the Directors' opinion:

1 the financial statements and notes satisfy the requirements of the Australian Charities and Not-for-profits Commission Act 2012.

a. comply with Australian Accounting Standards - Simplified Disclosures applicable to the entity; and

b. give a true and fair view of the financial position of the registered entity as at 30 June 2026 and of its performance for the year ended on that date.

2 There are reasonable grounds to believe that the registered entity will be able to pay all of its debts, as and when they become due and payable.

Signed in accordance with subsection 60.15(2) of the Australian Charities and Not-for-profits Commission Regulation 2022.

.....

Director

.....

Director

Dated this 30th day of September 2026

AUDITOR'S INDEPENDENCE DECLARATION

Port Lincoln Aboriginal Health Service Limited
For the year ended 30 June 2026

AUDITOR'S INDEPENDENCE DECLARATION

In accordance with Subdiv 60-C 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 Limited.

As lead Audit Partner for the audit of the financial statements of Port Lincoln Aboriginal Health Service Limited for the year ended 30 June 2026, I declare that, to the best of my knowledge and belief, during the year ended 30 June 2026 there have been no contraventions of:

a). the auditor independence requirements of the *Australian Charities and Nor-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: 28th day of September 2026

INDEPENDENT AUDITOR'S REPORT

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Accountants, Auditors
& Business Consultants

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ABN: 89 656 702 886

INDEPENDENT AUDITOR'S REPORT

To the members of Port Lincoln Aboriginal Health Service Limited

Report on the Audit of the Financial Report

Audit Opinion

We have audited the financial report of Port Lincoln Aboriginal Health Service Limited (the registered entity), which comprises the statement of financial position as at 30 June 2026, 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 material accounting policy information, and the board of directors' declaration.

In our opinion, the accompanying financial report of the registered entity 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 registered entity's financial position as at 30 June 2026 and of its financial performance for the year then ended; and

(ii) complying with Australian Accounting Standards – AASB 1060: *General Purpose Financial Statements - Simplified Disclosures for For-Profit and Not-for-Profit Tier 2 Entities* and Division 60 of the *Australian Charities and Not-for-profits Commission Regulation 2022*.

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 registered entity in accordance with the ACNC Act, 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. We have also 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.

Information Other than the Financial Report and Auditor's Report Thereon

The directors are responsible for the other information. The other information comprises the information included in the registered entity's annual report for the year ended 30 June 2025, but does not include the financial report and our auditor's report thereon.

Our opinion on the financial report does not cover the information and accordingly we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial report, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial report or our knowledge obtained in the audit or otherwise appears to be materially misstated.

If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Responsibility of the Directors for the Financial Report

The directors of the registered entity are responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards – AASB 1060: *General Purpose Financial Statements - Simplified Disclosures for For-Profit and Not-for-Profit Tier 2 Entities* and the ACNC Act and for such internal control as the directors determine 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 directors are responsible for assessing the registered entity'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 the directors either intend to liquidate the registered entity or to cease operations, or have no realistic alternative but to do so.

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 registered entity'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 the director'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 registered entity'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 registered entity 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.

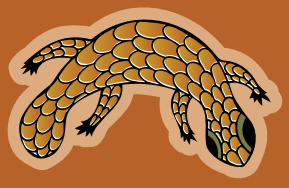
We communicate with the directors regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

GALPINS ACCOUNTANTS, AUDITORS & BUSINESS CONSULTANTS

Jessica Kellaway CA, CPA, Registered Company Auditor
Partner
30 / 09 / 2026



Artwork Credit : Jillian Larking



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