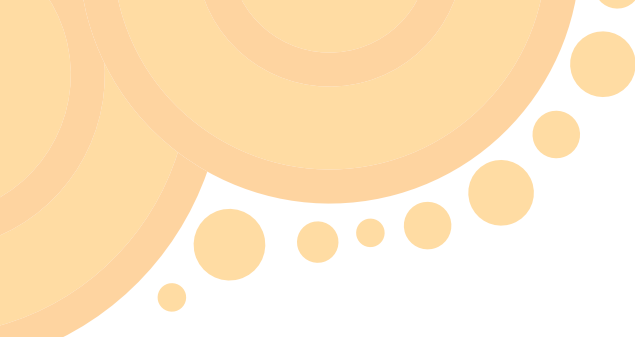




ANNUAL REPORT 2016 / 2017



Better Health, Better Living, Longer Life
Goondir.org.au



Annual Report for Goondir Aboriginal and Torres Strait Islander Corporation for Health trading as
Goondir Health Services for the year ending 30 June 2017

ABN 28 532 578 379

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Quality Accreditation Certification

Institute for Healthy Communities (IHCA), Certificate # QMS 0137 (AS/NZS ISO 9001:2015)

AGPAL Accredited General Practice, Dalby Practice Id # 3516

AGPAL Accredited General Practice, St George Practice Id # 6830

AGPAL Accredited General Practice, Oakey Practice Id # 9968

Qld Dept of Transport and Main Roads, Transport Operator Accreditation Certificate # 900379673

Registered Training Practices

Generalist Medical Training (GMT)

Generalist Practice Training Queensland (GPTQ)

Remote Vocational Training Scheme (RVTS)

Financial Institution

Heritage Bank

Solicitor

Australian Business Lawyers and Advisors
Cliff Hartley-Holl

Auditor

Audit Solutions Queensland, a division of McConachie & Steadman

Acknowledgements

Goondir Health Services gratefully acknowledges the financial support from:

AUSTRALIAN GOVERNMENT DEPARTMENT OF HEALTH

AUSTRALIAN GOVERNMENT DEPARTMENT OF THE PRIME MINISTER AND CABINET

AUSTRALIAN GOVERNMENT DEPARTMENT OF SOCIAL SERVICES

THE PHARMACY GUILD

QUEENSLAND HEALTH

DARLING DOWNS AND WEST MORETON PRIMARY HEALTH NETWORK

WESTERN QUEENSLAND PRIMARY HEALTH NETWORK

CHECKUP

TOOWOOMBA REGIONAL COUNCIL

WESTERN DOWNS REGIONAL COUNCIL



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Community Controlled Health Care

By Gary White, Chairperson

The National ATSI Health Plan 2013-2023 highlights the vision that the Australian health system is free of racism and inequality and all Aboriginal and Torres Strait Islander people have access to health services that are effective, high quality, appropriate and affordable. Together with strategies to address social inequalities and determinants of health, this provides the necessary platform to realise health equality by 2031.

Goondir is committed to doing its part to realise this vision. We maintain four clinics across South West Queensland - Dalby, Oakey, St George and Mobile Medical Clinic. Our local presence enables our clients to have timely access to health care as they require it, and that hospital admissions are avoided. Where possible we address the social determinants of health to better address health issues by adopting and applying a holistic approach.

We work to build and sustain relationships with other primary health care organisations and providers. This includes two Primary Health Networks, two Hospital and Health Services, a private hospital, visiting Specialists and Allied health providers, community organisations, three Councils and other government departments.

We support local, state and national initiatives which aim to increase our community's understanding of various issues and promoting the importance of healthy lives and healthy life choices.

The 2016-2017 period witnessed Goondir strengthening its service delivery and continuing to achieve its vision. As a primary health care provider since 1994 we have a track record of being the preferred primary health care service provider to the Aboriginal and Torres Strait Islander people across our service region. This is in part, due to the importance we place on following through with implementing those strategies that are set out in the company's 2016 – 2021 Strategic Plan.

This report demonstrates our achievement and I appreciate the continued support of my fellow Board Members, of our staff, providers, funding bodies and supporting partners. I look forward to continuing to be of service to the Goondir community.

Aboriginal health means not just the physical well-being of an individual but refers to the social, emotional and cultural well-being of the whole Community in which each individual is able to achieve their full potential as a human being, thereby bringing about the total well-being of their Community."

National Aboriginal Health Strategy 1989

Vale Clifford Hartley-Holl

It was with sadness that Goondir's Board Member Mr Cliff Hartley-Holl passed away on 27th August 2017. Cliff had a long-serving involvement in the direction of Goondir. He initially provided legal advice through his work with Wakka Wakka Legal Service, and then joined the Board as a Skills Based Director. Cliff is survived by his wife Sandy and 3 children.

*L-R Cliff Hartley-Holl,
Gary White, Floyd Leedie*



GOONDIR VISION: To improve the health and well-being of Aboriginal and Torres Strait Islander people to a standard at least equal to that of the wider Australian community by providing holistic health care and medical services that meet best practice standards.

GOONDIR MISSION: To equip the organisation with the appropriate medical facilities and resources to deliver programs in a culturally appropriate and sensitive manner to improve the health and well-being of all Aboriginal and Torres Strait Islander people in the service region.

GOONDIR CORE VALUES:



COOPERATION

- We value our commitment to working in collaboration with our communities and other service providers to identify needs, address gaps and develop community capacity. An important feature of our organisation is our belief in community controlled governance.



RESPECT

- We value respecting our culture and that of each individual within the communities we service, dignity, individuality and the rights of our clients. We will demonstrate compassion for each individuals concerns and needs and provide services in a non-judgemental and confidential manner.



QUALITY

- We value providing the highest quality health care services that meet the expectations of our clients, communities, and peers. We will demonstrate our ability to deliver high quality health care and services through continuing to maintain accreditation status across the organisation.



LEARNING

- We value continuous learning and ongoing development. We will promote a culture of learning and innovation among our staff, clients and partners.



DIVERSITY

- We value the principles of diversity and equity in our interactions with each other, our clients and our communities.

A Local Team Providing Local Services

Goondir Health Services has a rich tradition of providing holistic primary health care for more than two decades. At the time it was established in 1994 the service provided health care from Toowoomba to St George. In 2005 the Toowoomba clinic was transitioned to the local community and Carbal Medical Services commenced. Today Goondir provides rural and remote primary health care from its 4 clinics – Oakey, Dalby, St George and the mobile service.

Goondir's team of clinicians and administrative staff is paramount to its success in providing local primary health care. 60% of its personnel identify as Aboriginal and/ or Torres Strait Islander and a range of training opportunities are made available to support staff in their roles. The training offered to staff range in time from one day short courses to 2 years for our Registrars studying under the Remote Vocational Training Scheme (RVTS). Another training program which has continued to benefit Goondir and its staff is the Commonwealth Department of Health Indigenous Remote Service Delivery Traineeship (IRSDT) program. 6 traineeships were offered during the year in the areas of Advanced Diploma in Management & Leadership, the Diploma in Management & Leadership, and Certificate IV in Business.

Goondir was also successful in receiving funding from the Western Queensland Primary Health Network (WQPHN) to implement training and professional development activity to address cervical screening, leadership and management, attendance at the General Practice and Conference Exhibition, and the Quality Assurance for Aboriginal and Torres Strait Islander Medical Services forum in Darwin. The leadership and management training was delivered by Healthy Practices Consulting to Goondir's management team who reflected on their management style within the Goondir team and reaffirmed what drove members to work together to realise the vision of the organisation – they dream big, do stuff and have fun!

Goondir's management team participating in training led by Healthy Practices Consulting. The diagram captures the traits of the organisation. Put simply we dream big, do stuff and have fun!



Goondir's Board and Executive who completed the Australian Institute of Company Directors Course



In strengthening its organisational governance, Board and Executive participated in the Australian Institute of Company Directors Course held at QAIHC.

Goondir supports the placement of medical and nursing students as an opportunity to expose them to rural and remote health as well as expose them to the range of options available in Aboriginal Medical Services.

This support includes QRME which delivers Griffith University's Rural Longlook program, and GP Registrar placements through General Practice Training Queensland (GPTQ), General Medicine Training (GMT) and the Remote Vocational Training Scheme (RVTS).

Former Dalby Clinic Manager Ethel Hayden welcomes Charlotte Brick a final year medical student placed by QRME



Dr Alma Vaa, RVTS



During the year the organisation was identified as an affiliate to a successful consortia bid between the University of Queensland (UQ), the University of Southern Queensland (USQ), the Darling Downs Hospital and Health Services (DDHHS), and the South West Hospital and Health Services (SWHHS), to deliver the Rural Health Multidisciplinary Training (RHMT) Program. The program will provide the opening for additional allied health student placements at Goondir's clinics.

Providing services across 3 rural and remote sites limits staff interactions. However Goondir remains committed to ensuring that at least annually the full Goondir team get together. The team once again returned to Mapleton in December where they were exposed to professional development, cultural awareness and team building activities.

We value the education opportunities provided by other organisations and regularly have clinicians participate in the Primary Health Networks Chapter and education events, as well as sessions implemented by Heart of Australia and similar bodies.

We recognise the value of flexible and support working environments through offering salary sacrifice, full-time and part-time working arrangements, and study and leave opportunities. We also continued to implement the Employee Assistance Program with CatholicCare to provide all staff with access to confidential mental health support.

IMPROVING THE HEALTH OF OUR CLIENTS

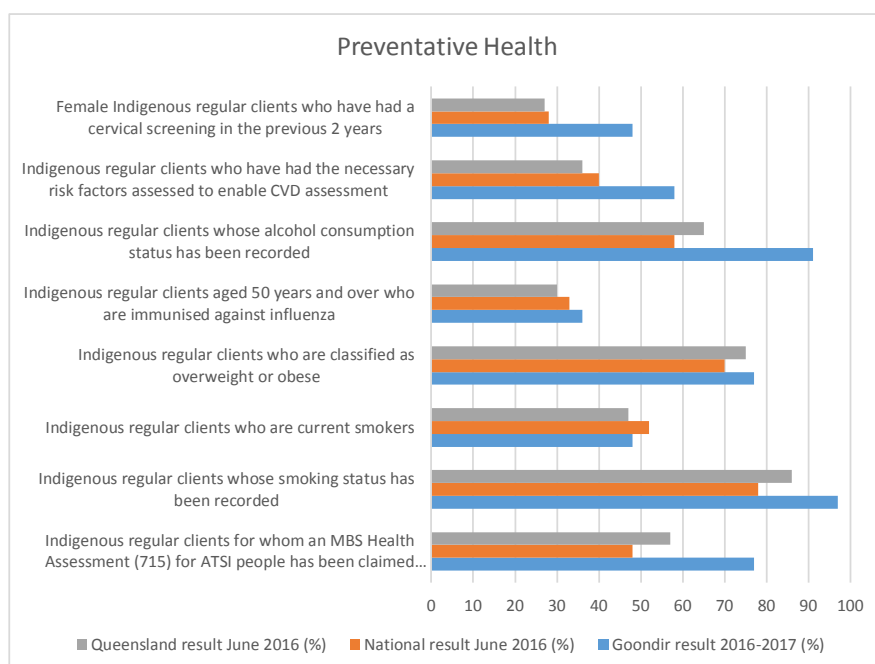
A QUICK SNAPSHOT

- 6.7% of Goondir's region identify as Indigenous. This is above the state and national rates.
- 94.5% of the Indigenous population in the region access Goondir's services
- Client numbers increased by 61.6% compared to 2015-2016
- 715 health assessments increased by 60.5% compared to 2015-2016
- GP Management Plans and Team Care Arrangements increased by 46.2% compared to 2015-2016

*Federal representatives
Assistant Minister for Rural Health
Dr David Gillespie and Federal Member for
Maranoa view Goondir's state of the art clinic with
Dr Shahid Waheed*



Goondir monitors performance on a monthly basis against State and National datasets. As demonstrated in the following table highlighting preventative health activity, it has strong performance by exceeding the national and state results in a number of areas including Indigenous clients aged over 15 years who have had a health assessment, recording of smoking and alcohol consumption, assessment of cardiovascular disease risk factors, and cervical screening within the past 2 years. It is noted that a greater percentage of Goondir's Indigenous regular clients are identified as overweight or obese when compared to State and National data.





BIG BUDDY PROJECT

The Big Buddy Project continued in its second year of operations with funding from the Department of the Prime Minister and Cabinet (DPMC) under the Indigenous Advancement Strategy (IAS). The Project supports empowerment of Indigenous youth through consistent mentorship, educational support, social interaction and improving life skills.

A wide variety of innovative activities were planned and implemented for Dalby and Oakey youth by a Project Coordinator with support from Program trainees.

During the year the Project extended its resources and stakeholder engagement to enable youth to acquire extra skills and certificates to better their employment opportunities including but not limited to:

- Developing money management, time management, building self-esteem, making interpersonal relationships, hygiene awareness, and connecting with community are all gained from working on the Big Buddy Beans coffee van.
- Big Buddy Beans attended over 20 events, both locally and across the wider region.
- Updates engaging over 50 youth for Dalby and Oakey in CPR and workshops addressing current issues including alcohol and drug use, suicide, depression and anxiety awareness. Gaining a nationally recognized certificate.
- Dalby youth participated in a Responsible Service of Alcohol course, receiving a nationally recognized certificate.
- An Oakey record studio assisted in the recording of 8 Oakey youth producing a CD of them singing.
- Dalby and Oakey youth introduced Ibero, an interactive health computer software tool, to mentors, peers and community at over 10 events.
- Big Buddy youth earn rewards for participation and through this were able to go to Brisbane to have lunch with an NRL player, visit Southbank, attend an NRL game, be challenged by the inflatable toys at the Oakey and Dalby Aquatic Centres, spend a day at Wet n Wild Theme Park on the Gold Coast.
- 4 Dalby youth were selected to compete in a State PCYC Beach Touch Footy held annually on the Gold Coast.
- Participants have attended over 80 activities for Dalby and Oakey, hosted by the Big Buddy Program. Numbers continue to grow with over 150 registered Big Buddy members.
- Mentors also see a growth in numbers with 57 registered to mentor our youth in Dalby and Oakey.
- Guest speakers from NRL, Max Employment, GP's, Aboriginal Health Workers (AHW's), Admin Professionals to name a few have attend regular sessions with the Big Buddy participants.
- Engagement with local hairdressers and skin technicians in Dalby and Oakey tutored 40 youth about self-care and employment opportunities.
- Youth and community continue to engage social media to keep updated and celebrate achievements by the Big Buddy Program.
- Entry of the 1928 Chevy Truck Big Buddy Beans mobile coffee van into the Toowoomba Carnival of Flowers Parade. The Gira Gira Womens Group and the Mt Lofty Aged Care Facility contributed to the creation of the floral arrangements. Youth led the Big Buddy entry and were attended by participants that included Selwyn Button Assistant Director General State Schools Indigenous Education, Greg Nielson Acting Executive Director Mental Health, and Mabrey Fogarty Goondir Board member.

- Rolled out the Big Buddy Beans social enterprise activity for the first time at the Cherbourg Rodeo. The Big Buddy kids grew in confidence as the day and sale of food and drinks went by and resulted in them turning over nearly \$1,000 in a 3 hour trading period.
- Program was featured on Channel 7 Local News in November, promoting the Young Endeavour activity and program aims. The feature promoted the 7 Big Buddy participants who were flown to Western Australia to set sail on a 10 day sea voyage from Exmouth to Freemantle. One of our youth stole the award from the other youth participants for displaying the best leadership and teamwork qualities.

A highlight during the year was a ministerial visit from Dr David Gillespie MP (Previous Assistant Minister for Rural Health, now Assistant Minister for Health); David Littleproud MP Member for Maranoa; and Senator Barry O'Sullivan. Goondir hosted the tour of its Dalby clinic and UQ Dental Facility, and provided an overview of the Big Buddy Program. The party was impressed with the opportunities afforded to youth through the Federal funding investment.

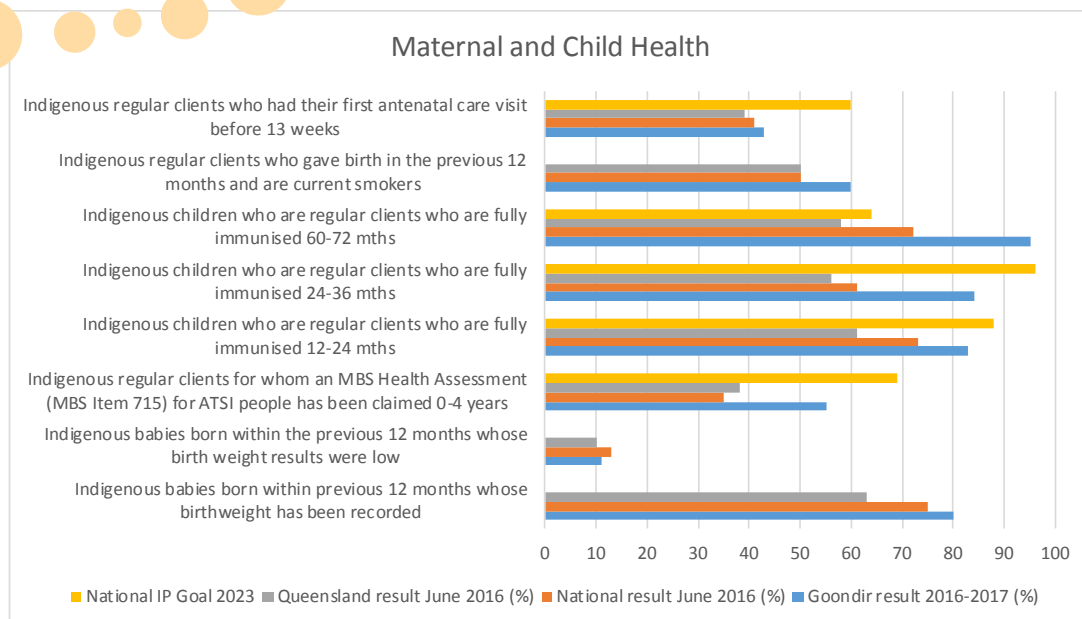
The benefits of assisting youth to get to and from events resulted in Goondir purchasing a bus. Since taking delivery in March 2017, the bus has been seen at a number of community events and raised awareness of Goondir and the work it undertakes in the region.

Viewing the Big Buddy's Beans mobile coffee service are Goondir Board Member John Walker, David Littleproud MP, EO Louise Sanderson, Minister Dr David Gillespie, CEO Floyd Leedie and Senator Barry O'Sullivan



CHILD & MATERNAL HEALTH SERVICES

Goondir's child and maternal health services are delivered as a holistic, family-centred, and culturally appropriate service. Engaging with families and ensuring children and mothers feel safe and comfortable with the care provided leads to increased uptake and satisfaction of services. As demonstrated below Goondir's performance has exceeded the State and National performance in a number of areas including the provision of 0-4 year old health assessments, the number of children fully immunised at milestones up to 4 years of age, and the provision of antenatal care prior to 13 weeks. Some focus is required to address Indigenous clients who had given birth in the previous 12 months who are current smokers.



The Big Buddy Project continued in its second year of operations with funding from the Department. The number of women smoking during pregnancy is greater than the nKPI to which the organisation has responded by upskilling the clinical staff in the area of smoking cessation. The Dalby Midwife has been supported by the organisation to become a Tobacco Treatment Specialist with a formal Smoking Cessation Program (SCP) under development. Oakey's SCP is delivered by a visiting pharmacist and smoking cessation specialist.

Strategies used by Goondir's clinical team to Close the Gap and ensure optimal health outcomes can be reached also include:

Provision of quality antenatal and postnatal care in all clinics.

- Promotion and support of breastfeeding in line with the World Health Organisation recommendations, and referring clients to their GP and/or Lactation Consultant if required. Increasing parent's knowledge of the benefits of breastfeeding at each encounter including the clinic, the hospital, the home or at the Wandir Gunde playgroup.
- Referring clients to services as required including GP, allied health, specialist, social emotional and wellbeing, and telehealth services.
- Support for alcohol and substance misuse
- Providing immunisations
- Enabling parents to establish and / or expand their social networks through health promotion activities, Wandir Gunde Playgroup and the Big Buddy Program.

Visiting allied health and specialist services complement the care provided by Goondir's Doctors, Child and Maternal Health Nurse and Aboriginal Health Workers. Visiting providers include a Paediatrician (one of which was placed through the St Vincent's Private Hospital Toowoomba), Speech Pathologist and the Indigenous Respiratory Outreach Care (IROC) program which aims to provide specialist respiratory services targeting birth to 18 years. This service is supported by our clinical team and offers 2-3 visits by specialists each year, reducing the need to travel to tertiary centres. The IROC service also provides patient education sessions, after hours lectures and community sessions.



Patsi Mawn, Jenny, Dr Ross Sellars and Registrar Dr Muthanna



Members of Goondir's Dalby and St George clinics attended the IROC program forum in Brisbane in June.

WANDIR GUNDE PLAYGROUP

Goondir continues to service the Dalby community under various Indigenous Advancement Strategy funded projects. The playgroup provides support for Indigenous parents, carers and families to come together regularly and promote healthy, happy families.

With the engagement of a Dalby State School employee as a part time Coordinator for the project has enabled over 20 families to meet weekly and interact with others from the community.

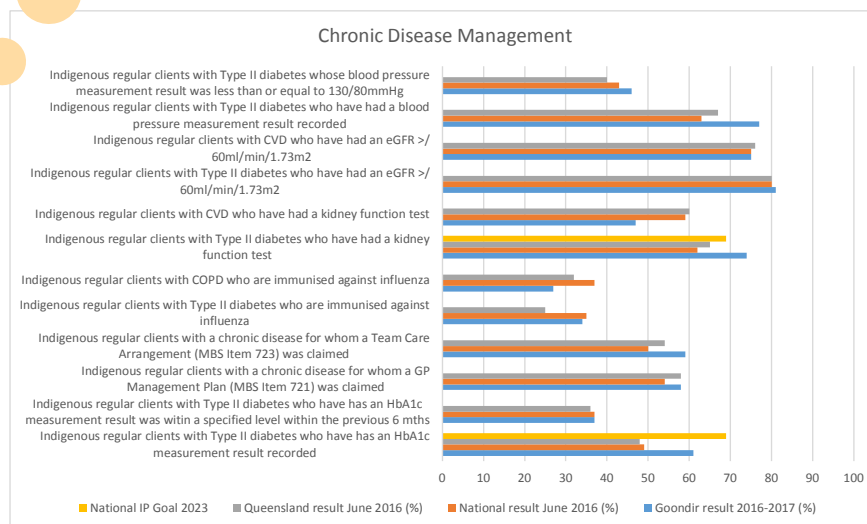
They are regularly visited by many guest speakers including UQ Dentists, Goondir's Child & Maternal Health Nurse, Aboriginal Health Workers, and Librarians. These interactions set to prepare the children and their carers for transitioning to kindy and prep.

Several activities have seen the participant numbers grow including a visit to the Darling Downs Zoo, Dalby Aquatic Centre for swimming lessons, shopping trips to the local fruit market, walks to Thomas Jack Park for a BBQ and a workshop hosted by Playgroup Queensland.

Playgroup have participated in the local Community Day, Close the Gap and NAIDOC celebrations. Through the success of the 5 graduating 5year old children into Prep earlier this year the wider community can see it is a great benefit for the Indigenous children to attend this playgroup. The teachers have noted the playgroup children are more settled with well-defined fine motor and social skills. This alleviates immense pressure from the family and gives the child a better start for their educational future.

CHRONIC DISEASE SERVICES

Goondir has continued to respond to the increasing burden of chronic disease though a concerted effort in health checks, GPMP's, TCA's and health education/promotion services and activities. As demonstrated in the following table, it has performed strongly against State and National data including an improved reporting of Type II diabetes patients who have had an HbA1c measurement and kidney function test, clients with Type II diabetes who have had a blood pressure management and who have a result less than or equal to 130/80mmHg. Increased focused is required for COPD clients requiring influenza immunisations and clients with cardiovascular disease who require a kidney function test.



The 715 health checks provide the central point for Goondir's clinicians to assess our patient's health and implement strategies to improve health outcomes. As an added incentive to getting the health checks, Goondir provided clients with a broader range of incentives by introducing our deadly leggings, singlets and shorts.



The provision of allied health and specialist services in Goondir's Dalby, Oakey and St George clinics is made possible through a mixed model including:

- Placement of contracted allied health professionals and specialists by CheckUP under the Medical Outreach Indigenous Care Program, Rural Health Outreach Fund, Visiting Optometrists Scheme and Healthy Ears Program. Goondir actively provides input into identifying health needs and ensuring that service delivery is responsive and appropriate. Professionals engaged to deliver services in Goondir's clinics have included a Sonographer, Psychologist, Respiratory Physician, Dermatologist, Paediatrician, Ophthalmologist, Cardiologist, Respiratory Physician, Audiologist, Ear Nose and Throat Physician, Diabetes Educator, Endocrinologist, Allied Health Assistant, Occupational Therapist, Speech Pathologist, Physiotherapist, Dietician, Exercise Physiologist, and Podiatrist.

- Placement of allied health professionals by the Darling Downs Hospital and Health Services (DDHHS) in Goondir's Oakey clinic. This arrangement provides a pharmacist, dietitian and podiatrist.
- Placement of a chronic disease nurse into our St George Clinic by the South West Hospital and Health Services.
- Funding of a Care Coordinator by the Darling Downs West Moreton Primary Health Network to cover the Western Downs region.
- Funding of a Care Coordinator by the Western Queensland Primary Health Network to cover the Balonne region. The funding is provided under the Nukal Murra Agreement, an alliance of the Western Queensland Primary Health Network and all Aboriginal and Islander Community Controlled Health

Services in the Primary Health Network region. Nukal means 'plenty or many' and Murra mean 'hand/s'. Used together Nukal Murra defines the leadership and collaboration across the Western Queensland Aboriginal and Islander Community Controlled Health Services and their joint aspirations. The establishment of the alliance follows the PHN considering findings from the Nous Review and identifying that a preferred provider relationship with all Aboriginal and Islander Community Controlled Health Organisations. It represents a benchmark for other PHNs to effectively progress Indigenous health, recognise ATSICCHS as the primary providers of care for Indigenous people, and limit the competitive processes.

- Retinal cameras by the Indigenous Diabetes Eyes and Screening (IDEAS) program in our Dalby and St George clinic. This service detects diabetic retinopathy which if left untreated will result in loss of vision. Treatment is available through the IDEAS mobile clinic staffed by specialists. The IDEAS program also provides free prescription glasses for patients.
- Referral to the mobile cardiology service Heart of Australia which regularly visits Dalby and St George.
- Implementation of the Suga Shakers diabetes support group in Dalby providing healthy lifestyle education, exercise and diabetes education

A key new initiative in the Darling Downs region is the Diabetes Model of Care Project an innovative pilot project between the DDHHS, Goondir (as the lead Aboriginal Community Controlled Health Service), Queensland Ambulance Service, Tunstall's and general practice. The project removes service access barriers by providing relevant local care aimed at reducing acute hospital admission for Aboriginal and Torres Strait Islander diabetics and increasing their uptake of community services. This project is transforming the way DDHHS operates to provide the "right care", in the "right place", at the "right time".

Lyndall De Marco CEO IDEAS,
Floyd Leedie CEO Goondir, Thalop Ahmat CEO Bidgerdii
Community Health Service and Selwyn Button
Former CEO QAIHC, attend IDEAS program event at
Government House in April.

A Patient Journey Coordinator hosted by Goondir in Dalby has been appointed and coordinates a virtual team of across the DDHHS region. The team includes Health Workers from the PHN, AMS' and DDHHS' 19 Hospitals. Client referral has been well supported and leading to client improvements and positive feedback from clients and clinicians. A credentialed Diabetes Educator also supports the program and regularly attends Goondir's Dalby clinic, with Goondir's Oakey clinic accessing these services from Toowoomba.

During the year, Goondir's CEO was a member of the Project Governance Committee, and Goondir's Executive Officer was a member of the Project Working Group.

As well as providing this extensive range of health services in its model of care, external service providers are also required to use its Patient Information Recall System (PIRS). This requirement ensures the creation of a central client electronic health record that assist Goondir's clinicians to maintains its objective to improve client focused care.

COMMUNITY HEALTH PROMOTION

Goondir's team implement complementary promotion activities to support targeted campaigns. During the year community promotion activities included but not limited to:

- Flu Shots in each clinic, May
- Reconciliation Week, May
- Sorry Day, 26 May
- Blue Dress Day, April – in support of the Dalby State School which was fire damaged.
- National Close the Gap Day, 17 March. Celebrations included a Close the Gap Indigenous Health Expo at the Toowoomba Base Hospital on 16 March which was attended by other Aboriginal and Islander Community Controlled Health Services and primary health care providers across the region.
- International Women's Day "Be Bold for Change", 8 March
- Registration for the Medicare Indigenous Health Incentive, November
- Mini-Field of Women for Breast Cancer Support, October
- RUOK, Oakey September
- Women's Health Week, 5-9 September
- International Indigenous People's Day, 9 August
- National Aboriginal and Torres Strait Islander Children's Day, 4 August
- Jeans for Genes Day, 1 August
- NAIDOC (National Aboriginal and Islander Day of Celebration) Goondir worked in collaboration with the Darling Downs Hospital and Health Services (DDHHS) to provide NAIDOC activities in Dalby, Oakey, Tara, Chinchilla and Miles from 4-7 July. NAIDOC celebrates the history, culture and achievements of Aboriginal and Torres Strait Islander peoples. The activity was supported through funding by the Department of the Prime Minister and Cabinet.
- National Diabetes Week, July



Dalby staff supporting Blue Dress Day in aid of the Dalby State School which was fire damaged in April 2017

The St George Dental Clinic commencing operations in June. Pictured L-R Alisha Azam (5th year BDSc UQ student), Madeline Worboys (Clinic Coordinator), Christine Cui (5th year BDSc UQ student), Jun Hur (5th year BDSc UQ student), Chris Lamb (GHS Client), Dr Derek Lewis (Supervising Dentist) & Jarod Duiker (GHS Client).



DENTAL SERVICES

It was pleasing to see the University of Queensland (UQ) School of Dentistry commencing operations in St George in June. The 4 chair dental training facility is an extension to Goondir's St George clinic, with Goondir providing reception services for the dental facility. Since opening the facility has been well attended by community members, and complements the work undertaken in the Dalby 5 chair dental clinic.

A rotational service is provided in St George until a permanent Supervising Dentist is recruited. In the interim Dr Derek Lewis has been leading the dental team. An official opening was scheduled to be held in November 2017.

Further information on the School of Dentistry is available at <https://dentistry.uq.edu.au/> Prime Minister and Cabinet.

- National Diabetes Week, July

MOBILE MEDICAL CLINIC

The AGPAL accredited Mobile Medical Clinic (MMC) continued to provide regular outreach services and health promotion activities to Oakey, Dalby, Tara, Chinchilla and Miles. By invitation, the clinic also attended health assessments and health education for Clontarf students at the Kingaroy and Dalby State High Schools. The MMC is funded by the Queensland Health Department. The project is supported by the DDHHS who under an agreement provide access for the service at their hospital facilities. Rotational visits to the surrounding communities are planned and coordinated by the MMC Team to occur every second week.

The provision of health services through the MMC is aligned to the National Aboriginal and Torres Strait Islander Health Plan 2013 – 2023. Whole-of-life cycle health interventions are made accessible by the MMC team which comprises of a G.P. (dual employed by Goondir and DDHHS), an Aboriginal Health Worker, Registered Nurse and when required a Social Emotional Wellbeing Counsellor. The service includes a particular focus on prevention and early intervention to reduce chronic health conditions and mental health conditions and illnesses. Services provided through the MMC include 715 health checks, social emotional and wellbeing support, GP management plans, women's health checks, sexual health education, child hearing checks, script clinic, integrated care support, dental review and referrals.

Positive client feedback for the service was received and during the year, 576 people attended the clinic representing 1,704 episodes of care.

MOBILE WOMEN'S SERVICE

Following the CheckUP/ QAIHC Needs Assessment, Goondir was contracted by CheckUP to deliver a quarterly mobile women's service in Miles and Tara until 30 June 2017. This service had previously been delivered by the RFDS and provided a women's focused clinic for Goondir's clients as well as the general population.

QUALITY USE OF MEDICINES PROGRAM

QUMAX is the Quality Use of Medicines Maximised for Aboriginal and Torres Strait Islander peoples, a collaborative between NACCHO and the Pharmacy Guild of Australia, funded by the Commonwealth Department of Health under the Community Pharmacy Agreement. This program aims to improve quality use of medicines and provide culturally appropriate services for Aboriginal and Torres Strait Islander peoples.

Under continued funding arrangements Goondir identified webster packs/dose administration aides (DAA) as a priority need for clients. The DAA flexible funding was delivered across all sites and dispensed by pharmacies in Dalby, Oakey, St George and Chinchilla. This initiative has consistently received strong support from clinicians and community pharmacies and is validated by the continued uptake of the service by clients.

Dr Tun Tun showing use of ECG





SOCIAL & EMOTIONAL WELLBEING SERVICES

in the social and emotional wellbeing of Aboriginal and Torres Strait Islander individuals, families and communities. It is intended to assist in the process of healing for people affected by past removal policies and who have particular issues and unique needs.

The funding provided enables Goondir to have two SEWB Counsellors to deliver services across the Dalby and St George catchment areas.

Prior to the commencement of the DPMC funding Goondir were without a Counsellor in the St George community for a period of time. In August 2016 Goondir secured a male SEWB Counsellor in the St George clinic. This Counsellor has successfully re-established networks with Elders, Murri Providers Network, General Providers Network, Community Justice Group, State High School, State School and community members. An example of his service delivery is as follows:

- Activities emphasise a holistic approach to social and emotional wellbeing, which encompasses physical, cultural and spiritual dynamics of an individual, family and community;
- Regularly engages with Murri Court and working with clients regarding alcohol and other drugs, trauma, grief and loss, and domestic violence. Additionally, collaborative working relationships are upheld with Probation and Parole where client interests are concerned;
- Current member of the Balonne Community Suicide Prevention Network;
- Spiritual wellbeing ie smudging (Burning of white sage) of individuals and home, connecting to language (classes available at state school) and land (collaborative working relationship with Link-Up);
- Elders group held once a week which encompass cultural activities and heritage significant site walks;
- Positive Futures Group which is a 3 day program created by Probation and Parole that the SEWB counsellor has co-facilitated. It is hoped that this program is run once every eight weeks;
- Preventative activities (ie attending and contributing to monthly breakfast club) and behavioural management at schools; and
- Guest speaker at events including the 'Which Way This Way' program run by Police Liaison Officers.

The Dalby community have had the benefit of having the same female Counsellor based in their catchment area for a period of 10 years. Examples of service delivery include:

- Emphasises a holistic SEWB framework to all service delivery approaches;
- Regularly visits existing townships within the Dalby catchment area including Tara, Chinchilla and Miles;
- Regularly attends to community needs as part of Goondir's Mobile Clinic;
- Regularly engages with key service providers (ie Save the Children; Neighbourhood Centres, Hospitals, Police) within the townships in the Dalby catchment area;
- Assists in facilitating the Indigenous Women's Program, Gira Gira;
- Provides a supportive service for the existing Psychologist who is partly funded under CheckUP for psychological service delivery in the townships of Dalby and Oakey; and
- Implements the Emergency Relief Program funded by the Department of Social Services. The Program provides financial support including food parcels, electricity and gas payments, rental support and support for sorry business.

Goondir's SEWB Counsellors are supported by a Psychologist, partly funded under CheckUP for service delivery in Dalby and Oakey.

GIRA GIRA

The Dalby SEWB program proudly continues to provide ongoing support to the Indigenous Women's Program aptly named Gira Gira (meaning to cheer up). The participants meet on a weekly basis and partake in various art and craft activities. These activities provide positive social interaction and enables the participants to play a major role in assisting each other through a crisis/illness or psychological healing process. During the year participants played an integral role in assisting in the NAIDOC celebrations, various Big Buddy activities, especially making the flowers for the Big Buddy entry in the Toowoomba Carnival of Flowers Parade. The participants also enjoyed a day out at the Tara Cultural Festival where they successfully sold their arts, crafts, and sewing items thus enabling them to obtain self-generated funds for the program.

RUOK activities in St George



Gira Gira sewing group

CORPORATE SERVICES

Quality

Goondir has maintained its accreditation status including upgrading its organisational accreditation to meet the ISO9001:2015 Quality Management System Certification.

A clinical improvement program was undertaken during the year to improve clinical services. Some of the strategies being progressed but not limited to include:

- Upgrading all Aboriginal Health Workers to become Aboriginal Health Practitioners, a registration recognised with the Australian Health Practitioner Regulation Agency. Seven staff have been signed up to complete their Cert IV in Primary Health Care, providing professional development opportunities for staff.
- Establishment of a Client Care Coordinator position to support the health team to ensure best practice chronic disease monitoring and management.
- Staff training sessions provided by both external peers and internal opportunities to improve health services and revenue generation to improve services.
- Return of the dashboard data reporting tool to identify service gaps and manage performance.
- Introduction of staff performance bonus scheme to drive improvement and reward staff for their dedication and hard work.

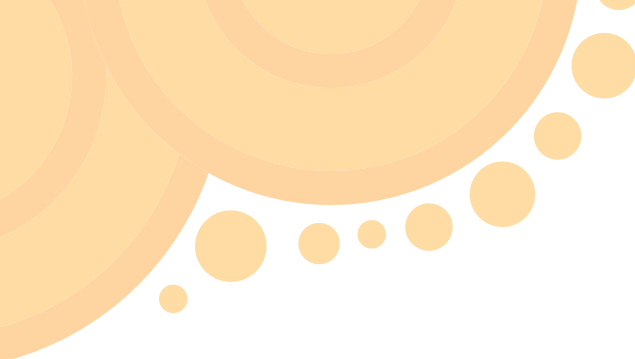
Information Technology.... keeping Goondir's clinics, the community and other key stakeholders connected

The ability to isolate and analyse data is a key focus of Goondir's management operations. During the year, our IT Manager was pivotal in enhancing the dashboard data report for use by staff in their daily activities. Following a trial period Microsoft Power BI is being implemented as a flexible tool which saves time previously spent on data extraction.

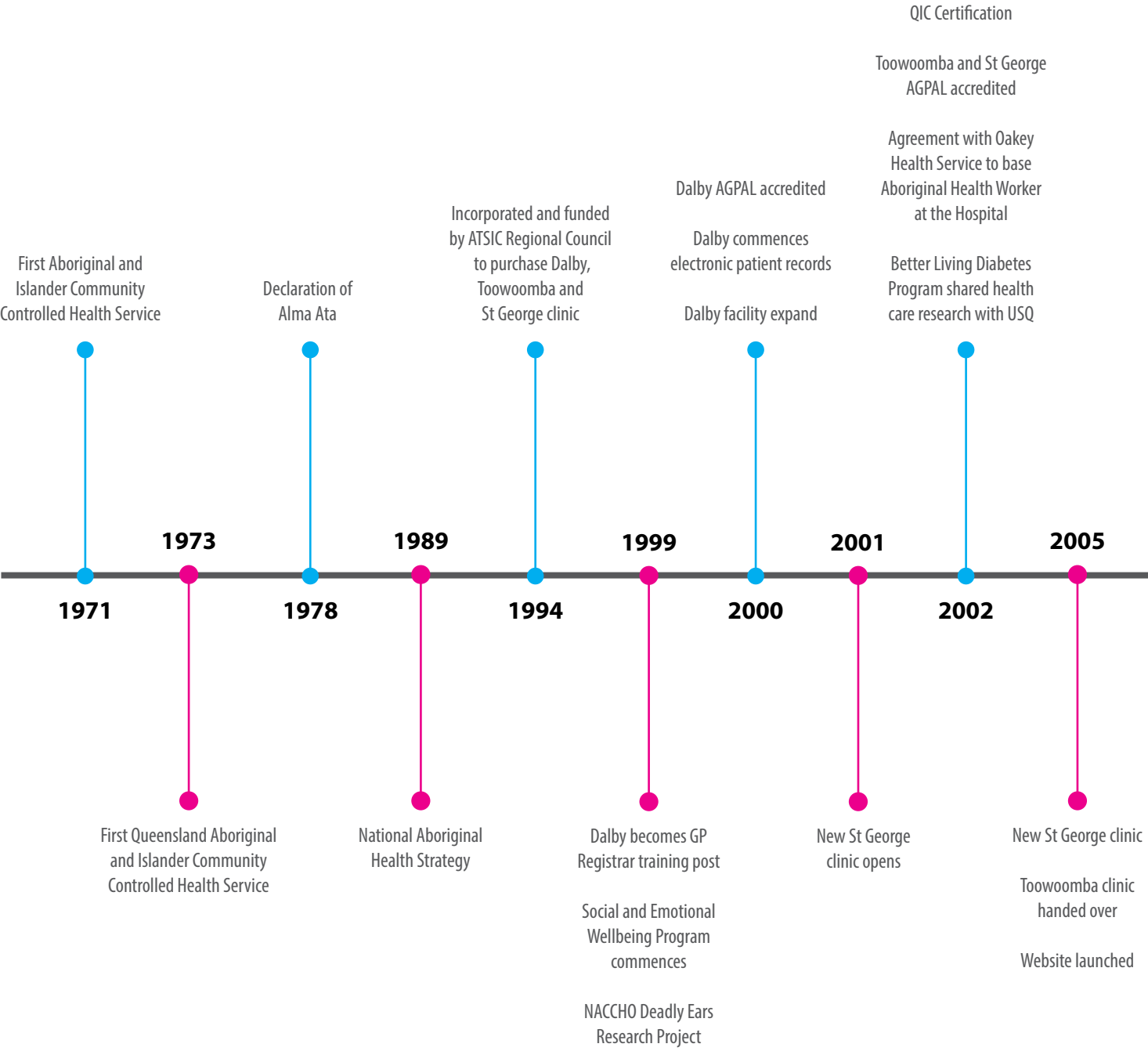
Delivery of health clinics across multiple locations has resulted in us this year moving to an online server Office 365, to loosen our server load and allow licencing to be simple and centralised. The benefit is that any PC will be capable of video communication via Skype. Plans were also made to upgrade to new and better servers in 2017-2018.

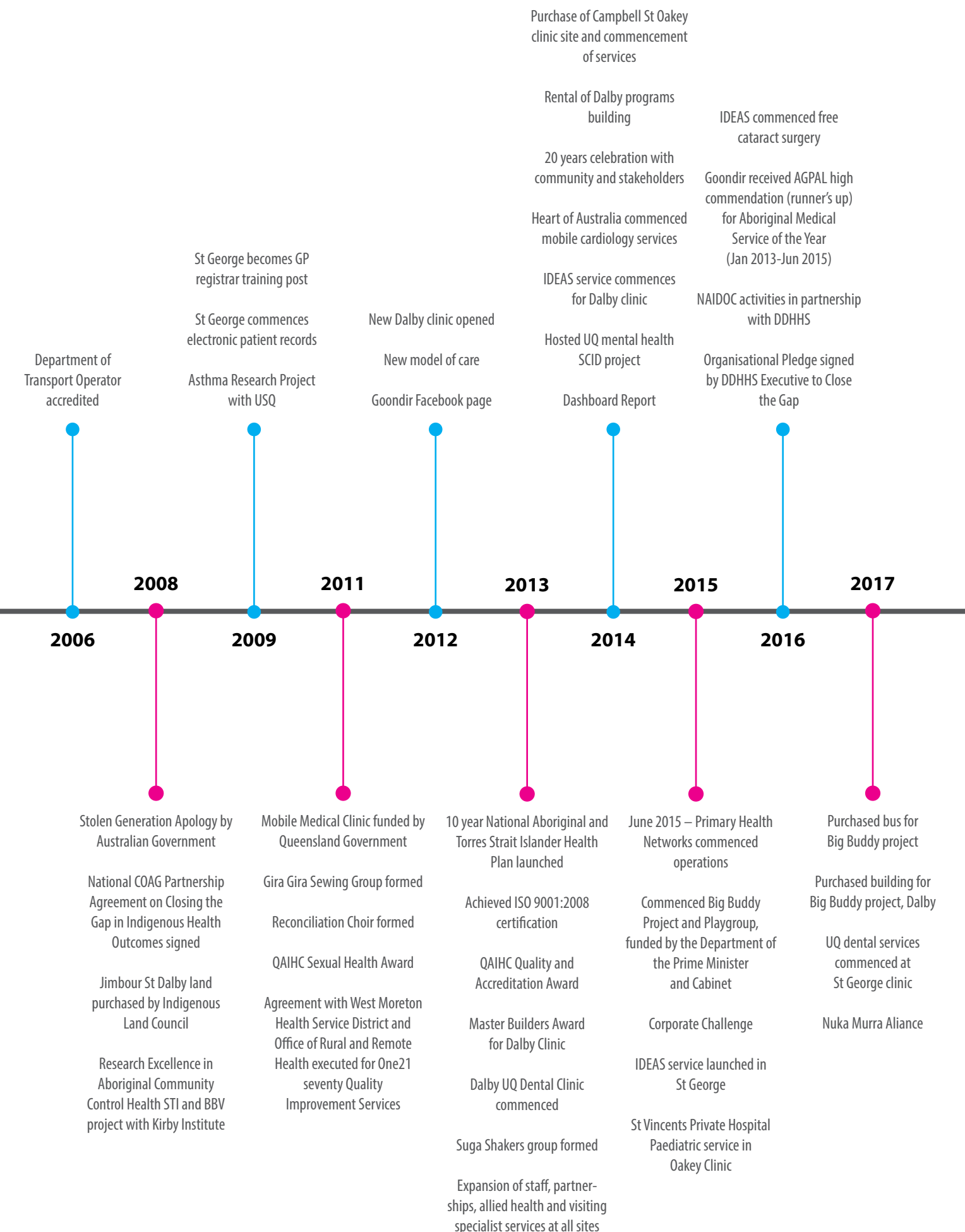
Goondir have continued to embrace social media as an opportunity to keep community informed on key activities. Compared to last year, engagement via this medium is steadily growing, and all posts this year reached over 65,000 people – the largest response being for the St George UQ Dental opening. The exception to comparative annual growth was the 2016 April Fools prank which was testament to comedy being enjoyed by all.





TIMELINE





Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

ABN: 28 532 578 379

Financial Statements

30 June 2017

Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

ABN: 28 532 578 379

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Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

ABN: 28 532 578 379

Directors' Report

30 June 2017

The directors present their report on Goondir Aboriginal and Torres Strait Islander Corporation for Health Services for the financial year ended 30 June 2017.

Directors

The names of each person who has been a director during the year and to the date of this report are:

Gary White
Don Gorman
Lenease Cooper
Mabrey Fogarty
Robin Derksen
Cliff Hartley Holl
Leslie Weribone
John Walker
Peter White

Principal activities

The principal activity of Goondir Aboriginal and Torres Strait Islander Corporation for Health Services during the financial year was primary health care services.

No significant changes in the nature of the Corporation's activity occurred during the financial year.

Short term objectives

The Corporation's short term objectives are to:

- Provide comprehensive culturally appropriate, holistic quality and primary health care services;
- Provide activities with a focus on intervention, prevention, promotion and education;
- Ensure access to health care services for the purpose of facilitating optimal health outcomes;
- An increased focus on youth activities;
- Provide dental services in St George in partnership with UQ School of Dentistry;
- Provide emergency financial relief services to mitigate health issues;
- Continue to source funding for acquisition of an outreach health facility/ health farm to complement current service delivery which align to the identified COAG initiatives;
- Accountability and transparency in decision making and overall stewardship of the Corporation;
- Management team have the tools and resources to ensure services are undertaken efficiently and effectively;

Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

ABN: 28 532 578 379

Directors' Report

30 June 2017

Short term objectives

- Ensure effective planning across all areas of the organisation;
- The service provides quality and safe client care;
- Provide services that are transparent, accountable and innovative;
- To meet all financial reporting compliance and develop sustainable financial practices;
- Ensure health infrastructure is effectively managed and maintained to facilitate access to health services;
- Maintain an efficient, effective and qualified workforce;
- Ensure the organisation operates in a safe environment which mitigates risk and ensures duty of care to all stakeholders;
- Be recognised as a leader in Aboriginal and Torres Strait Islander health and advocate for enhanced service delivery;
- Identify opportunities through partnerships to maximise health outcomes;
- Maintain positive relationships with Government/ Funding Bodies; and,
- Foster a service that involves and encourages community engagement.

Long term objectives

The Corporation's long term objectives are to:

- Deliver quality primary health care services;
- Ensure resources are sustainable;
- Ensure processes are clear; and,
- Ensure dedicated trained staff.

Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

ABN: 28 532 578 379

Directors' Report

30 June 2017

Strategy for achieving the objectives

To achieve these objectives, the Corporation has adopted the following strategies:

- Deliver core primary health care services;
- Address the social determinants of health;
- Improve access to services;
- Reduce impact of chronic disease;
- Ensure safe and quality health outcomes;
- Increase confidence in health system;
- Ensure costs are appropriate;
- Maximise revenue;
- Leverage other health providers;
- Optimise asset use;
- Collaborate with other providers;
- Deliver more care locally;
- Effective operational and strategic planning;
- Develop, implement, manage, review and evaluate services to continually improve health outcomes;
- Engage the community and consumers;
- Embed values based culture;
- Plan, recruit and retain an appropriate skilled workforce;
- Develop, educate and train the workforce;
- Engage clinicians and support staff to improve the service; and,
- Promote and support the health and wellbeing of the staff.

Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

ABN: 28 532 578 379

Directors' Report

30 June 2017

Performance measures

The Corporation measures its performance through analysis of its financial and non-financial results at regular Board meetings.

Information on directors

Gary White

Qualifications

Certificate IV in Governance

Experience

Chairperson for Goondir Health Services for the past 22 years and current.
Previous Director for the Queensland Aboriginal and Islander Health Council (QAIHC).
CEO for the Goolburri Regional Housing Company for the past 18 years and current.
ATSIC Regional Councillor for 12 years from 1995-2007.

Special Responsibilities

On all board sub committees within the Goondir Health Service Charter

Don Gorman

Qualifications

Professor School of Health Nursing & Midwifery, USQ.

Experience

Director of Goondir Health Services for the past 4 years and current.

Special Responsibilities

Chair of Goondir's Clinical Governance Committee.
Board Representative on Goondir's Management Review Committee.

Leslie Weribone

Qualifications

Introduction to Corporate Governance

Experience

Director for Goondir Health Services for the past 13 years and current.
Director for Goolburri Regional Housing Company for 15 years.
Director for St George Aboriginal Housing Company for 10 years.
State representative for Workers Union (St George) for 12 years.
Chairperson for local ALP Committee in St George for 3 years.

Mabrey Fogarty

Qualifications

Certificate IV in Governance

Experience

Director for Goondir Health Services for past 13 years and current.
Board Member for Murrumba Aboriginal Housing Company for 9 years and current.
Supervisor/Manager for Telecom Australia for 24 years.

Special Responsibilities

Company Treasurer for Goondir Health Services for past 11 years and current.
Board Representative on Goondir's Finance Committee.
Board Representative on Goondir's Human Resources Management Committee.
Board Representative on Goondir's Safety and Environment Committee.
Chairperson of Goondir's Management Review Committee.

Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

ABN: 28 532 578 379

Directors' Report

30 June 2017

Information on directors

Robin Derksen

Qualifications

Certificate IV in Governance.

Experience

Director for Goondir Health Services for past 13 years and current.
Employee for Queensland Health in Miles area for 27 years.
Miles Advisory Committee for Health for 4 years.
Chair for Miles/Chinchilla Aboriginal Housing Company for 18 years.
Secretary for Miles Aboriginal Housing Company for 27 years.
Director for Goolburri Regional Housing Company for 18 years.
Chairperson of Miles Primary School ASSPA Committee for 10 years.
Community Involvement with South East Legal Service (Miles area) for 15 years on and off).

Special Responsibilities

Board Representative on Goondir's Clinical Governance Committee.
Chairperson of Goondir's Safety and Environmental Committee.
Company Secretary for Goondir Health Services for 6 years from 2006-2012.

Lenease Cooper

Qualifications

Certificate IV in Governance.

Experience

Director for Goondir Health Services for past 13 years and current.
Director for St George Aboriginal Housing Company for 8 years.
CDEP Co-ordinator for Kamilaroi CDEP in St George for 10 years.
Director for Dirranbandi Public Swimming Pool Committee for 1 year

Special Responsibilities

Board Representative on Goondir's Human Resources Management Committee.

Cliff Hartley Holl

Qualifications

Resigned 2 February 2017

Experience

Solicitor.
Legal.
Director of Goondir Health Services for over 3 years

Special Responsibilities

Company Secretary.
Board Representative on Goondir's Human Resources Management Committee.

Peter White

Qualifications

Introduction to Corporate Governance.

Experience

Director for Goondir Health Services for past 10 years and current.
Chairperson of Murrumba Aboriginal Housing Company for 3 years.

Special Responsibilities

Board Representation on Goondir's Management Review Committee.
Board Representation on Goondir's Safety and Environmental Committee

John Walker

Qualifications

Accountant

Experience

Director of Goondir Health Service for the past 4 years and current.

Special Responsibilities

Chairperson of Goondir's Finance Committee.

Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

ABN: 28 532 578 379

Directors' Report

30 June 2017

Meetings of directors

During the financial year, 5 meetings of directors were held. Attendances by each director during the year were as follows:

	Directors' Meetings	
	Number eligible to attend	Number attended
Gary White	5	5
Don Gorman	5	3
Leslie Weribone	5	1
Mabrey Fogarty	5	5
Robin Derksen	5	3
Lenease Cooper	5	5
Cliff Hartley Holl	2	-
Peter White	5	3
John Walker	5	5

Auditor's independence declaration

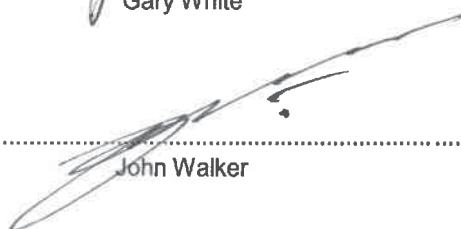
The auditor's are independent of the Corporation in accordance with the auditor independence requirements of the *Australian Charities and Not-for-profits Commission Act 2012*.

Signed in accordance with a resolution of the Board of Directors:

Director:


Gary White

Director:


John Walker

Dated 28 September 2017

Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

ABN: 28 532 578 379

Statement of Profit or Loss and Other Comprehensive Income For the Year Ended 30 June 2017

		2017	2016
	Note	\$	\$
Revenue	2	6,976,302	6,257,377
Employee benefits and related expenses	4	(4,575,454)	(4,052,240)
Depreciation and amortisation expense		(410,199)	(416,473)
Allied health services		(75,886)	(76,336)
Emergency relief payments		(25,965)	(25,988)
General practitioner and health services		(180,492)	(131,329)
Motor vehicle expenses		(127,648)	(110,358)
Medical equipment and supplies		(85,297)	(89,507)
Health Promotion		(71,116)	-
Contract payments		(135,155)	(115,746)
Telephone		(200,794)	(179,846)
Travel		(147,506)	(60,815)
Electricity and gas		(91,394)	(71,504)
Secretarial fees		(53,122)	(91,066)
Repairs and maintenance		(38,716)	(58,418)
Consultancy and legal fees		(40,340)	(66,395)
Finance costs		(28,734)	(14,404)
Other expenses	3	(547,404)	(519,429)
Surplus for the year		141,080	177,523
Other comprehensive income, net of income tax			
Revaluation changes for property, plant and equipment		-	-
Total comprehensive income for the year		141,080	177,523

Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

ABN: 28 532 578 379

Statement of Financial Position

As At 30 June 2017

	Note	2017 \$	2016 \$
ASSETS			
CURRENT ASSETS			
Cash and cash equivalents	5	1,878,947	1,876,773
Trade and other receivables	6	212,299	23,688
Inventories		32,062	38,261
Prepayments		96,027	68,157
TOTAL CURRENT ASSETS		2,219,335	2,006,879
NON-CURRENT ASSETS			
Property, plant and equipment	7	10,257,115	9,283,278
Works of art		1,800	1,800
TOTAL NON-CURRENT ASSETS		10,258,915	9,285,078
TOTAL ASSETS		12,478,250	11,291,957
LIABILITIES			
CURRENT LIABILITIES			
Trade and other payables	9	543,255	543,576
Borrowings	10	193,859	148,200
Employee benefits	12	338,402	198,109
Deferred income	16	69,723	-
Unspent funds	11	239,777	153,218
TOTAL CURRENT LIABILITIES		1,385,016	1,043,103
NON-CURRENT LIABILITIES			
Borrowings	10	306,526	135,324
Employee benefits	12	102,661	128,343
Deferred income	16	557,780	-
TOTAL NON-CURRENT LIABILITIES		966,967	263,667
TOTAL LIABILITIES		2,351,983	1,306,770
NET ASSETS		10,126,267	9,985,187
EQUITY			
Reserves		581,695	581,695
Retained earnings		9,544,572	9,403,492
TOTAL EQUITY		10,126,267	9,985,187

Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

ABN: 28 532 578 379

Statement of Changes in Equity

For the Year Ended 30 June 2017

2017

	Retained Earnings	Asset Realisation Reserve	General Reserves	Total
	\$	\$	\$	\$
Balance at 1 July 2016	9,403,492	145,000	436,695	9,985,187
Surplus for the year	141,080	-	-	141,080
Balance at 30 June 2017	9,544,572	145,000	436,695	10,126,267

2016

	Retained Earnings	Asset Realisation Reserve	General Reserves	Total
	\$	\$	\$	\$
Balance at 1 July 2015	9,225,969	145,000	436,695	9,807,664
Surplus for the year	177,523	-	-	177,523
Balance at 30 June 2016	9,403,492	145,000	436,695	9,985,187

Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

ABN: 28 532 578 379

Statement of Cash Flows

For the Year Ended 30 June 2017

	Note	2017 \$	2016 \$
CASH FLOWS FROM OPERATING ACTIVITIES:			
Receipts from customers		1,870,404	1,929,927
Receipt from grants		5,338,945	4,889,106
Other receipts		57,653	41,474
Payments to suppliers and employees		(6,726,723)	(5,977,688)
Interest received		43,333	37,831
Interest paid		(6,338)	(14,404)
Net cash provided by/(used in) operating activities		<u>577,274</u>	<u>906,246</u>
CASH FLOWS FROM INVESTING ACTIVITIES:			
Proceeds from sale of plant and equipment		180,697	54,450
Purchase of property, plant and equipment		(947,980)	(403,060)
Net cash used by investing activities		<u>(767,283)</u>	<u>(348,610)</u>
CASH FLOWS FROM FINANCING ACTIVITIES:			
Proceeds from borrowings		400,679	192,166
Repayment of borrowings		(208,496)	(87,236)
Net cash used by financing activities		<u>192,183</u>	<u>104,930</u>
Net increase/(decrease) in cash and cash equivalents held		2,174	662,566
Cash and cash equivalents at beginning of year		<u>1,876,773</u>	<u>1,214,207</u>
Cash and cash equivalents at end of financial year	5	<u><u>1,878,947</u></u>	<u><u>1,876,773</u></u>

Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

ABN: 28 532 578 379

Notes to the Financial Statements

For the Year Ended 30 June 2017

The financial report covers Goondir Aboriginal and Torres Strait Islander Corporation for Health Services as an individual entity, incorporated and domiciled in Australia. Goondir Aboriginal and Torres Strait Islander Corporation for Health Services is a Corporation under the *Corporations (Aboriginal and Torres Strait Islander) Act 2006*.

1 Basis of Preparation

(a) Compliance with Prescribed Requirements

The financial statements are general purpose financial statements that have been prepared in accordance with the Australian Accounting Standards - Reduced Disclosure Requirements, Australian Accounting Interpretations, other authoritative pronouncements of the Australian Accounting Standards Board and the *Corporations (Aboriginal and Torres Strait Islander) Act 2006* and the requirements of the *Australian Charities and Not-for-profits Commission Act 2012*.

The financial statements have been prepared on an accruals basis and are based on historical costs modified, where applicable, by the measurement at fair value of selected non-current assets, financial assets and financial liabilities

(b) The Reporting Entity

The Corporation does not control other entities. The financial statements include the value of all income, expenses, assets, liabilities and equity for the Corporation as an individual entity.

(c) Underlying Measurement Basis

The historical cost convention is used unless otherwise stated.

(d) Other Presentation Matters

Currency and Rounding

Amounts included in the financial statements are in Australian dollars and are rounded to the nearest dollar.

Comparatives

Comparative information reflects the audited 2015-16 financial statements.

Current / Non-Current Classification

Assets and liabilities are classified as either 'current' or 'non-current' in the Statement of Financial Position and associated notes. Assets are classified as 'current' where their carrying amount is expected to be realised within 12 months after the reporting date. Liabilities are classified as 'current' when they are due to be settled within 12 months after the reporting date, or the Corporation does not have an unconditional right to defer settlement to beyond 12 months after the reporting date. All other assets and liabilities are classified as non-current.

Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

ABN: 28 532 578 379

Notes to the Financial Statements

For the Year Ended 30 June 2017

2 Revenue and Other Income

	2017	2016
	\$	\$
Operating grants	5,103,396	4,743,185
Medicare income	1,378,581	1,151,478
Practice incentive payments	277,552	198,119
Service incentive payments	6,565	2,080
Child immunisation rebate	591	750
Veteran Affairs	-	825
General practitioner training	-	41,532
Medical fees	4,373	11,546
Profit on sale of assets	10,914	13,000
Member subscriptions	191	191
Wage subsidies	20,218	1,812
Rental income	69,723	8,501
Contract medical services	8,419	5,051
Interest received	43,333	37,831
Sundry revenue	52,447	41,474
Total Revenue	6,976,302	6,257,377

Accounting Policy

Operating grants

Operating grants are principally of a recurrent or capital nature and intended to fund ongoing operations or asset acquisitions. Income from operating grants is measured at the fair value of the contributions received or receivable and only when all the following conditions have been satisfied:

- the Corporation obtains control of the grant funds or the right to receive the grant funds;
- it is probable that the economic benefits comprising grants will flow to the Corporation; and
- the amount of the grant can be measured reliably.

Operating grants are recognised as revenue when the Corporation fulfils of the condition of the grant.

Medicare income, practice incentives and service incentives

Revenue from the rendering of medical services are recognised upon the delivery of the service to the customers.

Interest revenue

Interest is recognised using the effective interest method.

Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

ABN: 28 532 578 379

Notes to the Financial Statements

For the Year Ended 30 June 2017

2 Revenue and Other Income

Accounting Policy

Other income

Other income is recognised on an accruals basis when the Corporation is entitled to it.

3 Other Expenses

	2017	2016
	\$	\$
Advertising	45,364	88,476
Catering expenses	27,537	23,559
Computer expenses	38,183	69,247
Insurance	67,510	55,922
Rent	111,200	57,733
Loss on sale of assets	45,825	29,154
Printing and stationery	39,488	40,373
Rates and taxes	39,805	25,918
Other operating expenses	132,492	129,047
Total other expenses	547,404	519,429

4 Employee Benefits and Related Expenses

	2017	2016
	\$	\$
Wages and salaries	4,112,088	3,521,206
Workers compensation	9,141	12,465
Superannuation contributions	371,395	330,085
Staff training	35,723	37,091
Fringe benefits tax	13,404	63,140
Committee fees	1,863	4,508
Long service leave	1,554	8,719
Employee benefits	10,286	30,652
Staff recruitment/retention	20,000	44,374
Total employee benefits and related expenses	4,575,454	4,052,240

Accounting Policy

Salaries, wages, employer superannuation contributions, annual leave costs and long service leave costs are regarded as employee benefits.

Workers' compensation insurance is a consequence of employing employees, but is not counted in an employee's total remuneration package. They are not employee benefits and are recognised separately as employee related expenses.

Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

ABN: 28 532 578 379

Notes to the Financial Statements

For the Year Ended 30 June 2017

4 Employee Benefits and Related Expenses

Accounting Policy

Superannuation

Employer superannuation contributions due but unpaid at reporting date are recognised in the Statement of Financial Position at the current superannuation rate.

Annual Leave and Long Service Leave

Provision is made for the Corporation's liability for employee benefits arising from services rendered by employees to the end of the reporting period. Employee benefits that are expected to be wholly settled within one year have been measured at the amounts expected to be paid when the liability is settled.

Employee benefits expected to be settled more than one year after the end of the reporting period have been measured at the present value of the estimated future cash outflows to be made for those benefits. In determining the liability, consideration is given to employee wage increases and the probability that the employee may satisfy vesting requirements. Cashflows are discounted using market yields on high quality corporate bond rates incorporating bonds rated AAA or AA by credit agencies, with terms to maturity that match the expected timing of cashflows. Changes in the measurement of the liability are recognised in profit or loss.

5 Cash and cash equivalents

	2017	2016
	\$	\$
Cash on hand	300	375
Cash at bank	1,878,647	1,876,398
	<u>1,878,947</u>	<u>1,876,773</u>

Accounting Policy

For the purposes of the Statement of Financial Position and the Statement of Cash Flows, cash assets include all cash and cheques receipted but not banked at 30 June as well as deposits at call with financial institutions.

6 Trade and other receivables

	2017	2016
	\$	\$
CURRENT		
Trade receivables	203,159	17,328
Deposits	9,140	6,360
Total current trade and other receivables	<u>212,299</u>	<u>23,688</u>

Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

ABN: 28 532 578 379

Notes to the Financial Statements

For the Year Ended 30 June 2017

6 Trade and other receivables

Accounting Policy

Trade and other receivables are recognised at the amounts due at the time of sale or service delivery i.e. the agreed purchase/contract price. Settlement of these amounts is required within 30 days from invoice date. The collectability of receivables is assessed periodically with provision being made for impairment.

7 Property, plant and equipment

	2017 \$	2016 \$
LAND AND BUILDINGS		
Residential land and buildings		
Land at fair value	90,000	90,000
Buildings at fair value	265,007	265,007
Accumulated depreciation	(19,250)	(12,625)
Total residential land and buildings	335,757	342,382
Commercial land and buildings		
Land at cost	766,306	636,306
Buildings at cost	8,489,756	7,703,380
Buildings accumulated depreciation	(596,949)	(384,860)
Total commercial land and buildings	8,659,113	7,954,826
Total land and buildings	8,994,870	8,297,208
PLANT AND EQUIPMENT		
Capital works in progress		
At cost	76,314	35,927
Total capital works in progress	76,314	35,927
Plant and equipment		
At cost	572,481	475,294
Accumulated depreciation	(305,695)	(254,832)
Total plant and equipment	266,786	220,462
Furniture, fixtures and fittings		
At cost	213,876	210,036
Accumulated depreciation	(125,362)	(110,611)
Total furniture, fixtures and fittings	88,514	99,425

Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

ABN: 28 532 578 379

Notes to the Financial Statements

For the Year Ended 30 June 2017

7 Property, plant and equipment

	2017 \$	2016 \$
Motor vehicles		
At cost	782,150	637,950
Accumulated depreciation	(128,790)	(182,187)
Total motor vehicles	653,360	455,763
Office equipment		
At cost	64,694	62,867
Accumulated depreciation	(47,135)	(41,814)
Total office equipment	17,559	21,053
Computer equipment		
At cost	390,542	406,032
Accumulated depreciation	(367,853)	(380,855)
Total computer equipment	22,689	25,177
Dental equipment		
At cost	108,716	108,716
Accumulated depreciation	(108,716)	(108,716)
Total dental equipment	-	-
Medical equipment		
At cost	324,491	311,338
Accumulated depreciation	(187,468)	(183,075)
Total medical equipment	137,023	128,263
Total plant and equipment	1,262,245	986,070
Total property, plant and equipment	10,257,115	9,283,278

Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

ABN: 28 532 578 379

Notes to the Financial Statements For the Year Ended 30 June 2017

7 Property, plant and equipment

(a) Movements in Carrying Amounts

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

	Capital Works in Progress	Residential Land and Buildings	Commercial Land and Buildings	Plant and Equipment	Furniture, Fixtures and Fittings	Motor Vehicles	Office Equipment	Computer Equipment	Medical Equipment	Total
	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
Year ended 30 June 2017										
Balance at the beginning of year	35,927	342,382	7,954,826	220,462	99,425	455,763	21,053	25,177	128,263	9,283,278
Additions	64,485	-	909,551	97,666	4,521	438,370	1,826	14,158	28,448	1,559,025
Disposals - written down value	-	-	-	(351)	-	(174,638)	-	-	-	(174,989)
Transfers	(24,098)	-	6,825	-	-	17,273	-	-	-	-
Depreciation expense	-	(6,625)	(212,089)	(50,991)	(15,432)	(83,408)	(5,320)	(16,646)	(19,688)	(410,199)
Balance at the end of the year	76,314	335,757	8,659,113	266,786	88,514	653,360	17,559	22,689	137,023	10,257,115

Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

ABN: 28 532 578 379

Notes to the Financial Statements

For the Year Ended 30 June 2017

7 Property, plant and equipment

Accounting Policy

The directors have determined that land and buildings are to be recognised as separate asset classes, residential and commercial. Residential land and buildings are carried at fair value, and where applicable, any accumulated depreciation and impairment losses. Commercial land and buildings are carried at cost, and where applicable, any accumulated depreciation and impairment losses.

All other classes of property, plant and equipment are carried at cost, and where applicable, any accumulated depreciation and impairment losses. Plant and equipment that have been contributed at no cost, or for nominal cost are valued and recognised at the fair value of the asset at the date it is acquired.

Depreciation

Property, plant and equipment, excluding residential buildings, is depreciated on a straight-line basis over the assets useful life to the Corporation, commencing when the asset is ready for use. Land is not depreciated.

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

Fixed asset class	Depreciation rate
Residential Buildings	2.5%
Commercial Buildings	2.5%
Plant and Equipment	7.5% - 100%
Motor Vehicles	5%
Office Equipment	7.5% - 10%

At the end of each annual reporting period, the depreciation method, useful life and residual value of each asset is reviewed. Any revisions are accounted for prospectively as a change in estimate.

Impairment

All non-current physical assets are assessed for indicators of impairment on an annual basis. If an indicator of possible impairment exists, the Corporation determines the asset's recoverable amount. Any amount by which the asset's carrying amount exceeds the recoverable amount is recorded as an impairment loss.

The asset's recoverable amount is determined as the higher of the asset's fair value less costs to sell and depreciated replacement cost.

An impairment loss is recognised immediately in the Statement of Profit or Loss and Other Comprehensive Income, unless the asset is carried at a revalued amount. When the asset is measured at a revalued amount, the impairment loss is offset against the asset revaluation surplus of the relevant class to the extent available.

Where an impairment loss subsequently reverses, the carrying amount of the asset is increased to the revised estimate of its recoverable amount, but so that the increased carrying amount does not exceed the carrying amount that would have been determined had no impairment loss been recognised for the asset in prior years. A reversal of an impairment loss is recognised as income, unless the asset is carried at a revalued amount, in which case the reversal of the impairment loss is treated as a revaluation increase.

When an asset is revalued using either a market or income valuation approach, any accumulated impairment losses at that date are eliminated against the gross amount of the asset prior to restating for the revaluation.

Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

ABN: 28 532 578 379

Notes to the Financial Statements

For the Year Ended 30 June 2017

8 Fair Value Measurement

The Corporation measures the following assets and liabilities at fair value on a recurring basis:

- Residential Land and Buildings

Fair value hierarchy

AASB 13 *Fair Value Measurement* requires all assets and liabilities measured at fair value to be assigned to a level in the fair value hierarchy as follows:

Level 1	Unadjusted quoted prices in active markets for identical assets or liabilities that the entity can access at the measurement date.
Level 2	Inputs other than quoted prices included within Level 1 that are observable for the asset or liability, either directly or indirectly.
Level 3	Unobservable inputs for the asset or liability.

The table below shows the assigned level for each asset and liability held at fair value by the Corporation:

	Level 1	Level 2	Level 3	Total
30 June 2017	\$	\$	\$	\$
Recurring fair value measurements				
Residential Land and Buildings				
11 Falcon Street, Dalby	-	335,757	-	335,757
30 June 2016	\$	\$	\$	\$
Recurring fair value measurements				
Residential Land and Buildings				
11 Falcon Street, Dalby	-	342,382	-	342,382

Level 2 measurements

An independent valuation was conducted on the property at 11 Falcon Street, Dalby on 9 July 2015. The valuation of the property at that date is \$330,000.

Highest and best use

The current use of each asset measured at fair value is considered to be its highest and best use.

Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

ABN: 28 532 578 379

Notes to the Financial Statements

For the Year Ended 30 June 2017

9 Trade and other payables

	2017	2016
	\$	\$
CURRENT		
Trade payables	439,710	465,426
Australian Taxation Office amounts payable/(refundable)	(20,877)	(220)
Accrued expenses	124,419	78,370
	543,255	543,576

Accounting Policy

Trade payables

Trade payables are recognised upon receipt of the goods or services ordered and are measured at the agreed purchase/contract price, gross of applicable trade and other discounts. Amounts owing are unsecured and are generally settled on 30 day terms.

10 Borrowings

	2017	2016
Note	\$	\$
CURRENT		
Credit cards	6,406	4,123
Lease liability	187,453	144,077
Total current borrowings	193,859	148,200
	2017	2016
Note	\$	\$
NON-CURRENT		
Lease liability	195,175	135,324
Bank loans	111,351	-
Total non-current borrowings	306,526	135,324

Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

ABN: 28 532 578 379

Notes to the Financial Statements

For the Year Ended 30 June 2017

11 Unspent Funds

	2017	2016
	\$	\$
Commonwealth - Capital Grant Dalby Building	-	5,594
Commonwealth - CW Building Sale	-	1,703
Commonwealth - NAIDOC 2016	-	8,900
Commonwealth - IRSDT #4	-	108,750
Commonwealth - Social Emotional Wellbeing	15,624	28,271
Commonwealth - Play Group	2,387	-
Commonwealth - DOH Service Maintenance	81,482	-
Commonwealth - NAIDOC	4,024	-
Self Generated - PHN NAIDOC	909	-
Self Generated - WQPHN - Social Emotional Wellbeing	135,351	-
Total unspent funds	239,777	153,218

12 Employee benefits

	2017	2016
	\$	\$
CURRENT		
Provision for long service leave	108,850	18,095
Provision for annual leave	221,570	180,014
Provision for TOIL	7,982	-
	338,402	198,109
NON-CURRENT		
Provision for long service leave	102,661	128,343
	102,661	128,343

Accounting Policy

Accounting policies for employee benefit liabilities are disclosed in Note 4.

13 Leasing Commitments

(a) Finance leases

	2017	2016
	\$	\$
Minimum lease payments:		
- not later than one year	187,453	144,077
- between one year and five years	195,175	135,324
Minimum lease payments	382,628	279,401

Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

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Notes to the Financial Statements

For the Year Ended 30 June 2017

13 Leasing Commitments

(a) Finance leases

Finance leases are in place for motor vehicles and normally have a term between 2 and 3 years.

(b) Operating leases

	2017	2016
	\$	\$
Minimum lease payments under non-cancellable operating leases:		
- not later than one year	285,372	141,402
- between one year and five years	497,920	105,324
	<u>783,292</u>	<u>246,726</u>

Operating leases have been taken out for photocopier equipment use, rental properties, Telstra business arrangement, and fibre optic works.

14 Related Parties

Loans to the Directors

No loans have been made to directors.

Other Transactions with the Corporation

Transactions between related parties are on normal commercial terms and conditions no more favourable than those available to other parties unless otherwise stated.

Transactions with related parties:

No Directors have had any direct or significant business dealings with the Corporation, nor does any Director have an interest in a firm or company which has had dealings with the Corporation during the year, except as noted below. Directors are entitled to claim allowances to attend meetings of the Board meetings.

Cliff Hartley-Holl provided the Corporation with secretarial fees totalling \$55,393 (2016: \$91,066)

Key Management Personnel

Any person(s) having authority and responsibility for planning, directing and controlling the activities of the entity, directly or indirectly, including any director (whether executive or otherwise) of that entity are considered key management personnel.

The total remuneration paid to key management personnel of the Corporation is \$914,543 (2016: \$843,135).

Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

ABN: 28 532 578 379

Notes to the Financial Statements

For the Year Ended 30 June 2017

15 Financial Instruments

Recognition

Financial assets and financial liabilities are recognised in the Statement of Financial Position when the Corporation becomes party to the contractual provisions of the financial instrument.

Classification

Financial instruments are classified and measured as follows:

- Cash and cash equivalents - held at amortised cost
- Receivables - held at amortised cost
- Payables - held at amortised cost

The Corporation does not enter into transactions for speculative purposes, nor for hedging. The Corporation holds no financial assets classified at fair value through profit or loss.

16 Other Information

Goods and services tax (GST)

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

Receivables and payable are stated inclusive of GST.

The net amount of GST recoverable from, or payable to, the ATO is included as part of receivables or payables in the statement of financial position.

Cash flows in the statement of cash flows are included on a gross basis and the GST component of cash flows arising from investing and financing activities which is recoverable from, or payable to, the taxation authority is classified as operating cash flows.

Critical Accounting Estimates and Judgments

The directors make estimates and judgements during the preparation of these financial statements regarding assumptions about current and future events affecting transactions and balances.

These estimates and judgements are based on the best information available at the time of preparing the financial statements, however as additional information is known then the actual results may differ from the estimates.

Income Tax

The Corporation is exempt from income tax under Division 50 of the *Income Tax Assessment Act 1997*.

Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

ABN: 28 532 578 379

Notes to the Financial Statements

For the Year Ended 30 June 2017

16 Other Information

Deferred Income and Contingent Liability

An unrelated party entered into a lease of 127 Victoria Street St George for a period of ten years, plus the option of two five year renewal periods (at the lessee's discretion) for the consideration of \$1 per annum. The lease commenced on 6 July 2016. As part of the lease agreement, the lessee made improvements to the building of \$697,225. This contribution has been recognised on the statement of financial position of the Corporation and will be depreciated in accordance with the accounting policy at Note 7. The contribution has been initially recognised as deferred income (liability) on the statement of financial position, and rental income will be recognised on a straight-line basis across the lease term. At the date of this report it is not known if the option for renewal will be exercised after the 10 year term, and as such, the rental income is recognised over ten years.

The lease agreement requires that if the Corporation terminates the lease through no fault of the lessee, that a termination payment, based on a percentage of the contribution, is payable. As the directors believe that the lease will continue, the amount is not a liability, and is disclosed as a contingency. The maximum amount payable should the lease be terminated at 30 June 2017 is \$977,512.

Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

ABN: 28 532 578 379

Directors' Declaration

The directors of the Corporation declare that:

1. The financial statements and notes, as set out on pages 7 to 24, are in accordance with the *Corporations (Aboriginal and Torres Strait Islander) Act 2006* and the requirements of the *Australian Charities and Not-for-profits Commission Act 2012* and:
 - a. comply with Accounting Standards - Reduced Disclosure Requirements; and
 - b. give a true and fair view of the financial position as at 30 June 2017 and of the performance for the year ended on that date of the Corporation.
2. In the directors' opinion, there are reasonable grounds to believe that the Corporation will be able to pay its debts as and when they become due and payable.

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

Director


Gary White

Director


John Walker

Dated 28 September 2017

Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

ABN: 28 532 578 379

Independent Audit Report to the members of Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

Report on the Audit of the Financial Report

Opinion

We have audited the financial report of Goondir Aboriginal and Torres Strait Islander Corporation for Health Services (the Corporation), which comprises the statement of financial position as at 30 June 2017, the statement of profit or loss and other comprehensive income, the statement of changes in equity and the statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies, and the directors' declaration.

In our opinion, the accompanying financial report of the Corporation is in accordance with the *Corporations (Aboriginal and Torres Strait Islander) Act 2006* and the *Australian Charities and Not-for-profits Commission Act 2012*, including:

- (i) giving a true and fair view of the Corporation's financial position as at 30 June 2017 and of its financial performance for the year ended; and
- (ii) complying with Australian Accounting Standards and 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 Corporation in accordance with the auditor independence requirements of the *Australian Charities and Not-for-profits Commission Act 2012* and the ethical requirements of the Accounting Professional and Ethical Standards Board's *APES 110 Code of Ethics for Professional Accountants* (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.

Responsibilities of Directors for the Financial Report

The directors of the Corporation are responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards - Reduced Disclosure Requirements and the *Corporations (Aboriginal and Torres Strait Islander) Act 2006* and the *Australian Charities and Not-for-profits Commission Act 2012* 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 Corporation's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the directors either intend to liquidate the Corporation or to cease operations, or have no realistic alternative but to do so.

Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

ABN: 28 532 578 379

Independent Audit Report to the members of Goondir Aboriginal and Torres Strait Islander Corporation for Health Services


Auditor's Responsibilities 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 the financial report.

As part of an audit in accordance with the 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 the 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 Corporation's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the directors.
- Conclude on the appropriateness of 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 Corporation'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 Corporation 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.



Benjamin Horner
Chartered Accountant; Registered Company Auditor
Director
Audit Solutions Queensland Pty Ltd

Toowoomba

28 September 2017

Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

ABN: 28 532 578 379

Disclaimer to the Detailed Statement of Income and Expenditure For the Year Ended 30 June 2017

The additional financial data presented on pages 28 - 30 is in accordance with the books and records of the Corporation which have been subjected to the auditing procedures applied in our statutory audit of the Corporation for the year ended 30 June 2017. It will be appreciated that our statutory audit did not cover all details of the additional financial data. Accordingly, we do not express an opinion on such financial data and we give no warranty of accuracy or reliability in respect of the data provided. Neither the firm nor any member or employee of the firm undertakes responsibility in any way whatsoever to any person (other than Goondir Aboriginal and Torres Strait Islander Corporation for Health Services) in respect of such data, including any errors or omissions therein however caused.



Benjamin Horner
Chartered Accountant, Registered Company Auditor
Director
Audit Solutions Queensland Pty Ltd

28 September 2017

Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

ABN: 28 532 578 379

Detailed Statement of Income and Expenditure

For the Year Ended 30 June 2017

	2017 \$	2016 \$
Income		
Operating grants	5,103,396	4,743,185
Medicare income	1,378,581	1,151,478
Practice incentive payments	277,552	198,119
Sundry revenue	52,447	41,475
General practitioner training	-	41,532
Interest income	43,333	37,831
Profit on sale of assets	10,914	13,000
Medical fees	4,373	11,546
Rental income	69,723	8,501
Contract medical services	8,419	5,051
Service incentive payments	6,565	2,080
Veteran affairs	-	825
Child immunisation rebate	591	750
Member subscriptions	191	191
Wage subsidies	20,218	1,812
Total income	6,976,302	6,257,377
Less: Expenses		
Accounting fees	1,425	-
Accreditation	8,984	5,076
Advertising	45,364	88,476
Allied health services	75,886	76,336
Auditors remuneration	12,150	13,900
Bad debts	-	180
Bank charges	1,008	534
Catering expenses	27,537	23,559
Cleaning	11,978	11,363
Committee fees	1,863	4,508
Computer expenses	38,183	69,247
Conference/Seminar costs	6,914	14,673
Consultancy and legal fees	40,340	66,395
Consumables	9,048	6,251
Contract payments	135,155	115,746
Depreciation	410,199	416,473
Electricity and gas	91,394	71,504
Emergency relief payments	25,965	25,988
Employee benefits	10,286	30,652
Fees, registrations and subscriptions	14,233	13,448
Freight	1,506	402
Fringe benefits tax	13,404	63,140
General practitioner and health services	180,492	131,329
Health Promotion	71,116	-
Insurance	67,510	55,922

Goondir Aboriginal and Torres Strait Islander Corporation for Health Services

ABN: 28 532 578 379

Detailed Statement of Income and Expenditure For the Year Ended 30 June 2017

	2017	2016
	\$	\$
Interest expense	28,734	14,404
Inventory	13,549	8,540
Long service leave	1,554	8,719
Loss on sale of assets	45,825	29,154
Medical equipment and supplies	85,297	89,507
Motor vehicle expenses	127,648	110,358
Other expenses	9,273	-
Postage	4,127	3,375
Printing and stationery	39,488	40,373
Rates and taxes	39,805	25,918
Rent	111,200	57,733
Repairs and maintenance	38,716	58,418
Resource materials	15,315	26,106
Secretarial fees	53,122	91,066
Security services	9,648	11,427
Staff recruitment/retention	20,000	44,374
Staff training	35,723	37,091
Storage costs	2,400	1,500
Sundry expenses	828	512
Superannuation contributions	371,395	330,085
Telephone	200,794	179,846
Travel	147,506	60,815
Uniforms	2,491	3,906
Wages and salaries	4,112,088	3,521,206
Waste disposal	7,618	7,852
Workers compensation insurance	9,141	12,465
Total Expenses	6,835,222	6,079,854
Surplus for the year	141,080	177,523



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