



Annual Report 2019-2020



kambu
Aboriginal and Torres Strait Islander
Corporation for Health



Acknowledgement

Kambu Aboriginal and Torres Strait Islander Corporation for Health (Kambu Health) acknowledges the traditional owners of the land in which we provide our services to, the Jagera, Yuggera and Ugarapul peoples.

We pay our respects to our Elders, past, present, and emerging.

WARNING: Aboriginal and Torres Strait Islander peoples are warned photographs in this document may contain images of deceased persons which may cause sadness or distress.

Contents

Welcome	6
Message from the Chairperson	8
Coronavirus	10
The impact on our community and our response	12
About Kambu Health People - Health - Community	14
Our history	16
Vision and mission	17
Commitment to quality	20
Our services	
Ipswich Clinic	22
Laidley Clinic	24
Booval Respiratory Clinic	26
Kambu Early Years Learning Centre	28
Children and Family Centre	30
Family Participation Program	32
Family Wellbeing Service	38
Health targets	40
Accreditation	44
Partners and Funders	48
Financial Report	52

Welcome

- Message from the
Chairperson Allan Fisher



Message from the Chairperson Allan Fisher

As the Chairperson of Kambu Aboriginal and Torres Strait Islander Corporation for Health, I am pleased to be able to present our Annual Report for the 2019-2020 period.



This year has had many challenges. The Coronavirus pandemic (COVID-19) changed the way Kambu Health services were delivered to the Ipswich and Lockyer Valley communities.

As COVID-19 spread throughout the world, the Commonwealth Government moved to fund Respiratory and Fever Clinics, a specific service to alleviate the pressure on public hospital emergency departments. Early in 2020, our Booval clinic was modified into a Fever Clinic.

In the Ipswich and Laidley clinics and our other services, including Child Care, we initiated a 'concierge' style welcome area that provided safety for staff and clients. We asked people specific questions about COVID-19 related travel and provided anti-bacterial gel and, when required, masks for people before entering the centres.

Kambu Health launched the Elders Rapid Response Home Care project, subcontracted through the Institute for Urban Indigenous Health (IUIH), with funding from the Commonwealth Government, specifically to support our local Aboriginal and Torres Strait Islander Elders isolated at home since COVID-19.

The Rapid Response Home Care teams have been providing a holistic and culturally appropriate care model, ensuring Elders have the right supports in place, including referrals to appropriate clinical care.

In 2019, we saw the introduction of a new service, the Family Participation Program (FPP). Its purpose is to provide a culturally safe service, independent of Child Safety, offering Indigenous families a choice for their children's care and protection needs.

I would like to take this opportunity to acknowledge the hard work and dedication of our previous board members and welcome our new skills-based directors to the board.

I also want to recognise the leadership at Kambu Health, our Chief Executive Officer, Stella Johnson and Chief Operations Officer, Sharon Kinchela, as well as all the Kambu Health staff who have demonstrated professionalism and provided quality services to the health and wellbeing to our clients and members of the Ipswich, Lockyer Valley and West Moreton regional communities throughout this challenging year.



BOARD MEMBERS 2019-2020

- Allan Fisher (Chair)
- Lee-ann Roch - Director
- Jill Davidson - Director
- Calvin Carlo - Director
- Damain Storey - Director
- Lesley Kanofski - Director
- Murray Saylor - Skills-Based Director

Coronavirus

- The impact on our community and our response



The impact on our community and our response

This year the world came to a stop with the outbreak of a new strain of coronavirus better known as COVID-19.

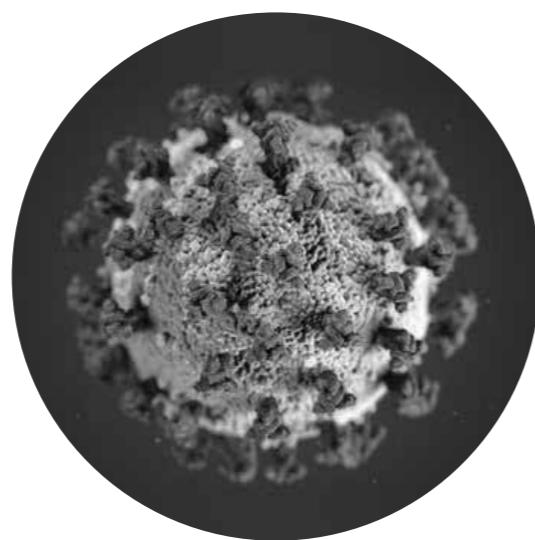
Kambu Health immediately identified the need for a service where our community felt safe to get tested for the disease. Our clinic at Booval became a Respiratory Clinic, with GP's and nurses performing tests for Kambu Health clients and community members.

As more cases of COVID-19 were detected in the Ipswich and surrounding areas, our Respiratory Clinic extended opening hours, with our dedicated staff committed to ensuring the safety of the public.

To ensure our clinics were COVID-19 safe, a welcome concierge service was introduced. Clients to our clinics were screened carefully for COVID-19 symptoms to minimise the risk to those identified as vulnerable peoples and other patients and the Kambu Health staff.

Kambu Health's Early Years, Family Services, NDIS and Social Health team were still delivering services to clients, overcoming the challenge of using technology to communicate in place of traditional face-to-face appointments.

Through this tough time, all Kambu Health staff remained committed to ensuring our community's health and wellbeing.



About Kambu Health

People - Health - Community

- Our history
- Vision and mission
- Commitment to quality



Our history

Kambu Health started from humble beginnings.

There was a need for health care for our local Aboriginal and Torres Strait Islander peoples. Ipswich residents Ken Dalton, Cecil Fisher, Roberta Thompson, Faye Carr, Bill Robertson, and Doreen Thompson came together to address the call.

From a room in Doreen Thompson's house, our community received culturally appropriate health care by doctors who travelled from the Aboriginal and Torres Strait Islander Community Health Service in Brisbane, once a week.

Today, Kambu Aboriginal and Torres Strait Islander Corporation for Health employs over 100 people, providing comprehensive medical, specialist and social health services to the Ipswich and surrounding areas, with three clinics; in Ipswich, Laidley, and Booval.



Vision and mission

Our vision is to provide accessible and culturally appropriate health and community services guided by community governance, best practice, and identity.

Our mission is to provide essential, tailored, and high-quality health and community services to the Aboriginal and Torres Strait Islander peoples in the Ipswich and West Moreton region, through a team of dedicated staff who support the advancement of our people and culture. Kambu Health is continuously evolving to meet our community's changing needs and facilitates partnerships and alliances with key stakeholders.

OUR STRATEGIC PLAN 2017-2021 OBJECTIVES

- To advance and assist Aboriginal and Torres Strait Islander peoples in the community.
- To co-operate and partner with related public and private services.
- To participate in research and conduct training on issues important to Aboriginal and Torres Strait Islander peoples.
- To advocate matters affecting the community before the public and relevant authorities.
- To promote and foster financial self-sufficiency and self-determination
- To provide a well-governed, professional and culturally appropriate service to the community.



Commitment to quality

The Quality and Systems team continue to grow and expand the team's delivery of services, despite the challenging year we have had.

The team has maintained accreditation against the ISO 9001:2015 Quality Management System standards, with a surveillance audit conducted last year.

We have also continued our accreditation against the Human Services Quality Framework Standards (HSQF), with our Family Wellbeing Service (FWS) and Family Participation Program (FPP) successful.

This year has also seen the Quality Team prepare for and achieve accreditation against the NDIS standards. We have provided these services for some years under the Human Services Quality Standards, however, now all NDIS providers must comply with the NDIS standards.

IT and Cyber Security continue to be an important focus for Kambu Health. The Quality Team spent significant time engaging with appropriate stakeholders to determine targeted strategies and begin implementation. These have included training sessions and phishing campaigns for all staff, and recruitment for an ICT technical specialist.

We have boosted membership of our Quality team with the appointment of our Communications Officer Alanah Stortelder. We have seen our social media presence increase resulting in more engagement from the community. Some of our programs had to be implemented virtually due to COVID, with Facebook groups created.



Our services

- Ipswich Clinic
- Laidley Clinic
- Booval Respiratory Clinic
- Kambu Early Years Learning Centre
- Children and Family Centre
- Family Participation Program
- Family Wellbeing Service



Ipswich Clinic

The Ipswich clinic continued to operate through COVID-19.

Kambu Health implemented protective measures at the Ipswich clinic to ensure staff and community members were safe from COVID-19, with a concierge service stationed at the clinic entrance. Trained staff members screened clients with COVID-19 questions, and triage if required. Staff provided clients with hand sanitiser and masks. Once cleared by the screening process, clients were free to proceed to their appointments.

When waiting in the reception area, people participated in social distancing recommendations of 1.5 metres between each other at a minimum. Clients with flu-like symptoms were then further referred to the Booval Respiratory clinic to get tested. Clients who were not able to come to a face-to-face appointment with a GP could still attend their appointments with the assistance of Telehealth, where a phone or video consult would take place.

To address the need for care for our community Elders, the Kambu Health Social Team started providing wellbeing calls in place of traditional groups meeting face-to-face. Kambu Health clients and community could now access more information about

health and wellbeing, via social media with educational videos online.

The Ipswich clinic expanded its services, making it easier for community members to receive health care and information.

The Walk-in Flu Vax Clinics in Ipswich was a success, with clients able to receive their flu vaccination without having to book an appointment.

New systems and processes were implemented, along with several new staff members, ensuring efficiency in the clinic.

The Ipswich clinic would like to give thanks to the following organisations and agencies which supported it during the year:

- Institute for Urban Indigenous Health
- Health Wise
- Primary Health Networks
- University of Southern Queensland
- Breast Screen Queensland
- Kruger Pharmacy
- Citiswiche Community Discount Pharmacy

Because of their involvement we can support our clients the way we do.



Laidley Clinic

Kambu Health’s Laidley clinic continued to provide health care to the community during the impact of COVID-19.

Front line staff received training on ensuring client COVID-19 safety and safety to themselves and other staff. Personal Protective Equipment (PPE) was worn by doctors and nurses where required, and staff received concierge training, knowing how to effectively screen clients for COVID-19 before entry to the clinic.



Clients with cold and flu-like symptoms were assessed in their car safely and further referred to the Booval Respiratory Clinic for COVID-19 testing. Our doctors offered Telehealth consults to clients who had presented to the clinic for other health reasons.

Regular clients of the Laidley Clinic have been patient and understanding of the processes implemented throughout the isolation and restriction period, recognising the need to stop the spread of COVID-19 in the community.

The Walk-in Flu Vax Clinics during the same period as COVID-19 was a success, with clients able to receive their flu vaccination while observing restrictions that were in place.





Booval Respiratory Clinic

With a high demand for assessment and care of Aboriginal and Torres Strait Islander peoples regarding Coronavirus (COVID-19), Kambu Health's Booval clinic became a Special Purpose Clinic known as the Booval Respiratory Clinic, accessible to all in the Ipswich and Lockyer Valley regions.

OUR RESPIRATORY CLINIC

- Contributing to the collective effort to minimise unnecessary hospital attendance.
- Targeted training, expertise, and effort in infection control, clinical triage, resources to support care for more severely unwell including critically ill patients.
- A dedicated facility, with features designed to maximise infection control, testing, care and follow up for people potentially affected by COVID-19.
- Addressing potential barriers to Aboriginal and Torres Strait Islander peoples.
- Accessing timely COVID-19 and other acute respiratory disease assessment and care.
- Reduction in the potential surge in demand on existing GP clinics, thereby enabling continuation of important acute, preventive, chronic disease, and mental health care throughout the pandemic.
- Providing two teams of clinical staff and support team (internal and external concierge) with an alternating roster.

Kambu Early Years Learning Centre

The beginning of 2020 saw changes to staff roles and positions, with Nicole Ward accepting the role of Director.



COVID-19 changed the way staff engaged with families and children and how the centre operated. COVID-19 safe measures were implemented. Where required, 1.5m social distancing, screening with COVID-19 questions, temperature checking of children attending day care and kindy, and limitations on visitors to the centres.

During this period, there was a reduction in the number of children attending day care and kindergarten, with children in attendance from essential workers' families.

However, dedication to the curriculum continued, with kindergarten staff providing families with educational packs for children who could not attend face-to-face learning at the centre.

The commitment to staff performance continues to be a priority now and in the future, with staff undertaking upskilling and professional development; receiving training and assessment for required qualifications.





Children and Family Centre

The Children and Family Centre (CFC) is continually updating and improving Early Years Education, Health, Parent programs, and Family and Child support.

We have continued to deliver programs both within the centre and online under the COVID-19 restrictions. Parents and children accessed selected online groups through technologies such as Zoom and Microsoft Office Teams.

CFC staff ensured everyone was COVID-19 safe, implemented cleaning routines, set parent and child ratios in line with distance regulations.

COVID-19 had an impact, with a drop in attendance for our groups in early 2020. Playgroups are expecting to see more families enrolling into the programs when COVID-19 restrictions ease, and staff and families are looking forward to CFC running its full set of programs and activities.

CFC staff have implemented cleaning routines, set parent and child ratio following the distancing regulations, ensuring everyone is COVID-19 safe.

GOALS FOR POST COVID-19

- Continued connections with Collective Action Group.
- Re-establish and develop further partnerships with organisation such as Education Queensland Schools, Mission Australia, Kummara, Playgroup QLD, Hippy, EACH, Ipswich Region Local Level Alliance, Brisbane Valley Interagency.
- Review CFC operational plan to enable support to Kambu within the Clinic, Family Participation Program, Social Health, Rapid Response Elders Program and Youth Mentor programs.
- Provide staff training and/or upskilling to accommodate necessary changes.



Family Participation Program

The Family Participation Program (FPP) commenced in early 2019 at Kambu Health.

“We wouldn't have her home... we wouldn't be where we are today, if we didn't work with FPP.”

FEEDBACK FROM A MOTHER

Recruitment for this new program was underway to build a team to facilitate family-led decision making for those with children in care and involved with Child Safety.

The staff settled quickly, and the priority was to promote the program to the community and the Department of Child Safety, Youth and Women. The Manager, Yarraga Weatherall, worked to ensure all internal staff also understood the program and referral pathways. The approach always remained client-focused, at this point, at this time and this place.

During this year, COVID-19 posed some initial challenges, however, the team were able to work from home with technology support.

There was direct client contact, family meetings and home visits where it was safe to do so.

The number of clients for the financial year was set at 200 families; a target set before COVID-19 arrived. Owing to the restrictions and reduced staff capacity, whilst many families could not be engaged, a total of 60 families successfully worked with the FPP team. Given the FPP program was new, the year was successful for the cases that were able to be closed with excellent family involvement and outcomes.

“This would have to be the best family plan that we have received from any FPP provider so far.”

FEEDBACK FROM BEAUDESERT CHILD SAFETY SERVICE CENTRE SENIOR TEAM LEADER AND CULTURAL PRACTICE LEADER

Training across a range of areas was scheduled for delivery in 2021, ensuring staff skills in FPP and across Kambu Health are up to date. This will include Suicide Awareness, Aboriginal and Torres Strait Islander Mental Health First-Aid, Safe and Together, Child Protection and Family and Domestic Violence.

This year also saw the program prepare for the Human Services Quality Framework audit. Kambu Health received positive feedback from clients as part of the requirements under the audit. Some gaps in the service were identified, including efficient management and administrative processes, including case notes within the program. These will be implemented in 2020 – 21. Having the team involved was a good learning experience and opportunity for continuous improvement for program service delivery.

“Thank you so much for completing this family plan. We are happy to accept and endorse this plan for the IPA as it really clearly sets out the worries that both Child Safety and the family have and the actions are really clear to work towards our mutual goals.”

FEEDBACK FROM IPSWICH NORTH CHILD SAFETY SERVICE CENTRE SENIOR TEAM LEADER

Program evaluation through client feedback is part of our service requirement. We pride ourselves in providing the best outcomes for our Family Led Decision Making processes for child protection. It is nice to recognise that the program is working for our community, clients and partners as mentioned in our testimonials.

Family Wellbeing Service

Over the past 12 months, our Family Wellbeing Service (FWS) has supported a total of 64 families, with almost 5300 hours of casework provided. Most of the referrals come from the Departments of Child Safety, Youth and Women, Health, Education Queensland, the Queensland Police Service, as well as self-referrals. In addition, FWS delivered 444 hours of targeted groups sessions and 40 hours of community development, coordination, and support (activities).

Of the families who exited the service, 37% closed with many of their needs met through our support service. The types of outcomes FWS has been able to achieve include making substantial improvements in being safe and protected from harm, improved cultural identity and connectedness, and progress in life skills.

FWS supports Elders and community members in the Lockyer Valley, offering weekly groups that support social and emotional wellbeing, increase community connectedness and social inclusion, and provide opportunities for people to learn new skills and receive appropriate referrals.

The Indigenous Youth and Family Worker, (IYFW) as part of the FWS, has provided 136 hours of support to young people at risk of

coming to Youth Justice’s attention and has supported 35 young people.

COVID-19 presented several struggles for FWS, namely, adjusting services to providing family case management remotely or in a very modified way to ensure adherence to COVID -19 guidelines. FWS had to suspend groups and activities during this period and subsequently make creative changes to maintain connections with the community. At times families struggled with isolation, access to resources, activities and options for school holiday times, food insecurity, domestic violence, and substance use. FWS was able to use brokerage funds to provide support to families during COVID-19 and ongoing.

Kambu FWS currently has nine staff in the team and offers students the opportunity to complete their tertiary degree placement. 2021 is looking to be a great year, with new groups starting in term one.

We will be delivering a range of groups across the lifespan including a new Deadly Families playgroup, a cultural homework group, re-instating Laidley Women’s group, Circle of Security, and 123 Magic (parenting). We are also looking at offering an Alcohol and Other Drug mutual aid/peer support group called SMART recovery.



Health targets



Health targets

National KPI Data taken from IAHP Primary Health Care report.

HEALTH CHECKS			
PI03 MBS HEALTH ASSESSMENT (AGED 25-54)		NATIONAL IMPLEMENTATION PLAN (IP) GOAL 2023: 63%	
ORGANISATIONAL NATIONAL KPI'S AND TARGETS		TARGETS	STRATEGIES FOR EACH YEAR
PI03 (AGED 25-54)	Results 30 June 2020	61%	<ul style="list-style-type: none"> Results only as of 30 June 2020.
	Targets 2020/2021 (%)	62%	<ul style="list-style-type: none"> Ensure participants to men's group, women's group, diabetes support group and other groups, encourage all participants to have a health assessment.
	Targets 2021/2022 (%)	63%	<ul style="list-style-type: none"> Establish more self-help groups where all participants are required to have a health check.
	Targets 2022/2023 (%)	64%	<ul style="list-style-type: none"> Maintain the above.

DIABETES CARE CLIENTS WITH TYPE 2 DIABETES			
PI05 HBA1C RESULT RECORDED (12 MONTHS)		NATIONAL IMPLEMENTATION PLAN (IP) GOAL 2023: 69%	
ORGANISATIONAL NATIONAL KPI'S AND TARGETS		TARGETS	STRATEGIES FOR EACH YEAR
PI05 HBA1C RESULT RECORDED (12 MONTHS) CLIENTS WITH TYPE 2 DIABETES	Results 30 June 2020	62%	<ul style="list-style-type: none"> Results only as of 30 June 2020.
	Targets 2020/2021 (%)	64%	<ul style="list-style-type: none"> Ensuring data is entered correctly. Ongoing training for clinicians as required. Quarterly follow-ups.
	Targets 2021/2022 (%)	66%	<ul style="list-style-type: none"> As above.
	Targets 2022/2023 (%)	69%	<ul style="list-style-type: none"> As above.

HEALTH CHECKS			
PI03 MBS HEALTH ASSESSMENT (AGED 55+)		NATIONAL IMPLEMENTATION PLAN (IP) GOAL 2023: 74%	
ORGANISATIONAL NATIONAL KPI'S AND TARGETS		TARGETS	STRATEGIES FOR EACH YEAR
PI03 (AGED 55+)	Results 30 June 2020	67%	<ul style="list-style-type: none"> Include standard question for Elders as part of COVID welfare checks, to ensure they all come in for a health check.
	Targets 2020/2021 (%)	69%	<ul style="list-style-type: none"> Increase number of Home Medicine Reviews.
	Targets 2021/2022 (%)	71%	<ul style="list-style-type: none"> As above.
	Targets 2022/2023 (%)	73%	<ul style="list-style-type: none"> As above.

DIABETES CARE			
PI23 BLOOD PRESSURE RECORDED		NATIONAL IMPLEMENTATION PLAN (IP) GOAL 2023: 70%	
ORGANISATIONAL NATIONAL KPI'S AND TARGETS		TARGETS	STRATEGIES FOR EACH YEAR
PI23 BLOOD PRESSURE RECORDED	Results 30 June 2020	66%	<ul style="list-style-type: none"> Results only as of 30 June 2020.
	Targets 2020/2021 (%)	67%	<ul style="list-style-type: none"> Ensuring data is entered correctly. Ongoing training for clinicians as required.
	Targets 2021/2022 (%)	68%	<ul style="list-style-type: none"> As above.
	Targets 2022/2023 (%)	69%	<ul style="list-style-type: none"> As above.

Accreditation



Accreditation



Human Services
Quality Standards
QUALITY CERTIFIED
ORGANISATION



ISO 9001:2015
QUALITY CERTIFIED
ORGANISATION



**Partners
and Funders**



Partners and Funders



**Financial
Report**



DIRECTOR'S REPORT

FOR THE YEAR ENDED 30 JUNE 2020

The directors present their report on Kambu Aboriginal and Torres Strait Islander Corporation for Health Trading as Kambu Health for the financial year ended 30 June 2020.

GENERAL INFORMATION

Information on directors

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

- Lee-Ann Roch - Chair
- Allan Fisher - Elected Director (term expired 4 October 2020)
- Jill Davidson - Elected Director
- Calvin Carlo - Elected Director
- Damain Storey - Elected Director
- Lesley Kanofski - Elected Director
- Mr Murray Saylor - Skills Based Director
- Rachel Nolan - Skills Based Director
- Andrew Weil - Skills Based Director

LEE-ANN ROCH	Director - elected 17/10/2019
Qualifications	Current Chair - elected by Board October 2020. Cert IV Community Health Services; Former Chair May 2015 to May 2017.
Experience	Indigenous people/organisations; local community; prior board/management committee roles; interim CEO.
ALLAN FISHER	Director - term expired 4/10/2020
Experience	Former Chair October 2018 to October 2020. Former Chair, Kambu CATSI transition board. Indigenous Primary Health Care; indigenous people/organisations; Board/Management Committee roles; Health Services Sector; CEO/senior management; strategy & Policy; Aboriginal controlled Community Health Services Sector.
JILL DAVIDSON	Director - elected 17/10/2019
Qualifications	Certificates in Aged Care
Experience	Indigenous Primary Health Care; indigenous people/organisations.
CALVIN CARLO	Director - elected 19/11/2019
Experience	Indigenous people/organisations; local community; prior board and management committee roles.
DAMAIN STOREY	Director - elected 19/11/2019
Experience	Indigenous people/organisations; local community.

DIRECTOR'S REPORT

FOR THE YEAR ENDED 30 JUNE 2020

LESLEY KANOFSKI	Director - elected 19/11/2017 (Term expired 19/11/2019)
Qualifications	Diploma in Community Services. Cert 4 Small Business Management, Cert 3 in Aged Care
Experience	Indigenous people/organisations; local community; prior board and management committee roles
MURRAY SAYLOR	Skills Based Director - Appointed 15 th January 2019 (Resigned 18/8/2019)
Qualifications	Certificate II in Rail Infrastructure Certificate IV in Training and Assessment, Gold Coast Learning Centre Certificate IV - Frontline Management, Brisbane North Institute of TAFE Diploma of Government (Management), ATSI Graduate Development Program 2004, Bachelor of Business, James Cook University
Experience	Murray Saylor is the founder and Managing Director of Tagai Management Consultants (TMC). Murray is an action oriented procurement and sustainable community specialist, trainer, mentor and community volunteer with over 20 years in the public and private sector. Murray has worked on Queensland and Federal Government strategic policy and program initiatives within housing, defence, Indigenous affairs and taxation.
RACHEL NOLAN	Skills Based Director - Appointed 21/7/2020
Qualifications	BA(Hons), GradDip Arts, GAICD
Experience	Rachel Nolan is an experienced non-executive director and Chair of commercial and not for profit boards. She is a public policy specialist who, in addition to her current board roles, holds an executive position at a think-tank and teaches public administration programs for foreign governments through the University of Queensland. Rachel spent 11 years in the Queensland Parliament as Member for Ipswich and served as the Minister for Finance, Transport, Natural Resources and the Arts. In those roles she ran a major program of economic reform.
ANDREW WEIL	Skills Based Director - Appointed 21/7/2020
Qualifications	BCom LLB LLM, GradDipACG, FAICD FGIA FCG
Experience	Andrew is a Non-Executive Director, Chartered Secretary and qualified Lawyer with over 20 years of Board experience in private and the Not-for-profit sectors. Andrew brings to the organisation skills and experiences gained from chairing one of Queensland's largest and most successful healthcare and community service organisations for over 6 years and from chairing a large and successful organisation based in Northern New South Wales that provides disability services (NDIS), mental health programs, community programs and community housing.

Directors have been in office since the start of the financial year to the date of this report unless otherwise stated.

DIRECTOR'S REPORT

FOR THE YEAR ENDED 30 JUNE 2020

PRINCIPAL ACTIVITIES

Kambu Aboriginal and Torres Strait Islander Corporation for Health's core business is delivering comprehensive, culturally appropriate primary health care and health support programs that are the highest quality, are sustainable and accessible to the Ipswich and West Moreton communities. Along with the General Practice clinics, health support programs include:

- Diabetes and Nutrition
- Chronic Disease
- Child and Maternal Health
- Men's Health
- Women's Health
- Healthy Schools
- Hearing Health
- Mental Health Advocacy
- Family Wellbeing Services
- Family Participation Program
- Young People's Health
- Sport and Fitness
- NDIS
- Dental Services
- Allied Health Services
- Early Years learning
- Children Family Centre
- Ipswich Education & Youth Sports Program

There were no significant changes in the nature of the Company's activity during the financial year.

SHORT-TERM AND LONG-TERM OBJECTIVES

- continue to expand the delivery of comprehensive primary health care and health support programs that are the highest quality, are sustainable and accessible to the Ipswich and West Moreton communities;
- Facilitate and promote partnerships and alliances with other health care providers and stakeholder groups to maintain quality results and outcomes through continuous performance improvement and learning.
- Refurbish and expansion of the Ipswich Base Clinic.

STRATEGY FOR ACHIEVING THE OBJECTIVES

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

- 1) Services - To provide primary health care and health support programs that are of the highest quality, are sustainable and accessible to the community;
- 2) Access - To improve access to comprehensive primary health care services and information that supports improvement in health and well-being;
- 3) Collaboration - Develop strong partnerships and collaborative processes with other government and non- government service providers to improve service coordination and health outcome for the community;

DIRECTOR'S REPORT

FOR THE YEAR ENDED 30 JUNE 2020

- 4) Consultation - Establish mechanisms that provide the opportunity for staff, individuals, communities and organisations to have input into the planning, design, development, delivery and evaluation of services;
- 5) Capacity - Build the capacity and resources of the organisation and workforce to undertake effective and sustainable comprehensive primary health care services;
- 6) Accountability - To ensure the effective corporate governance and sustainability of the organisation through incorporation of the entity and establishment of a skills-based Board of Directors.

PERFORMANCE MEASURES

The Corporation measures its own performance through the use of both quantitative and qualitative benchmarks. The benchmarks are used by the directors to assess the financial sustainability of the Corporation and whether the Corporation's short-term and long-term objectives are being achieved.

COMPANY SECRETARY

The following person held the position of Company secretary at the end of the financial year:

Mike Swartz GAICD

Mike is an experienced Corporate Governance Consultant and has provided advice support and guidance to many organisations notably in the not for profit and indigenous health sectors in Australia Mike was appointed Company Secretary by the Board in February 2018.

MEETINGS OF DIRECTORS

During the financial year, 13 meetings of directors were held. Attendances by each director during the year were as follows:

	Directors' Meetings	
	Number eligible to attend	Number attended
Allan Fisher	13	13
Jill Davidson	13	11
Lee-Ann Roch	13	12
Calvin Carlo	10	9
Damain Storey	10	10
Lesley Kanofski	2	2
Murray Saylor	1	1

WINDING UP

If any surplus remains following the winding up of the corporation, the surplus will not be paid to our distributed amongst Members, but will be given or transferred to another entity which is:

- a) an organisation with similar purposes which is not carried on for profit or gain of its individual members;
- b) required to apply its profits (if any) or other income in promoting objects similar to those of the Corporation; and
- c) endorsed as a deductible gift recipient under sub-division 30-BA of the ITAA, such entity to be determined by the Members at or before the winding up and in default, by application to the Supreme Court of Queensland for determination.

DIRECTOR'S REPORT FOR THE YEAR ENDED 30 JUNE 2020

SUBSEQUENT EVENTS

No matters or circumstances have arisen since the end of the financial year which significantly affected or could significantly affect the operations of the consolidated group, the results of those operations or the state of affairs of the consolidated group in future financial years.

AUDITOR'S INDEPENDENCE DECLARATION

The lead auditor's independence declaration in accordance with *Corporations (Aboriginal and Torres Strait Islander) Act 2006* has been received and can be found on page 6 of the financial report.

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

Chair  Dated this 13 Day of November 2020
Lee-Ann Roch



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AUDITOR'S INDEPENDENCE DECLARATION

UNDER SECTION 339-50(4) OF THE CORPORATIONS (ABORIGINAL AND TORRES STRAIT ISLANDER) ACT 2006

KAMBU ABORIGINAL AND TORRES STRAIT ISLANDER CORPORATION FOR HEALTH

I declare that to the best of my knowledge and belief, during the year ended 30 June 2020, there have been:

- i. no contraventions of the auditor's independence requirements as set out in the *Corporations (Aboriginal and Torres Strait Islander) Act 2006* in relation to the audit; and
- ii. no contraventions of any applicable code of professional conduct in relation to the audit.


PILOT PARTNERS
Chartered Accountants


CHRIS KING
Partner

Signed on 13 November 2020

Level 10
1 Eagle Street
Brisbane Qld 4000

STATEMENT OF PROFIT OR LOSS AND OTHER COMPREHENSIVE INCOME

FOR THE YEAR ENDED 30 JUNE 2020

	Note	2020 \$	2019 \$
Grants income	2	8,713,448	9,471,098
Other income	2	3,560,351	2,861,722
Employee benefits expense		(7,678,875)	(7,183,484)
Program expenses		(226,663)	(165,387)
Accounting and audit fees		(46,339)	(31,346)
Administration expenses		(240,207)	(255,598)
Board meeting expenses		(182,736)	(124,463)
Computer expenses		(215,480)	(212,538)
Depreciation and amortisation expenses		(648,506)	(305,590)
Insurance expenses		(102,546)	(95,285)
Motor vehicle expenses		(147,886)	(187,856)
Rent expenses		(159,031)	(155,102)
Repairs and maintenance		(209,891)	(145,008)
Staff and recruitment costs		(346,447)	(333,611)
Other operating expenses		(2,099,681)	(2,120,108)
Profit / (loss) from ordinary activities before income tax expense		(30,489)	1,017,444
Income tax expense		-	-
Profit / (loss) for the year		(30,489)	1,017,444
Other comprehensive income			
Items that will not be reclassified subsequently to profit or loss:			
Gain on revaluation of land and buildings		-	708,910
Total comprehensive income for the year		(30,489)	1,726,354

The accompanying notes form part of these financial statements.

STATEMENT OF FINANCIAL POSITION

AS AT 30 JUNE 2020

	Note	2020 \$	2019 \$
Assets			
Current Assets			
Cash and cash equivalents	4	3,024,879	3,070,585
Trade and other receivables	5	177,158	115,467
Other assets	6	6,938	-
Total Current Assets		3,208,975	3,186,052
Non-Current Assets			
Plant and equipment	7	12,242,225	12,686,614
Right of use assets	8	1,173,617	-
Total Non-Current Assets		13,415,842	12,686,614
Total Assets		16,624,817	15,872,666
Liabilities			
Current Liabilities			
Trade and other payables	9	723,962	1,081,651
Lease liabilities	10	338,278	-
Short-term provisions	11	461,508	425,365
Other liabilities	12	99,643	565,049
Total Current Liabilities		1,623,391	2,072,065
Non-Current Liabilities			
Lease liabilities	10	883,974	-
Long-term provisions	11	165,241	317,668
Total Non-Current Liabilities		1,049,215	317,668
Total Liabilities		2,672,606	2,389,733
Net Assets		13,952,211	13,482,933
Equity			
Reserves		1,878,825	1,878,825
Retained earnings		12,073,386	11,604,108
Total Equity		13,952,211	13,482,933

The accompanying notes form part of these financial statements.

STATEMENT OF CHANGES IN EQUITY

FOR THE YEAR ENDED 30 JUNE 2020

	Note	Retained Surplus	Reserves	Total
		\$	\$	\$
Balance at 1 July 2018		10,586,664	1,169,915	11,756,579
Total profit/(loss) for the period		1,017,444	-	1,017,444
Revaluation of land and buildings		-	708,910	708,910
Balance at 30 June 2019		11,604,108	1,878,825	13,482,933
Balance at 1 July 2019		11,604,108	1,878,825	13,482,933
Impact on adoption of AASB 16 Leases		(20,607)	-	(20,607)
Impact on adoption of AASB 15 and AASB 1058		520,374	-	520,374
Total profit/(loss) for the period		(30,489)	-	(30,489)
Balance at 30 June 2020		12,073,386	1,878,825	13,952,211

The accompanying notes form part of these financial statements.

STATEMENT OF CASH FLOWS

FOR THE YEAR ENDED 30 JUNE 2020

	Note	2020	2019
		\$	\$
Cash Flows From Operating Activities			
Receipts from customers		3,799,433	3,414,223
Operating grants received		9,645,258	9,221,836
Payments to suppliers and employees		(13,367,091)	(11,502,957)
Interest received		37,692	55,888
Net Cash Provided By / (Used In) Operating Activities	15	115,292	1,188,990
Cash Flows From Investing Activities			
Proceeds from sale of property, plant and equipment		229,954	-
Payments for property, plant and equipment		(73,139)	(1,436,310)
Net Cash Provided By / (Used In) Investing Activities		156,815	(1,436,310)
Cash Flows From Financing Activities			
Repayment of lease liability		(317,813)	-
Net Cash Provided By / (Used In) Financing Activities		(317,813)	-
Net increase / (decrease) in cash held		(45,706)	(247,320)
Cash at beginning of financial year		3,070,585	3,317,905
Cash At End Of Financial Year	4	3,024,879	3,070,585

The accompanying notes form part of these financial statements.

DIRECTORS' DECLARATION

FOR THE YEAR ENDED 30 JUNE 2020

The directors of the Corporation declare that:

1. In the directors' opinion the financial statements and notes, as set out on pages 7 to 29, are in accordance with the *Corporations (Aboriginal and Torres Strait Islander) Act 2006* and:
 - (a) comply with Australian Accounting Standards – Reduced Disclosure Requirements; and
 - (b) give a true and fair view of the Corporation's financial position as at 30 June 2020 and of its income statement for the year ended on that date.
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.

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

Chair



Lee-Ann Roch

Dated this 13 Day of November 2020



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INDEPENDENT AUDITOR'S REPORT

TO THE MEMBERS OF KAMBU ABORIGINAL AND TORRES STRAIT ISLANDER CORPORATION FOR HEALTH TRADING AS KAMBU HEALTH

OPINION

We have audited the financial report of Kambu Aboriginal and Torres Strait Islander Corporation for Health Trading as Kambu Health ("the Corporation"), which comprises the statement of financial position as at 30 June 2020, the statement of comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies and the statement by the members of the Committee.

In our opinion, the accompanying financial report presents fairly, in all material respects, the financial position of the Corporation as at 30 June 2020, and of its financial performance and its cash flows for the year then ended in accordance with the *Corporations (Aboriginal and Torres Strait Islander) Act 2006*.

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 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.

OTHER INFORMATION

Those charged with governance are responsible for the other information. The other information comprises the information included in the Corporation's annual report for the year ended 30 June 2020, but does not include the financial report and our auditor's report thereon.



Our opinion on the financial report does not cover the other 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.

RESPONSIBILITIES OF MANAGEMENT AND THOSE CHARGED WITH GOVERNANCE FOR THE FINANCIAL REPORT

Management is responsible for the preparation and fair presentation of the financial report in accordance with the financial reporting requirements of the *Corporations (Aboriginal and Torres Strait Islander) Act 2006* and for such internal control as management determines is necessary to enable the preparation and fair presentation of a financial report that is free from material misstatement, whether due to fraud or error.

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

Those charged with governance are responsible for overseeing the Corporation's financial reporting process.

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 the 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.



A further description of our responsibilities for the audit of the financial report is located at the Auditing and Assurance Standards Board website at: <http://www.auasb.gov.au/Home.aspx>. This description forms part of our auditor's report.



PILOT PARTNERS
Chartered Accountants



CHRIS KING
Partner

Signed on 13 November 2020

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