#### ANNUAL REPORT 2023-24

Directions



WESTERN QUEENSLAND



#### Acknowledgement of Country

Western Queensland Primary Health Network (WQPHN) acknowledges the Aboriginal and Torres Strait Islander traditional custodians on whose land we walk, work and live across Western Queensland.

We acknowledge the stories, traditions and living culture and their continuing connection to the land and waters of our catchment.

We pay respect to Elders past and present and commit to building respectful and inclusive partnerships with Aboriginal and Torres Strait Islander peoples to improve health outcomes in our region.



HEALING COUNTRY – YAPATJARRA MUU PAINTED BY KALKADOON ARTIST, BROOKE SUTTON

#### COVER IMAGE: 'THE MUSTER' BY *KATARINA SILVESTER*, SOUTH WEST REGION *WINNER*

Winner of WQPHN's 2023-24 photography competition



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#### Thank you

to everyone who entered our 2023-24 photography competition. We are proud to feature this year's winners and a selection of shortlisted entries throughout our Annual Report.



#### Chair Message

#### Partnerships are the foundation of change

I would like to begin by acknowledging the Traditional Owners of the lands where WQPHN operates and pay my respects to their Elders, past and present. This year, the Board reaffirmed our commitment to First Nations health equity, launching our Health Equity Statement and First Nations Workforce Development Plan. These initiatives, co-designed with the Nukal Murra Alliance and Hospital and Health Services (HHSs) in our region, highlight our dedication to addressing longstanding health disparities in partnership with First Nations peoples and communities.

Strong, enduring partnerships have been key to our success this year. Through our collaboration with government, HHSs, Aboriginal Community Controlled Health Organisations (ACCHOs), primary health care providers, and community leaders, we have strengthened our alliances across the primary healthcare landscape to advance health outcomes and equity for all.

The Healthy Outback Communities (HOC) Alliance is another example of community-led partnerships driving positive change this year. Launched in Barcoo Shire in April, the HOC initiative is shifting the focus towards proactive wellbeing and system-wide improvements rather than solely treating illness.

This year, the Board has actively engaged with local communities, holding meetings in Mount Isa and Charleville. Our regional visits continue to build valuable connections and foster a deeper understanding of the diverse health needs and priorities across our patch. We also strengthened our engagement with governments, influencing policy and advocating for greater investment and support.

A key focus for 2024 has been enhancing our data and digital capabilities to stay connected with our people and partners, keep abreast of regional developments and gain deeper insights into the impact of our work. On behalf of the Board, I warmly acknowledge and thank CEO Sandy Gillies and her team for tailoring our responses to the region's needs while navigating new technologies, legislation and regulations. Their agility and bravery in doing things differently ensure we remain connected and responsive to unique community needs and challenges in an ever-changing environment.

As we look ahead, we anticipate a federal review of Primary Health Networks (PHNs). We're committed to showcasing our performance reporting and demonstrating how our unique approach delivers better, more affordable services closer to home. We're also focused on strategies for Board renewal and succession planning, welcoming new skills and experience to drive forward our strategic plan and manage risk.

Thank you to all our Board members, Company Secretary Rachel Portelli and independent Chair of our Finance and Risk Committee, Rod Margetts, whose counsel has guided WQPHN for another year. I also acknowledge the valued leadership and commitment of Dallas Leon, who stepped down from the Board in August, and outgoing Board member Jason Warnock who will be completing his service at the end of this year.

In closing, I would like to extend my sincere appreciation to everyone who has contributed this year. Together with our partners, the Board looks forward to building on our achievements and moving closer to our shared vision of healthier Western Queensland communities.

Liz

Liz Fraser Chair, WQPHN



In our work, communities are not just participants – they're the true experts and their voices must be at the centre of everything we do.

#### CEO Message

#### Nothing about us, without us

Our childhood experiences shape our future. Growing up in Winton, I've seen and experienced the barriers to healthcare that distance can create. But I've also seen the resilience, strength and wisdom that our communities bring. This understanding has shaped both my leadership and our approach at WQPHN.

I believe health reform must be driven by the very people it's designed to serve. It must come from the ground up. Because in our work, communities are not just participants – they're the true experts and their voices must be at the centre of everything we do.

It's about ensuring that every person, every community, no matter how remote, has the same opportunities for good health and wellbeing. Yet, in our region, healthcare access can still depend on your postcode. It's unacceptable that people living in remote and very remote parts of our country have shorter lifespans, living on average 12 to 14 years less than people in Australia's major cities<sup>1</sup>.

Even more alarming is the gap in life expectancy between First Nations people and non-Indigenous Australians in outback Queensland, on average 12 years lower for both men and women<sup>2</sup>. It's important to remember that health disparities like these are not just statistics; they're real people with real stories. That's why we continue to push for reform and new, innovative funding models that put people first.

This year, we've been fortunate to work alongside incredible community champions – passionate groups, organisations and individuals who are driving change from within. Our collaboration with Barcoo Shire Council in the heart of the Channel Country and the Royal Flying Doctor Service (Queensland Section), has seen the launch of the Virtual Health and Wellbeing Hub, a cornerstone of the Healthy Outback Communities (HOC) initiative launched in April.

This Hub empowers residents to develop their own personal wellbeing plan with support to access the services they need, when they need them. The early success of the HOC initiative, starting with Barcoo Shire has shown us what's possible when communities take the lead.

Our work is far from over but I'm incredibly proud of the progress we've made this year towards our *Paving our Way to 2026* Strategy. The stories throughout this report demonstrate our strategy in action – the dedication of our team, the strength of our partnerships and our shared commitment to sustainable, value-based health care implementation.

I would like to thank the WQPHN Board, led by Liz Fraser, for their support and guidance during the year. Thank you to my Executive Director Leisa Fraser and Senior Management Team for their dedication and continued hard work. To our team, thank you for the tireless and generous approach you bring to work every day. I would also like to thank their families and partners who support them.

Real change happens when we are connected to the communities we support.

Sandy

Sandy Gillies CEO, WQPHN

1. Australian Institute of Health and Welfare. Rural and remote health. https://www.aihw.gov.au/reports/rural-remote-australians/ rural-and-remote-health. Published 2023. Accessed 03/11/24 2. Australian Bureau of Statistics. Aboriginal and Torres Strait Islander life expectancy. https://www.abs.gov.au/statistics/people/aboriginal-and-torres-strait-islander-peoples/aboriginal-and-torresstrait-islander-life-expectancy/latest-release. Published 2023. Accessed 03/11/24 Western Queensland is one of Australia's most remote regions with a population of 63,000 people living across an area almost the size of Egypt (nearly one million square kilometres).

# WHO WE ARE

WQPHN is one of 31 Primary Health Networks (PHNs) established and funded by the Federal Government to improve the efficiency and effectiveness of primary care services for patients, particularly those at risk of poor health outcomes.

A key role of WQPHN is to assess the health care needs of communities and commission health services to meet those needs, minimising gaps or duplication. We achieve this by:

- working closely with general practitioners (GPs) and other health professionals to build the capacity of the health workforce to deliver high-quality care
- integrating health services at the local level to create a better experience for people, encourage better use of health resources, and eliminate service duplication.

#### **OUR PATCH**

We support unique communities with a place-based regional framework to plan and provide a way to work with our partners to tackle health inequality.

Our patch is divided into seven place-based geographic Commissioning Localities (CLs) and these are important when considering primary care, funding, demographic and cultural considerations.

Within the network of CLs are 20 unique Local Government Areas (LGAs).

#### Lower Gulf

5,085 residents

**62.3%** Aboriginal and Torres Strait Islander people

4 LGAs 107.591/km<sup>2</sup>









• Bedourie

Birdsville

\_

#### Thargomindah 🕤

Windorah

Winton

Longreach

Quilpie 🔾

Aramac o

Barcaldine

Blackall O

Cunnamulla

Alpha

Tambo

Charleville

Residents (2023 ERP) and Areas (km2): https://www.abs.gov.au/statistics/people/ population/regional-population/latest-release#data-downloads

First Nations proportion: https://phidu.torrens.edu.au/current/data/sha-aust/phn\_lga\_ parts/phidu\_data\_phn\_lga\_aust.xls

#### Mount Isa and Surrounds

**24,239** residents

**21.4%** Aboriginal and Torres Strait Islander people

**4 LGAs** (Boulia LGA split)

#### 119,107 km<sup>2</sup>

#### Western Corridor

1052 residents

**21.5%** Aboriginal and Torres Strait Islander people

**3 LGAs** (Boulia LGA split)

#### 200,624 km²

Injune 🖸

St Georae 🔾

Thallon

Roma 🔾

Surat

#### Central West

9,608 residents

**6.7%** Aboriginal and Torres Strait Islander people

4 LGAs

186,748 km<sup>2</sup>

**Far South West** 

6,762 residents

**17.7%** Aboriginal and Torres Strait Islander people

4 LGAs 188,751km<sup>2</sup>

#### Balonne

**4,379** people

**20.5%** Aboriginal and Torres Strait Islander people

1 LGA 31,150 km²

#### Maranoa

**12,960** residents

**9.7%** Aboriginal and Torres Strait Islander people

1 LGA 58,830 km²

# SNAPSHOT

Across the 2023-24 year we commissioned 159 contracts, worth almost \$22 million dollars.





#### WE COMMISSIONED OVER 27,000 OCCASIONS OF SERVICE



#### 1,500+

SERVICES PROVIDED FOR 750 Local Aboriginal and Torres Strait Islander People by our integrated Team care program

#### 12,000+

MENTAL HEALTH SERVICES TO SUPPORT MORE THAN 2,900 WESTERN QUEENSLANDERS (30% FIRST NATIONS CLIENTS)



#### 90+

OLDER PERSONS RECEIVED FACE-TO-FACE SUPPORT FROM OUR CARE FINDERS TO NAVIGATE AND ACCESS AGED CARE SERVICES

#### 385

AFTER CARE SERVICES PROVIDED FOR PEOPLE WHO HAD ATTEMPTED SUICIDE OR EXPERIENCED A SUICIDAL CRISIS

270+

YOUNG PEOPLE ACCESSED HEADSPACE Services for mental health support and early intervention





 Guest speaker Brendan Jones, National NDIS Regional and Remote Conference, Cairns 9-10 April 2024
 Nicole McClure, Diabetes Australia, Channel Country Ladies Day, Bedourie 20-22
 October 2023
 Event team, 2023 Channel Country Ladies Day
 Hayden Duffus, Winton Outback Festival, 19-23 September 2023
 2023 Channel Country Ladies Day
 WQPHN Staff Workshop, Brisbane, August 2023
 WQPHN Board members, Sybella mine Mount Isa
 Family at the Winton Outback Festival 2023 9/10. Dunny Derby WQ Dung Beetles, 2023 Winton Outback Festival
11. WQPHN CEO Sandy Gillies honoured as RFDS (Queensland Section) Ambassador
12. BUSHkids team members, Winton
Outback Festival 2023
13. From left, Shelly Reynolds (WQPHN) and Nicole McClure (Diabetes Australia), Channel Country Ladies Day
2023
14. WQPHN team members at the RFDS (Queensland Section)
Ball in Winton. From left, Carmen Goodger, Sandy Gillies, Jacquie Duffus, Leisa Fraser and Aidan Hobbs

















# **2023-24 EVENTS**

# Delivering on **PAVING OUR WAY**

In 2023, WQPHN launched our 2023-26 Strategic Plan, outlining bold actions to address health needs across the region. Our plan aims to ensure that every Western Queenslander has access to care and support close to home.

Guided by our five key directions for change, *Paving our Way to 2026* (POW26) serves as a roadmap to improve health equity, access and outcomes in rural communities, ensuring health reforms reach everyone, everywhere.

We have leveraged our knowledge and expertise, working closely with our partners and networks to develop and deliver innovative programs to communities across Western Queensland.

OUR VISION Healthier Western Queensland Communities

#### **OUR MISSION**

Paving our Way towards improved health outcomes for all Western Queenslanders through a comprehensive, integrated primary health care system in collaboration with our stakeholders, partners and communities.

#### TARGETS

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Commission health and community services to address the prioritised needs of Western Queensland communities. Support health care providers and partners through collective leadership and co-design to strengthen accessible, quality and wholeof-person centred care to Western Queenslanders.

#### DIRECTIONS FOR CHANGE - OUR STRATEGIC PRIORITIES

#### EMPOWERED COMMUNITIES leading the way

Bring communities together to actively inform and address local community health and wellbeing needs. Shift the focus from illness to wellness through community-led decision making.

#### SUPPORTED WORKFORCE built for the bush

Grow and support our health and wellbeing providers. Embrace new ways of working and embed local knowledge and skills in our communities. Improve engagement, satisfaction, inclusivity and the delivery of care.

#### **ENABLERS**

- KNOWLEDGE AND DATA
- INNOVATION AND RESEARCH
- DIGITALISATION AND TECHNOLOGY



Deliver integrated health services close to home so Western Queenslanders have access to planned and coordinated care that supports individuals' health care goals. Foster community care and wellbeing services to support Western Queenslanders to live healthier, happier lives.

#### GUIDING ACTIONS THAT POWER US

- TRANSPARENT
- PURPOSEFUL
- RESPONSIVE
- AUTHENTIC
- RESPECTFUL
  - IMPACTFUL

#### EQUITABLE ACCESS closer to home

Increase equal access to quality health and wellbeing services and the best possible outcomes. Focus on education and awareness, proactive prevention and early detection, and social prescribing.

#### AFFORDABLE SERVICES for everyone

Improve efficiency, sustainability and affordability by aligning investment and resources to prioritised community needs. Create a coordinated, connected system through pooled funding and co-commissioning.

#### QUALITY OUTCOMES for patients and families

Bring health and wellbeing reform to whole communities. Deliver high quality outcomes, positive experiences and person-centred care informed by community-driven priorities and insights.

- CAPABILITY AND INFLUENCE
- CULTURAL RESPECT
- TRANSPARENCY AND ACCOUNTABILITY
- GOOD GOVERNANCE

### **EMPONERED** communities leading the way

From the launch of Healthy Outback Communities in Windorah to aged care, disability and palliative care consultation forums in the South West, this year we amplified community voices to shape our priorities and drive our actions.

### Fostering meaningful conversations

#### Aged, disability and palliative care forums

In early 2024, WQPHN commenced another series of community consultation forums focused on aged care, disability and palliative care. These forums aimed to gather valuable feedback from community members regarding the barriers, gaps and local issues related to accessing and navigating these essential health services. Conducted in the South West region in the towns of Dirranbandi and Thargomindah, the forums achieved strong community engagement, fostering meaningful conversations about the needs and challenges faced by local residents.

During the events, attendees shared their personal experiences and engaged in solution-focused discussions with key industry partners, including the Council on the Ageing Queensland (COTA QLD), National Disability Services (NDS) and the National Disability Insurance Agency (NDIA). The conversations had a strong focus on palliative care and explored strategies to enhance collaboration with Queensland Health's South West Palliative Care Service, ensuring that the insights gathered would inform future improvements in service delivery.

#### Universal Aftercare co-design consultation

WQPHN is working in partnership with HHSs across the Western Queensland region to collaboratively address the critical issue of suicide prevention. The implementation of a new service, often referred to as Universal Aftercare, will provide ongoing support for individuals who have attempted suicide or who are experiencing suicide distress in the North West, South West and Central West Queensland.

WQPHN staff travelled across communities in the region from January 2023 to March 2024, to conduct community co-design consultation sessions, and to gather crucial feedback to inform the design of effective mental health services.

As a result of this deep engagement process led by WQPHN and in partnership with Commissioned Service Providers, three new Universal Aftercare services have been established, with expected roll-out commencing from October 2024. These services are expected to be instrumental in delivering wrap-around psychosocial supports, including the engagement of a peer-led workforce, with the aim of increasing wellbeing across Western Queensland communities.



## HEALTHY OUTBACK COMMUNITIES

Co-designed with communities, government, service providers and healthcare professionals, Healthy Outback Communities (HOC) empowers individuals and communities to take stock of their wellbeing.

This award-winning program shifts the focus from illness to wellness, adopting a demand-driven approach and new integrated ways of working.

In April 2024, Barcoo residents and community partners came together to celebrate the launch of Healthy Outback Communities, a new community-led health and wellbeing program that champions prevention, early intervention and individual care.

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#### SHIFTING THE FOCUS FROM ILLNESS TO WELLNESS ACROSS LIFE STAGES







HOC is established by the WQPHN and backed by an Alliance of key partners:



### **SUPPORTED** workforce built for the bush

In partnership with the community, we continued to support and advocate for Western Queensland's health workforce this year, launching a dedicated First Nations Health Workforce Plan for our region and investing in the Healthy Outback Communities wellbeing workforce in Barcoo Shire.







#### First Nations Workforce Plan to build a stronger future

The Nukal Murra Alliance and partner organisations Health Workforce Queensland, RFDS (Queensland Section), CheckUP and WQPHN met in Brisbane in June 2024 to finalise the Western Queensland First Nations Health Workforce Plan.

Expanding access to Aboriginal Community Controlled Health Organisations' (ACCHO) services is a proven approach to improve health outcomes and reduce health inequity in First Nations people. This aligns with the United Nations Declaration on the Rights of Indigenous People (UNDRIP).

The Western Queensland First Nations Health Workforce Plan is a five-year plan that will guide implementation based on agreed priorities, investment and the imperative for reform and change. All partners are committed to support existing and new partnerships, attract investment, stage pilot projects and systematically build capacity, infrastructure and collateral for long term sustained change.

This approach:

- allows organisations to support a strong ACCHO network across Western Queensland
- supports the national framework
- aligns organisational Reconciliation Action Plans (RAPs) and Health Equity Plans
- reduces duplication through building meaningful partnerships and cultural respect that strengthens the wider primary and hospital sector.

In 2021, First Nations people were employed in healthrelated occupations at about 60% of the rate of non-Indigenous Australians.

Aboriginal and Torres Strait Islander Health Performance Framework: summary report August 2024. AIHW: Australian Government. Accessed 03/11/24.



#### Our wellbeing workforce plays a vital role in implementing HOC

Since the launch of Healthy Outback Communities in early 2024, we have focused on growing a local workforce to embed the right skills and local knowledge into the region. The HOC program helps residents improve their health and wellbeing and focus on staying healthy instead of only treating illness.

#### AT ITS CORE, HOC IS DRIVEN BY PARTNERSHIPS WITH REMOTE Communities and we have already Formed Valuable relationships with Residents through our local hoc Workforce.

THE REACH AND IMPACT VIA THE TEAM ULTIMATELY FACILITATES COMPREHENSIVE HEALTH AND WELLBEING SUPPORT FOR THE COMMUNITY THAT OTHERWISE WOULD NOT HAVE BEEN POSSIBLE THROUGH TRADITIONAL MODELS OF CARE.

#### Meet the HOC team

#### **HOC Wellbeing Connectors**

- Coordinate health and wellbeing services and resources for the community and maintain a calendar of visiting dates.
- Work with the community to understand health and wellbeing risks and opportunities to inform planning.

#### HOC Wellbeing Responder

• Plans and implements health and wellbeing services for the region. The role involves continually reaching out and connecting with service providers as well as forward planning and funding needs.

#### **HOC Wellbeing Practitioners**

 Support residents via the Virtual Health and Wellbeing Hub to develop a personal wellbeing plan and help them access appropriate health and wellbeing services. The role is performed by either an RFDS nurse or doctor.



This year, Healthy Outback Communities earned national recognition by receiving the Value-Based Health Care Equity Award at the 2023 Value-Based Health Care Awards.

The program's success was credited to its community-driven model, aimed at reducing health inequities and improving outcomes for priority populations.

Taking a holistic approach, the HOC program addresses the full health journey of individuals, extending beyond clinical interactions. HOC connects patients to local health services and community activities, such as exercise groups and social events, to support both physical and mental wellbeing through community engagement.

"This initiative gives government and other funders a potential new blueprint on how to improve health services, not just in remote settings but around the country and internationally too." **Dr Sally Lewis** 

# HEALTHPATHWAYS

HealthPathways is a comprehensive information portal that provides evidence-based, locally tailored information on the assessment and management of common clinical conditions. Its aim is to equip GPs, hospital specialists, nurses, allied health professionals, and other health practitioners with practical resources to improve patient care.

This year, WQPHN focused on rolling out significant website updates, publishing 84 new pages. Many of the new pathways focused on clinical conditions related to aged care, dementia, palliative care and mental health, along with chronic diseases unique to older Australians living in diverse and remote communities in Western Queensland.

The clinical content has been developed by four GPs who bring extensive knowledge of the region and its communities. In collaboration with other PHN regions and medical specialists, these GPs have worked to ensure the content is both practical and highly relevant for providers in our region.

In addition to the clinical guidance provided on the site, WQPHN also developed referral pages that guide healthcare providers in locating vital specialist and community support services. These referral pages are a practical resource, offering clear, step-by-step directions for finding local services, and both public and private specialist care options for patients.

This information ensures that healthcare providers can efficiently connect patients and families with the appropriate services to address the complex needs of both accessibility and continuity of care across Western Queensland.

The successful promotion and use of these new site pages relies on comprehensive training and support. To facilitate this, the HealthPathways team provided education and assistance to key WQPHN teams in aged care, palliative care, mental health and practice support. These teams are well equipped to help healthcare providers gain access to the HealthPathways site and find information quickly to guide their healthcare work.

Training and promotion to external service providers is ongoing and will familiarise staff with the new information available to enhance their clinical knowledge and expertise.

HealthPathways provides clinicians with locally approved information to support collaborative decision making for patients at the point of care. Pathways are tailored for general practice teams but are also accessible to specialists, allied health professionals and other healthcare providers in Western Queensland.

SUPPORTED WORKFORCE BUILT FOR THE BUSH

#### WQ HEALTHPATHWAYS IN 2023-24:

**325** LIVE PATHWAYS

**84** NEW LOCALISED PAGES PUBLISHED

**915** USERS

**2,679** SESSIONS

**12,641** PAGE VIEWS

#### TOP 10 MOST VIEWED Pathways

- 1. Heart failure
- 2. Hypertension
- 3. Screening and diagnosis of diabetes
- 4. Bowel cancer screening
- 5. Acute abdominal pain in adults
- 6. Acute asthma in children
- 7. Atrial fibrillation
- 8. Acute chest pain
- 9. Bereavement
- 10. Advance care planning

### **EQUITABLE** access closer to home

This year we advanced our commitment to bring quality health and wellbeing services closer to home for Western Queenslanders, delivering mental health digital supports across our region and launching the Virtual Health and Wellbeing Hub in partnership with RFDS (Queensland Section).



### Taking stock of our wellbeing

Healthy Outback Communities is making it easier for people in Western Queensland's Channel Country to access services closer to home. The program is designed to work alongside existing local clinics, RFDS visits and outreach allied health services to ensure residents receive the care they need.

People living in regional and remote areas often face shorter lifespans, higher levels of disease and injury, and less access to health services compared to those in cities.

In the Western Queensland Channel Country, which covers almost 220,000 square kilometres (about the size of Victoria) and 13% of the state's total land area, around 1,100 residents don't have a local doctor or pharmacy.

Healthy Outback Communities aims to connect residents with locally tailored services that support physical, social and emotional wellbeing.

The Virtual Health and Wellbeing Hub, a free confidential telehealth service, went live in June 2024 for the Barcoo region. Residents can visit the Hub to connect with the HOC Wellbeing Team, made up of RFDS doctors and nurses, and create their own Personal Wellbeing Plan tailored to their needs.



The Hub links to a resident's health record and medical history the same way as visiting an RFDS clinic.

#### Award-winning services for mental health support

Western Queensland Primary Health Network has partnered with preventative health education providers ConnectedLE, to deliver low intensity mental health digital supports across our regions.

ConnectedLE was awarded the Queensland Championing Health category in the Telstra Best of Business awards for 2024, paving the way for community empowered solutions for remote and very remote communities.

As a powerful mechanism for individual and community support, digital mental health platforms, combined with connections at the local level, provide an opportunity for remote and very remote communities to increase access to vital mental health supports and services.

Digital mental health solutions are fundamental to our future work across our regions, and we look forward to current and future partnerships, as we collaborate to support outcomes throughout the life span.





EQUITABLE ACCESS CLOSER TO HOME



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### AFFORDABLE services for everyone

We worked with our partners this year to make vital services and programs like Healthy Outback Kids, Integrated Team Care (ITC) and Social and Emotional Wellbeing (SEWB) affordable, accessible and sustainable for the future. Nukal Murra means 'plenty hands' in local First Nations language. It reflects joint aspirations to create greater service alignment, integration and consumer engagement.

#### Many hands working together

Established in 2016, the Nukal Murra Alliance (Alliance) is managed by WQPHN in partnership with four Aboriginal and Torres Strait Islander Community Controlled Health Organisations (ACCHOs):



The Alliance commissions culturally appropriate services for mental health and chronic disease through the Integrated Team Care (ITC) Program and the Social and Emotional Wellbeing (SEWB) Program.

The ITC Program supports individuals with chronic conditions, such as cancer, heart disease and diabetes, aiming to enhance treatment, management and access to mainstream primary health care.

The SEWB Program addresses the mental health and overall wellbeing needs of Aboriginal and Torres Strait Islander people at a local level, providing psychological services and social and emotional wellbeing support.







### HEALTHY OUTBACK KIDS Growing strong together

The Healthy Outback Kids program supports the safe care of children throughout the first 3,000 days of life, enhancing the coordination of services that promote the health and wellbeing of children and their families.

The program was established in partnership with Charleville and Western Areas Aboriginal and Torres Strait Islander Community Health Ltd (CWAATSICH), Cunnamulla Aboriginal Corporation for Health (CACH) and the South West Hospital and Health Service (SWHHS).



Healthy Outback Kids is currently run in Cunnamulla and is being rolled out in the Boulia region. The program ensures:

- all children are enrolled with a general practice
- health checks for each child are scheduled according to the Healthy Outback Kids program
- care is delivered by a multidisciplinary team, including a General Practitioner, Registered Child Health Nurse, Aboriginal Health Practitioner and Aboriginal Community Workers
- service providers collaborate to share information, ensuring that all families benefit from the program's care and outcomes.

### **QUALITY** outcomes for patients and families

This year we built solid foundations for measuring the true impact of our work, from building digital capabilities and literacy, to proactive strategies to improve population health outcomes in the most remote corners of our region.



Approximately 250,000 hospital admissions in Australia every year are medication related, at a cost of \$1.4 billion dollars.

IT IS ESTIMATED THAT TWO THIRDS OF THESE ADMISSIONS ARE PREVENTABLE.

**QUALITY** OUTCOMES FOR PATIENTS AND FAMILIES





Approximately 1 in 4 Australians are digitally excluded, which means they may not be able to use technology to improve their health.

### Digital health a lifeline for Western Queensland

Digital health literacy can empower people living with complex, chronic conditions to become more involved in managing their conditions, including accessing online interventions and support.

This year, one of our top priorities has been to identify and promote opportunities to build digital capacity in our rural and remote healthcare workforce to further empower consumers to embrace digital health programs.

Through our Be Connected program, we provided realistic case-based learning with practical skills, to equip health professionals with the confidence to assist people to access the care they need, when they need it.

Digital health literacy training can help reduce potentially preventable hospitalisations by connecting people to useful information online.

In Western Queensland, there is a higher rate of risky alcohol consumption, nearly double the rate of alcohol-related road traffic deaths compared to the state, and the highest rate of mental health hospitalisations due to alcohol or drug use compared to other PHNs.

Our Be Connected program supports providers to equip patients with the confidence to access online telehealth detox services from home.

The program also supports providers to help patients manage their medications with simple smart phone resources and the myHealth app. This ensures that patients have access to their medication lists in real time and have better medication routines.

# OUR PEOPLE OUR SPIRIT

#### OUTBACK SPIRIT, BOUNDLESS DEDICATION: Celebrating our Amazing team!

Our team spans a vast region - almost a million square kilometres! While video calls keep us connected, nothing beats getting together in person. Throughout the year, our face-to-face gatherings sparked invaluable friendships and collaboration.

The WQPHN Employee Recognition Awards acknowledge the valuable contributions made by our employees. These awards celebrate actions and behaviours that embody our organisational values, promoting a culture of support, trust and growth.

In 2023, we held our second annual awards ceremony online during our staff Christmas party. This virtual event allowed us to connect and celebrate together, regardless of physical distance, reinforcing our commitment to inclusivity and recognition.

All employees had the opportunity to nominate colleagues for their exceptional behaviours across six categories, in addition to recognising those who reached their three and five-year service milestones with WQPHN.

This year we also celebrated our long-serving team members, recognising their loyalty and commitment to WQPHN. Their deep understanding of our history and willingness to share their knowledge and wisdom with others enriches our organisation, culture and partnerships. In August 2023, we held a staff workshop, bringing together all 33 team members for interactive, activity-based sessions. The workshop aimed to deepen our collective understanding of WQPHN's strategic priorities, while also facilitating the exchange of ideas and the development of innovative approaches to improve the health and wellbeing of communities across Western Queensland.

#### Key objectives of the workshop:

- Gaining a comprehensive understanding of the Strategic Plan 2023-26
- Aligning WQPHN's position on the Voice to Parliament with the Reconciliation Action Plan
- Exploring the Healthy Outback Communities initiative
- Understanding everyone's role in stakeholder engagement.



Celebrating success, bridging distances

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# OUR Partnerships

Through strong, collaborative partnerships across the health, community and First Nations sectors we can achieve productive health outcomes to meet the needs of our residents.

WQPHN has formalised many strategic partnerships that help us deliver a cohesive and culturally respectful health system in our region.

#### **Members**

Our 15 members contribute to WQPHN's overall purpose.

#### Founding Members:



North West Hospital and Health Service



#### Admitted Members:



#### **Care Governance Committee**

The revitalised Care Governance Committee (CGC) held its inaugural meeting in November 2023, under the leadership of Dr. Sarah Springer as Chair. Throughout the 2023-24 period, the CGC convened twice, playing a crucial role in strengthening the governance structures required by the Department of Health and Aged Care for Primary Health Networks.

Acting as an advisory body to the WQPHN Board, the CGC is led by General Practitioners (GPs) and comprises locally based representatives to ensure alignment with key healthcare service providers in the Western Queensland region.

During this period, the CGC successfully finalised WQPHN's Care Governance Framework and established its Terms of Reference, along with an annual work plan. These efforts ensure that the CGC is well-positioned to provide expert guidance to the WQPHN Board on critical clinical matters, including patient care pathways and service or system improvements.

#### CGC members:

Ms Sharon Young

Dr Sarah Jane Springer (Chair) Ms Joni Barrie Ms Pia Clinton-Tarestad Ms Elise Gorman Dr Meg O'Connell Dr Clare Walker Ms Jean Benham Dr Don Bowley Dr Ross Hetherington Ms Wanita Gorringe Mr Andrew Quabba Ms Nicky Wildermuth

#### Western Queensland Health Services Integration Committee

Established in 2016, the Western Queensland Health Services Integration Committee (WQHSIC) operates under the framework of the Maranoa Health Accord, which formalises the commitment of these organisations to collaborate, co-design and provide leadership aimed at driving systemwide improvements and enhancing population health outcomes across Western Queensland.

During the 2023-24 period, WQHSIC convened twice to review and update the Maranoa Health Accord, which serves as the group's Terms of Reference, while also addressing several critical matters. These included the development of a Western Queensland Digital Health Plan, which seeks to remove barriers to data sharing, secure messaging, ePrescribing, and improve system interoperabilitychallenges that continue to hinder the full integration and digital enablement of the regional health system. Key discussions also focused on the Joint Regional Needs Assessment, the Western Queensland Health Equity Plan, and the Healthy Outback Communities initiative.

Through the Maranoa Health Accord, WQHSIC has committed to several priority areas, aligned with the Queensland-Commonwealth Partnership. These priorities include advancing data and joint planning, strengthening primary and community care, building a robust governance framework, enabling digital health and technology in primary care, and promoting regional place-based initiatives.



#### WQHSIC Member organisations: WQPHN

Central West Hospital & Health Service North West Hospital & Health Service South West Hospital & Health Service **Nukal Murra Alliance Partners:** 



Thank you to our valued commissioned service providers for providing dedicated care and support to Western Queenslanders.

#### **Commissioned Service Providers**

Acacia Country Health Pty Ltd

Aged & Disability Advocacy (ADA) Australia

Better Movement Clinic

Blackall Tambo Regional Council

**Bulloo Shire Council** 

BUSHkids

CACH - Cunnamulla Aboriginal Corporation for Health

Camooweal State School

CatholicCare Social Services Southern Queensland

Central West Hospital and Health Service

Clean Slate Clinic

Community Praxis Co-Op Ltd

ConnectedLE Pty Ltd

CWAATSICH - Charleville and Western Area Aboriginal and Torres Strait Islander Community Health

Diabetes Australia

Dr Erica West

Dr Tiffany Cover

Drug ARM

Eulo State School

Family Planning Queensland

Frith, Katie Renee

Gidgee Healing

Gold Coast Hospital Foundation

Goondir Aboriginal & Torres Strait Islander Corporation for Health Services

Health First Group

Health Workforce Queensland Ltd

Indigicare Connect Pty Ltd

Leichhardt Medical Centre

Lives Lived Well

Longreach Home & Community Care Inc

Maranoa Medical Centre Pty Ltd

Mater Health Services Executive

#### Mornington Island Aboriginal Corporation for Health Mount Isa Community Development Association Inc Mount Isa Medical Centre

Matthew Edwards Podiatry

Mount Isa Special School

North and West Remote Health

North Queensland Sports Foundation Limited

North West Hospital and Health Service

Oceana Immunisation

Oz Help Foundation

Paediatric Outreach Services

Palliative Care Queensland

Proveda

Queensland Lived Experience Workforce Network Inc.

Quilpie Shire Council

Ramsay St General Practice

Red Ridge (Interior Queensland) Limited

RFDS - Royal Flying Doctor Service

RHealth Ltd

Roma Clinic

Selectability Ltd

South West Hospital & Health Service

St George Medical Centre (QLD) Pty Ltd

Thargomindah State School

Vital Health Qld

Vogelpoel Medical Pty Ltd

Wakai Waian Healing Pty Ltd

Western Queensland Physiotherapy Qld Pty Ltd

# BOARD OF DIRECTORS







Elizabeth (Liz) has worked as a social worker in health, rehabilitation and family and community services. She has held responsibility for commissioning and overseeing service outcomes to remote and regional communities, at both the state and federal levels.

Liz was the Queensland Commissioner for Children and Young People and Child Guardian and has held various senior executive government roles in the delivery of human and educational services.

She has lived and worked in a diverse range of communities in Australia and overseas and is a passionate advocate for the rights, safety, and wellbeing of all people. This includes shaping and assessing the benefits of government programs and leading organisational change.

Liz is a current Board Member of the Central West Hospital and Health Service and Chairs the Board's Safety and Quality Committee.

### MR DALLAS LEON DIRECTOR until 29 August 2024

Dallas is a Kalkadoon and Waanyi man that has worked in the Aboriginal and Torres Strait Islander field for over 20 years. He has held several government and non government roles including Aboriginal health worker, senior health manager and working on various state and national projects.



Dallas previously held the role of CEO Gidgee Healing, the Aboriginal Community Controlled Health Organisation in Mount Isa, where he was instrumental in leading the reform of primary health care services for Aboriginal and Torres Strait Islander people across North West Queensland and the Lower Gulf.

He is currently the Director of Commercial Operations at the Institute for Urban Indigenous Health. In addition to his employed roles, Dallas has held a number of directorships and been an active member of relevant national committees.

# PROFESSOR SABINA KNIGHT AM Director

Sabina is the Director of the James Cook University Central Queensland Centre for Rural and Remote Health. She is an experienced remote area nurse with lifetime roots in outback rural and remote areas. A veteran of remote health in NSW, Central Australia and the Northern Territory, Sabina has developed expertise in clinical practice, primary health care, public health, research and education.

She has been a key figure in the development of rural and remote health workforce policy and health reform and has served on a wide range of Ministerial advisory bodies. Sabina was a Commissioner on the National Health and Hospital Reform Commission.

In 2021, Sabina was awarded a Member of the Order of Australia for her work in regional and remote healthcare, education and nursing.



### MS SHERYL LAWTON Director

Sheryl has been the CEO of Charleville Western Areas Aboriginal Torres Strait Islander Community Health (CWAATSICH) for the past 20 years. Prior to becoming CEO, she was employed in many positions of influence within Aboriginal affairs and Aboriginal Community Controlled Services, spanning legal services, social housing, land council and childcare.

Sheryl has been an avid representative of Aboriginal Affairs at regional, state and national levels and through her ongoing dedication, commitment and hard work has seen CWAATSICH expand service delivery and become the lead service provider of comprehensive primary health care within the Far South West region.







# MS KAREN REITHMULLER TULLY Director and chair, people, Engagement and culture Committee

Karen is a self-employed advocacy, facilitation, leadership and governance expert. A long time resident of Charleville in South West Queensland, she has lived experience in understanding the wonderful liveability and unique lifestyle which rural communities offer.

Karen currently serves as Board Chair of the South West Hospital and Health Service and is Chair of the Rural Financial Counselling Service Southern Queensland. She is also a Director with Southern Queensland landscapes and serves as an Ambassador for the Queensland Plan Ambassador Council.

Karen is a member of the Breast Cancer Association of Queensland and the Queensland Rural, Remote and Regional Women's Network.

### DR CLARE WALKER Director

Clare is a medical practitioner in Longreach providing a combination of private general practice and senior medical officer work at the local hospital. Having lived, raised a family and practiced in the Central West Region for over 10 years, Clare has developed an in depth understanding of the community needs of rural and remote Queenslanders.

Clare has a dual Fellowship in General Practice with both the Australian College of Rural and Remote Medicine (FACCRM 2009) and the Royal Australian College of General Practitioners (FRACGP 2009). She has an Advanced Diploma of Obstetrics and qualifications in Anaesthesia through the Joint Consultative Committee.

Clare is also a committee member of the Rural Doctors Association of Queensland.



### MR JASON WARNOCK Director

For more than 30 years, Jason worked in his private podiatry practice in Townsville which included regular visits to rural townships. He was the first podiatrist to deliver services to the Gulf of Carpentaria communities and for 20 years attended a monthly clinic on Palm Island.

During 2003-2005 he developed the Indigenous Diabetic Foot Program, with resources from the Program still utilised to this day. Jason was the inaugural chair of the Podiatry Board of Australia from 2009-2012 and was awarded a Churchill fellowship in 2008 to investigate diabetic foot care services in the Indigenous communities of USA and Canada.

In 2015, he moved to Brisbane to take on the role of Director of Podiatry at Metro North Hospital and Health Service. He is currently the Allied Health Educator for Community and Oral Health Services, Metro North Health.

# MS RACHEL PORTELLI Company Secretary

Rachel is a graduate and Fellow of the Governance Institute of Australia and Fellow of the UK Institute of Chartered Secretaries and Administrators. She is also a Graduate of the Australian Institute of Company Directors. For over 15 years Rachel has specialised in providing corporate governance advice to not-for-profit entities.

# EXECUTIVE

# SANDY GILLIES Chief executive officer

Sandy is a proud First Nations woman from the Gunggari people in South-West Queensland. Sandy started her career in nursing, working with limited resources across vast distances. She has extensive experience and a deep understanding of health challenges in remote and very remote regions, especially among Aboriginal and Torres Strait Islander communities, with over 30 years dedicated to Aboriginal and Torres Strait Islander health.

Sandy holds positions as Adjunct Professor at the Murtupuni Centre for Rural and Remote Health at James Cook University and Associate Fellow of the Australasian College of Health Service Management. She contributes extensively to the healthcare sector through memberships in advisory bodies like the Australian Centre for Value-Based Health Care Advisory Board and the Rural and Remote Advisory for Community, Strategy and Operations. Sandy is also an expert advisor for Australia's National Women's Health Advisory Council.

She is renowned for her strategic planning and visionary leadership in integrating the principles and practices of Value-Based Health Care (VBHC) into primary healthcare commissioning across Western Queensland, aligning with the Quintuple Aim of Healthcare.

Driven by her mission, Sandy led us to gain national recognition for the Healthy Outback Communities collaborative model of health and social care. This initiative earned the Health Care Equity Award at the 2023 Value-Based Health Care Awards.

# LEISA FRASER Head of Primary Health and Commissioned Services

Leisa Fraser is an integral member of WQPHN, joining our team in September 2020 as the Coordinator for Commissioning and Alliancing.

In 2021, Leisa joined the Executive Leadership Team and was appointed Head of Primary Health and Commissioned Services role in 2022. Leisa continues to play a key role in fostering community engagement, developing partnerships and driving innovation within the health and community services sector.

With over two decades of experience, Leisa has a wealth of knowledge in finance, human resource management, workplace health and safety, and quality improvement. Her extensive work in Aboriginal and Torres Strait Islander health and a passion for Healthy Ageing in the Outback has been instrumental in shaping her approach to health service delivery in rural and remote communities.

Based in Winton, Leisa is highly skilled in building collaborative relationships that facilitate local ownership and participation in health reform. She holds a Certificate IV in Mental Health (Non-Clinical) and a Certificate IV in Business, further demonstrating her commitment to professional development and improving health outcomes for the communities WQPHN serves.

Leisa is a Director on the Central West Hospital and Health Service Board.





# SENIOR MANAGEMENT



# RAJ BALASINGAM Senior Performance And Risk Advisor

With a Postgraduate Certificate in Health Service Management from the University of South Australia, Raj has worked in various project management and consulting roles at the South Australian Department of Health, Northern Adelaide Local Health Network, and the Adelaide Primary Health Network.

Raj is interested in continuous quality improvement and performance, contracts and change management. He is passionate about person-centred and culturally appropriate healthcare and advancing health equity in vulnerable communities.





# SARAH BASSFORD Senior Financial Controller

Sarah is a Chartered Accountant with over 20 years experience, having worked in public practice and the not-for-profit sector in New Zealand, New York, Sydney and now Brisbane.

Sarah understands the unique accounting and reporting requirements of entities in the not-for-profit sector, and plays a key role in delivering good corporate governance, something that every entity in the sector needs in order to achieve their goals. Sarah has a Bachelor of Commerce and a Bachelor of Arts.

# MELISSA BRUCKNER Senior Manager, Business Intelligence and Innovation

With over 22 years of experience in the health sector, Melissa specialises in privacy, data governance and general practice. She grew up in various regional and rural locations and loves working on health service projects that make a difference to people's lives.

Melissa is a Certified Information Privacy Manager and has a Bachelor of Education and Diplomas in practice management, project management and training, and nutrition education.



# AIDAN HOBBS Senior Manager, Health Improvement and Innovation

With a strong background in healthcare management and delivery, Aidan has a Bachelor of Health Science (Podiatry), an MBA (Health), and is currently a PhD candidate. Aidan is also a Fellow of the Australasian College of Health Service Management and a Certified Health Informatician Australasia.

When living in Mount Isa, he provided weekly outreach rotations as part of a travelling allied health team to various remote communities. Aidan also served as North and West Remote Health's Allied Health Team Leader and Acting Area Manager for Central West Queensland.

As a clinician and health service manager, he is passionate about driving system reform to ensure equitable access to high-quality care.







# TRISH LEDDINGTON-HILL Senior quality and Compliance advisor

Trish has a Bachelor of Law and a Bachelor of Science from the University of Queensland and upon leaving university she worked for Southern Queensland Rural Division of General Practice (now RHealth).

Her working life has connected her to Western Queensland and she sits on the Darling Downs Hospital and Health Service Board, and since 2019 has been working again for RHealth as well as WQPHN – both in part-time quality assurance and compliance roles.

Trish enjoys working in healthcare and is particularly interested in community engagement, safety, quality and information security management systems.

# DEB SPANNER Senior Manager, Primary Mental Health and Wellbeing

For over 25 years, Deb has worked as a clinical social worker and manager in Western Queensland. She has experience working in youth services, hospitals, Aboriginal Community Controlled Health Organisations (ACCHOs), domestic and family violence and homelessness services.

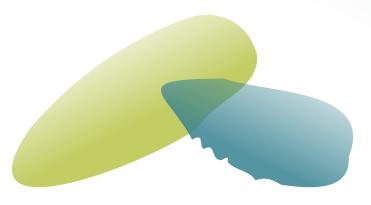
With a Bachelor of Social Work, Deb is also an accredited mental health social worker. Deb is passionate about partnering positively with communities in the bush and she is completing a PhD with a focus on improving consultation with Aboriginal and Torres Strait Islander peoples for transformative social change. Deb also holds a Masters of Business, specialising in nonprofits and philanthropy.

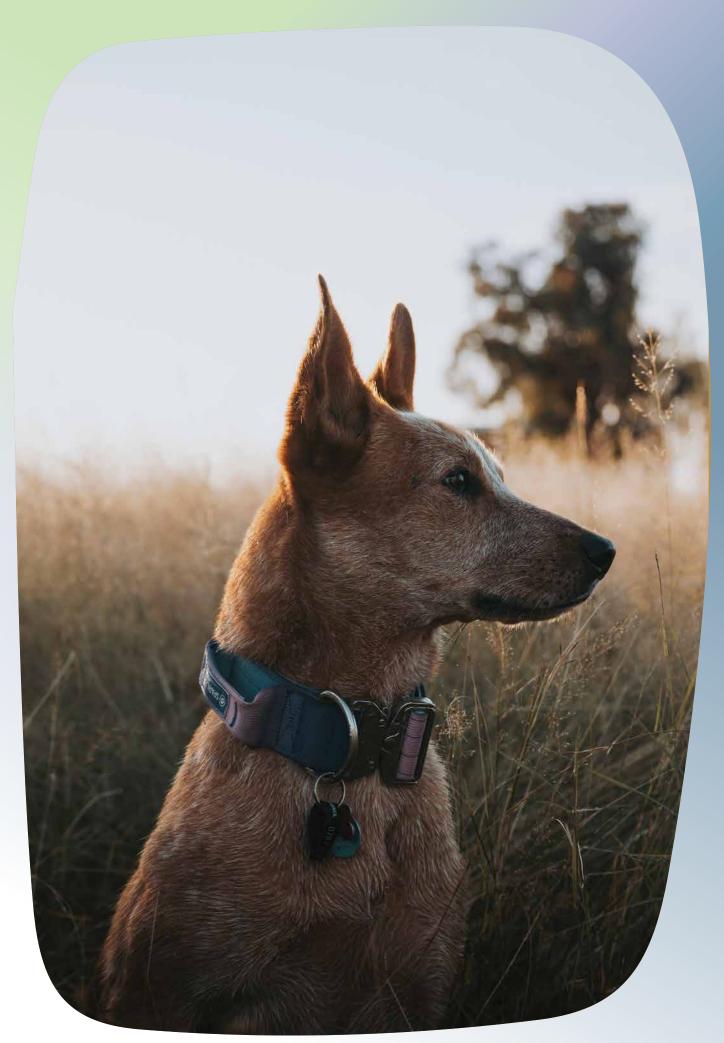
# SHELLY REYNOLDS Senior Manager, Primary Care And Chronic Disease

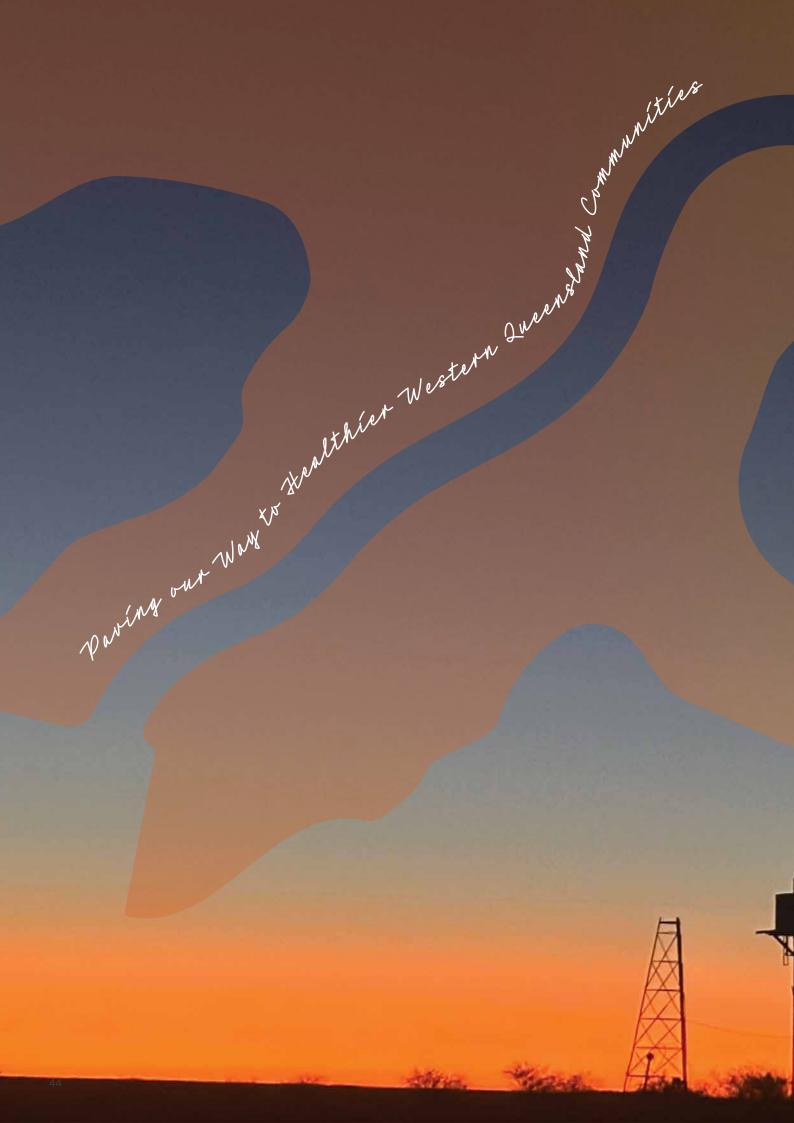
With over 40 years of experience in the health sector, Shelly has held diverse roles in education and operations across child health, dialysis, maternity, spinal rehabilitation, nursing, orthopaedics and phlebotomy. Her career spans positions at Queensland Health, the National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners (NAATSIHWP) and Cunnamulla Aboriginal Corporation for Health (CACH).

Shelly is passionate about rural and remote health, especially in chronic disease management and Aboriginal and Torres Strait Islander health. She has a strong commitment to safety, quality and continuous improvement, successfully leading organisations through ISO 9001, RACGP Clinical and AHPRA accreditations. Her expertise also spans practice software, data extraction and analysis tools.

Having lived in South West Queensland for over a decade, Shelly values her connection with outback communities and enjoys hearing their unique stories. She is inspired by the significant impact small health changes can have on people's lives.

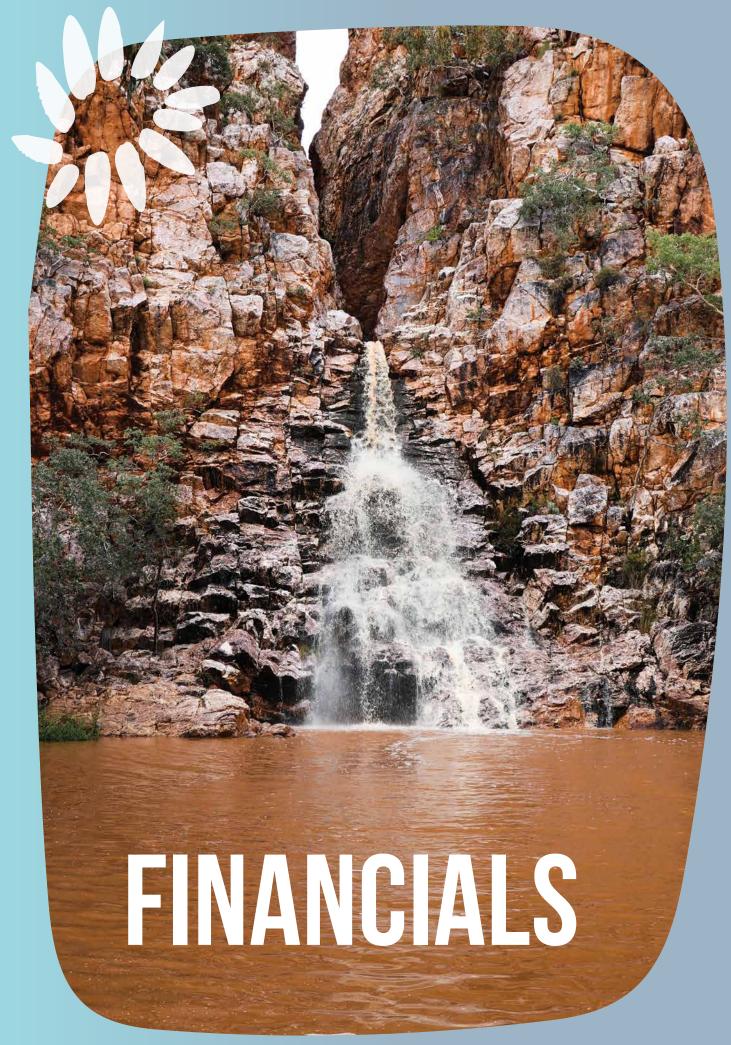






# Change happens when we are connected to our communities.

SANDY GILLIES, WQPHN CEO



# WESTERN QUEENSLAND PRIMARY CARE COLLABORATIVE LTD Abn: 86 604 686 660 Directors' Report For the year ended 30 June 2024

Your directors present this report together with the financial report on Western Queensland Primary Care Collaborative Ltd ("WQPHN" or "the Company") for the financial year ended 30 June 2024.

#### Directors

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

- Ms Elizabeth Fraser
- Mr Dallas Leon (until 29 August 2024)
- Professor Sabina Knight
- Ms Sheryl Lawton
- Ms Karen Reithmuller Tully
- Dr Clare Walker
- Mr Jason Warnock

Directors have held office during the entire reporting period unless otherwise stated above.

#### **Company Secretary**

- Ms Rachel Portelli

#### **Principal Activities**

The principal activities of the Company during the financial year included:

- · Implementing and continuous development of a best practice commissioning framework;
- Providing professional and practice support to existing General Practices through information targeted resources and practice support staff;
- Working in partnership with local Hospital and Health Services and Aboriginal Community Controlled Health Organisations to progress joint service planning, clinical re-design, commissioning and delivery of integrated care and e-health;
- Planning and facilitating population based primary health care including the development of strategies to improve the health of communities in Western Queensland; and
- · Providing support and contracted training services to Commissioned Service Providers.

#### **Operating Results**

The entity recorded a Surplus of \$0 (2023: Surplus of \$0).

#### Short-term and long-term objectives

WQPHN's long term vision is focused on implementing and evaluating the introduction of Healthy Outback Communities (HOC), a new approach to health and wellbeing for Western Queensland's channel country. HOC aims to ensure residents have greater access to preventative health and wellness services and will complement existing local clinics, Royal Flying Doctor Service (RFDS) doctor days, and visiting allied health services.

By paving the way towards improved health outcomes, our mission is to lead better system integration and co-ordination, strengthening equity and empowerment for Western Queensland communities and the people who care for them, undertaken in collaboration with our partners and stakeholders. This mission is underpinned by our guiding actions: transparent, purposeful, responsive, authentic, respectful and impactful.

To achieve this, WQPHN will:

- Commission health and community services to address the prioritised needs of Western Queensland communities;
- Support health care providers and partners through collective leadership and co-design to strengthen accessible, quality and whole-of-person centred care to Western Queenslanders;
- Deliver integrated health services close to home so Western Queenslanders have access to planned and coordinated care that support individuals' health care goals; and
- Foster community care and wellbeing services to support Western Queenslanders to live healthier, happier lives.

#### Strategy for achieving objectives

- **Empowered communities:** Bring communities together to actively inform and address local community health and wellbeing needs. Shift the focus from illness to wellness through community-led decision making.
- **Grow and support our health and wellbeing providers:** Embrace new ways of working and embed local knowledge and skills in our communities. Improve engagement, satisfaction, inclusivity and the delivery of care.
- Equitable access: Increase equal access to quality health and wellbeing services and the best possible outcomes. Focus on education and awareness, proactive prevention and early detection, and social prescribing.
- **Affordable services:** Improve efficiency, sustainability and affordability by aligning investment and resources to prioritised community needs. Create a coordinated, connected system through pooled funding and co-commissioning.
- **Quality outcomes:** Bring health and wellbeing reform to whole communities. Deliver high quality outcomes, positive experiences and person-centred care informed by community-driven priorities and insights.

#### Key performance measures

WQPHN evaluates its performance based on employing a commissioning approach, monitoring performance, meeting and exceeding contractual deliverables, achieving targeted system change, and improving measures of stakeholder satisfaction and health outcomes that correspond with the Commonwealth's national performance measures and Quintuple Aim outcomes.

#### Information on Officers

#### Name

Position

#### Ms Elizabeth Fraser

#### **Board Chair**

Elizabeth (Liz) has worked as a Social Worker in health, rehabilitation and family and community services. She has held responsibility for commissioning and overseeing service outcomes to remote and regional communities, at both the state and federal levels. Liz was the Queensland Commissioner for Children and Young People and Child Guardian and has held various senior executive government roles in the delivery of human and educational services. She has lived and worked in a diverse range of communities in Australia and overseas and is a passionate advocate for the rights, safety, and wellbeing of all people. This includes shaping and assessing the benefits of government programs and leading organisational change. Liz is a current Board Member of the Central West Hospital and Health Service and Chairs the Board's Safety and Quality Committee.

#### Mr Dallas Leon

#### Director (until 29 August 2024)

Dallas is a Kalkadoon and Waanyi man that has worked in the Aboriginal and Torres Strait Islander field for over 20 years. Dallas has held a number of roles across Government and non-Government, including working as an Aboriginal Health Worker, a senior health manager and working on various state based and national projects. Dallas previously held the role of CEO Gidgee Healing, the Aboriginal Community Controlled Health Service in Mount Isa, where he was instrumental in leading the reform of primary health care services for Aboriginal and Torres Strait Islander people across North West Queensland and the Lower Gulf. He is currently the Director of Commercial Operations at the Institute of Urban Indigenous Health (IUIH). In addition to his employed roles, Dallas has held a number of directorships and been an active member of relevant national committees.

#### Professor Sabina Knight AM Director

Sabina is the Director of the James Cook University Central Queensland Centre for Rural and Remote Health. She is an experienced remote area nurse with lifetime roots in outback rural and remote areas. A veteran of remote health in NSW, Central Australia and the Northern Territory, Sabina has developed expertise in clinical practice, primary health care, public health, research and education. She has been a key figure in the development of rural and remote health workforce policy and health reform and has served on a wide range of Ministerial advisory bodies and was a Commissioner on the National Health and Hospital Reform Commission. In 2021, Sabina was awarded a Member of the Order of Australia for for her work in regional and remote healthcare, education and nursing.

#### Ms Sheryl Lawton Director

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#### Ms Karen Reithmuller Tully

#### Director and Chair, People, Engagement and Culture Committee

Karen is a self employed advocacy, facilitation, leadership and governance expert. She is a long time resident of Charleville in South West Queensland and has lived experience in understanding the wonderful liveability and unique lifestyle which rural communities offer. She currently serves as Board Chair of the South West Hospital and Health Service and is Chair of the Rural Financial Counselling Service Southern Queensland. She is also a Director with Southern Queensland landscapes as well as serving as an Ambassador for the Queensland Plan Ambassador Council. Karen is also a member of Breast Cancer Association of Queensland and the Queensland Rural, Remote and Regional Women's Network.

#### Dr Clare Walker Director

Clare is a medical practitioner practicing in Longreach providing a combination of private General Practice and Senior Medical Officer work at the local hospital. Having lived, raised a family and practiced in the Central West Region for over ten years, Clare has developed an in depth understanding of the community needs of rural and remote Queenslanders. Clare has a dual Fellowship in General Practice with both the Australian College of Rural and remote Medicine (FACCRM 2009) and the Royal Australian College of General Practitioners (FRACGP 2009) plus an Advanced Diploma of Obstetrics and qualifications in Anaesthesia through the Joint Consultative Committee. She is also a committee member of the Rural Doctors Association of Queensland.

#### Mr Jason Warnock

#### Director

For more than 30 years, Jason worked in his private podiatry practice in Townsville which included regular visits to rural townships. He was the first podiatrist to deliver services to the Gulf of Carpentaria communities and for 20 years attended a monthly clinic on Palm Island. During 2003-2005 he developed the Indigenous Diabetic Foot Program, with resources from the Program still utilised to this day. Jason was the inaugural chair of the Podiatry Board of Australia from 2009-2012 and was awarded a Churchill fellowship in 2008 to investigate diabetic foot care services in the Indigenous communities of USA and Canada. In 2015, he moved to Brisbane to take on the role of Director of Podiatry at Metro North Hospital and Health Service. He is currently the Allied Health Educator for Community and Oral Health Services, Metro North Health.

#### Ms Rachel Portelli

#### **Company Secretary**

Rachel is a graduate and Fellow of the Governance Institute of Australia and Fellow of the UK Institute of Chartered Secretaries and Administrators and a Graduate of the Australian Institute of Company Directors. For over 15 years she has specialised in providing corporate governance advice to not for profit entities.



#### **Meetings**

	Directors' Boa	ard Meetings	Finance Audit Management		People, Enga Culture Comn	
Director	Number eligible to attend	Number attended	Number eligible to attend	Number attended	Number eligible to attend	Number attended
Ms Elizabeth Fraser	5	5	N/A	N/A	N/A	N/A
Ms Sheryl Lawton	5	4	N/A	N/A	3	2
Mr Dallas Leon	5	5	N/A	N/A	3	3
Professor Sabina Knight	5	3	N/A	N/A	N/A	N/A
Ms Karen Reithmuller Tully	5	5	6	5	3	3
Dr Clare Walker	5	4	N/A	N/A	N/A	N/A
Mr Jason Warnock	5	5	6	4	3	3

#### Member Contribution on Windup

The amount that each Member or past Member is liable to contribute on winding up is limited to \$10.

#### **Total Contribution on Windup**

The total amount that members of the Company are liable to contribute if the Company wound up is \$150 (2023: \$150). Signed in accordance with a resolution of the Board of Directors.

Elizabeth Fraser Karen Tully

Director

Director

Dated this 30th day of September 2024

The Directors of the company declare that:

The financial statements and the notes set out in the attached are in accordance with the Australian Charities and Not-for-profits Commission Act 2012 and:

In the opinion of the Directors:

- (a) The financial statements and notes of the Company are in accordance with the Australian Charities and Not-for-Profits Commission Act 2012, including:
  - i. Giving a true and fair view of its financial position as at 30 June 2024 and of its performance and cash flows for the financial year ended on that date; and
  - Complying with Australian Accounting Standards Simplified Disclosures (including the Australian Accounting Interpretations) and the Australian Charities and Not-for-profits Commission Regulations 2022;
- (b) There are reasonable grounds to believe that the Company will be able to pay its debts as and when they become due and payable; and
- (c) Commonwealth government funding monies expended by the Company during the financial year have been applied for the purposes specified in the relevant Letters of Offer and the Company has complied with the terms and conditions relating to Commonwealth government funding received.

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

Elizabeth Fraser

Karen Tully

Director

Dated this 30th day of September 2024

Director

# Statement of Comprehensive Income For the year ended 30 June 2024

	Notes		2023
		\$	\$
Revenue and Other Income			
Contract revenue	2	30,464,540	29,138,321
Other income	2	492,611	252,048
Total Revenue and Other Income		30,957,151	29,390,369
Expenditure			
Employee benefits expense	3	(4,984,819)	(4,632,696)
Clinical service subcontractors	1(k)	(21,962,255)	(21,034,112)
Consulting expenses		(1,974,623)	(1,780,097)
Contractors		(26,275)	(101,567)
Lease expense	11	(247,444)	(262,192)
Finance Costs	11	(7,543)	(16,157)
Repairs, maintenance and vehicle running expenses		(16,569)	(21,977)
Electricity		(14,357)	(18,523)
Legal fees		(56,323)	(7,118)
Audit fees - audit services		(42,703)	(39,830)
Travel expenses		(365,854)	(397,389)
Other expenses		(1,258,386)	(1,078,711)
Total Expenditure		(30,957,151)	(29,390,369)
Net Surplus		_	_
Other Comprehensive Income			
Total Comprehensive Income			

# Statement of Financial Position As at 30 June 2024

	Notes	<b>2024</b> \$	<b>2023</b> \$
CURRENT ASSETS			
Cash and Cash Equivalents	4	8,965,245	6,038,466
Trade and Other Receivables	5	35,295	55,861
Other Assets	6	410,853	652,335
TOTAL CURRENT ASSETS		9,411,393	6,746,662
NON-CURRENT ASSETS			
Right of Use Assets	11	227,533	131,234
-	11		
TOTAL NON-CURRENT ASSETS		227,533	131,234
TOTAL ASSETS		9,638,926	6,877,896
CURRENT LIABILITIES			
Trade and Other Payables	8	3,104,375	1,292,079
Accrued Employee Benefits	9	297,212	212,147
Lease Liabilities	11	199,166	111,103
Unearned Revenue	12	4,324,328	3,561,057
TOTAL CURRENT LIABILITIES		7,925,081	5,176,386
NON-CURRENT LIABILITIES			
Accrued Employee Benefits	9	68,473	63,041
Lease Liabilities	11	30,062	23,159
TOTAL NON-CURRENT LIABILITIES		98,535	86,200
TOTAL LIABILITIES		8,023,616	5,262,586
		4 645 040	1 615 010
NET ASSETS		1,615,310	1,615,310
EQUITY			
Retained Surplus		1,615,310	1,615,310

# Statement of Changes in Equity

# For the year ended 30 June 2024

	Retained Surplus
	\$
Balance at 1 July 2023	1,615,310
Total Comprehensive Income	-
Balance at 30 June 2024	1,615,310
Balance at 1 July 2022	1,615,310
Total Comprehensive Income	-
Balance at 30 June 2023	1,615,310

# Statement of Cash Flows For the year ended 30 June 2024

	Notes	2024	2023
		\$	\$
Cash Flows from Operating Activities:			
Receipts from Funding Bodies, Customers		34,463,829	32,020,279
Payments to Suppliers		(26,904,636)	(30,096,689)
Payments to Employees		(4,867,950)	(4,745,721)
Interest Received		406,901	136,423
Interest Payments - Lease		(7,543)	(16,157)
Total Cash from Operating Activities	10	3,090,600	(2,701,865)
Cash Flows from Investing Activities		-	-
Payments for Asset Purchases		-	-
Proceeds from Sale of Assets		-	-
Total Cash from Investing Activities			
Cash Flows from Financing Activities:			
Payments of Lease Liabilities		(163,821)	(217,087)
Total Cash from Financing Activities		(163,821)	(217,087)
Net Cash Increase / (Decrease) in Cash and Cash Equivalents		2,926,779	(2,918,952)
Cash and Cash Equivalents at beginning of period		6,038,466	8,957,418
Cash and Cash Equivalents at end of period	4	8,965,245	6,038,466



Grant Thornton Audit Pty Ltd King George Central Level 18 145 Ann Street Brisbane QLD 4000 GPO Box 1008 Brisbane QLD 4001

T +61 7 3222 0200

# Auditor's Independence Declaration

# To the Directors of Western Queensland Primary Care Collaborative Limited

In accordance with the requirements of section 60-40 of the Australian Charities and Not-for-profits Commission Act 2012, as lead auditor for the audit of Western Queensland Primary Care Collaborative Limited for the year ended 30 June 2024, I declare that, to the best of my knowledge and belief, there have been no contraventions of any applicable code of professional conduct in relation to the audit.

Grant Thonton

Grant Thornton Audit Pty Ltd Chartered Accountants

M S Bell Partner - Audit & Assurance

Brisbane, 30 September 2024



# GrantThornton

Grant Thornton Audit Pty Ltd King George Central Level 18 145 Ann Street Brisbane QLD 4000 GPO Box 1008 Brisbane QLD 4001 T +61 7 3222 0200

# Independent Auditor's Report

# To the Members of Western Queensland Primary Care Collaborative Limited

#### Report on the audit of the financial report

#### Opinion

We have audited the financial report of Western Queensland Primary Care Collaborative Limited (the "Company"), which comprises the statement of financial position as at 30 June 2024, and 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 material accounting policy information and the Directors' declaration.

In our opinion, the financial report of Western Queensland Primary Care Collaborative Limited has been prepared in accordance with Division 60 of the *Australian Charities and Not-for-profits Commission Act 2012*, including:

- a giving a true and fair view of the Company's financial position as at 30 June 2024 and of its financial performance for the year then ended; and
- *b* complying with Australian Accounting *Standards AASB 1060 General Purpose Financial Statements -Simplified Disclosures for For-Profit and Not-for-Profit Tier 2 Entities* and Division 60 of the *Australian Charities and Not-for-profits Commission Regulations 2022.*

#### **Basis for opinion**

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

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

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#### **Other information**

The Directors are responsible for the other information. The other information comprises the information included in the Registered Entity's annual report for the year ended 30 June 2024, 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 the Directors for the financial report

The Directors of the Registered Entity are responsible for the preparation and fair presentation of the financial report in accordance with Australian Accounting Standards – *AASB 1060 General Purpose Financial Statements* - *Simplified Disclosures for For-Profit and Not-for-Profit Tier 2 Entities* and the ACNC Act, and for such internal control as the Directors determine is necessary to enable the preparation of the financial report that is free from material misstatement, whether due to fraud or error.

In preparing the financial report, the Directors are responsible for assessing the Registered Entity's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the Directors either intend to liquidate the Registered Entity or to cease operations, or have no realistic alternative but to do so.

The Directors are responsible for overseeing the Registered Entity'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.

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
  Registered Entity'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 the Directors' use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the Registered Entity's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial report or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Registered Entity to cease to continue as a going concern.

• Evaluate the overall presentation, structure and content of the financial report, including the disclosures, and whether the financial report represents the underlying transactions and events in a manner that achieves fair presentation.

We communicate with 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.

Grant Thonton

Grant Thornton Audit Pty Ltd Chartered Accountants

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M S Bell Partner – Audit & Assurance Brisbane, 30 September 2024

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Paving our Way to healthier Western Queensland communities

Telephone: 07 4573 1900 Email: wq\_admin@wqphn.com.au www.wqphn.com.au 240 Queen Street Brisbane QLD 4000

#### WINTON

60 Elderslie Street PO Box 412 Winton QLD 4735

#### ROMA

22b Bowen Street PO Box 507 Roma QLD 4455









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