



North and West Remote Health

Annual Report

2016-2017





Year in Review

The 2016/2017 year has delivered a complex array of transition of services, consolidation, restructure, business development and service delivery. I am confident the many achievements experienced by NWRH directly reflects the commitment by team members at all levels to service continuity, communities and other stakeholders.

A major focus for the organisation has been to successfully transition over \$5M of Indigenous Health services to Gidgee Healing (Aboriginal Community Controlled Health Organisation) for Lower Gulf and Mount Isa communities. This required a commitment from both organisations in a collaborative, respectful and productive relationship to achieve the transition of program activity, employees and assets. While the operational workload behind a transition of this size was immense, it has been a successful outcome for each organisation and the community with a full transition achieved on schedule by 30th September 2017.

NWRH continues to work with the Western Queensland Primary Health Network (WQPHN) to redesign contracted health services to improve efficiencies financially and in service delivery. WQPHN continues to develop their commissioning framework to secure value for funding and improved health outcomes across their region.

These two primary areas of activity have impacted on workforce retention over the last three years, with employee turnover of sixty-two percent reported at 30th June 2017. The result is a serious impact on continuity of services, community relationships and retaining organisation intelligence; with outcomes only achievable through a reliance on short term employment contracts and locum services. An internal leadership

program has been developed to better support our workforce, building their capacity and resilience in a very fluid environment. This program will reach its full potential in the 2017/2018 year.

Substantial resources have been injected into improving the financial and operational efficiency of the three Residential Aged Care facilities managed by NWRH. This is supported by a successful capital infrastructure tender application to build accommodation in the Lower Gulf. This will continue to remain a focus for the organisation in the coming year.

The following report highlights the many service outcomes and achievements from the year that will provide insight into this vibrant organisation.

In closing, I wish to acknowledge the dedication of Directors, Senior Executive and employees for their contribution and commitment to ensuring NWRH remains flexible and responsive, capitalising on opportunities towards achieving our goal of healthier people in remote, rural and regional communities.

Evelyn Edwards
Chief Executive Officer

BUSINESS GROWTH

NWRH is building its service profile through registration as an NDIS provider in the Townsville and surrounding communities. The organisation took a measured approach to entry into the scheme, with the coming year focussed on a renewed business growth in this area.



Program Overview

AGED CARE & DISABILITY

The 2016/2017 year was the first full year of operations for Aged Care Facilities (ACF) in Normanton (Kukatja), Doomadgee (Ngooderi), and Mornington Island (Kuba Natha). Demand for ACF remains steady with residential facility occupancy levels increased to thirty-six residents whilst also providing for two regular respite requests.



ACF and Community Aged Care Services underwent successful accreditation auditing and quality assurance under the National Residential Aged Care Standards and National Home Care Standards by the Australian Aged Care Quality Agency.

NWRH continues to provide Community Home Support Services under the Commonwealth Home Support Program (CHSP) and the Home Care Program (HCP) to aged care clients. The CHSP and HCP programs operate in Burketown, Dajarra, Karumba, Longreach, Birdsville, Bedourie, McKinlay, Mornington Island, Doomadgee, Mount Isa, and Normanton and includes:

Domestic Assistance
Personal Care
Dementia Advisor
Continence Advisor
Specialised support services
 (including the provision of Allied Health Support)
Social support
 (group and individual)

Meals on Wheels
Transport
Yard Maintenance



DISABILITY SERVICES

NWRH recognises the value provided to people living with disability in rural, regional, and remote Australia. As a registered NDIS service provider in Allied Health, Mental Health, and Community Services we respond to the significant demand driving the disability services reform.

Over the 2016 Strong Growth /2017 year has been experienced in NDIS.....

NWRH's strength lies in working with communities to increase access to services for people living in rural, regional and remote areas. This strategic approach delivers a methodology to sustainably increasing service offering to NDIS eligible clients.



In 2016/2017, NWRH made significant investments in systems, people, and processes to provide full and complete information on service choices for people with disability.

EARLY INTERVENTION AND OUTREACH ALLIED HEALTH

NWRH uses an embedded hub and spoke model of deployment and presence of services. This model places a scalable Allied Health and Mental Health / Wellbeing professional workforce in a remote area hub. This is an efficient model that increases access to care and reduces travel.

The hub and spoke model is complimented with a locally based Mental Health and Wellbeing Program in very remote areas. This holistic model incorporates the physical, mental, spiritual, and social aspects of health within an Aboriginal context.

40% | **Emphasis is placed on developing a local workforce with forty percent of our workforce identifying as Aboriginal or Torres Strait Islander, many local to each community.**



QUALITY ASSURANCE

Quality assurance and accreditation activities during the 2016/2017-year include:



- AS/NZS ISO 9001: 2016 12-month review, 2nd year re-accreditation
- Australian Residential Aged Care Standards 3-year accreditation cycles
 - Kuba Natha - Mornington Island
 - Ngooderi - Doomadgee
 - Kukatja - Normanton
- Australian Community Aged Care Standards
- Registered National Disability Insurance Scheme Provider
- Compliance with Queensland Health (2015) Credentialing Standards for Health Professionals
- Australian General Practice Accreditation Limited (AGPAL) accreditation (August 2016), transferred to Gidgee Healing (March 2017)

PARTNERING AND COMMUNITY

Strong partnerships and community rapport are key to positive service provision and health outcomes. NWRH worked towards and achieved the following partnerships and community involvement:

- **Cloncurry Shire Council, NWRH and Royal Far West in Partnership with St Joseph's Primary School, Cloncurry State School and School of the Air**
 - Paediatric Allied Health telecare model with community, NWRH staff and family capacity building components
 - Clients aged 4-8 years of age living in Cloncurry and surrounds

- Commenced first term 2017
- Project funding sourced through Department of Social Services, Royal Far West and Aurizon (Community Grant)

➤ **Central West Integrated Care Innovation Fund Steering Committee member**

- Multi-agency funded collaboration designed to improved health outcomes for western corridor communities (Barcoo, Boulia and Diamantina Local Government Areas)

➤ **Queensland Health Statewide Rural and Remote Clinical Network – Allied Health Working Group Member**

➤ **Mount Isa Health Literacy Project**

- NWRH and Mount Isa City Council Library partnership
- Monthly 'talking books' Mount Isa community members with various health conditions sharing with recently diagnosed community members about their journey
- New health section of the library was established with Allied Health informed book selection
- Health services information hub established at the Mount Isa City Library
- Promotion of services through Mount Isa City Council social media and website

NWRH builds community capacity sourcing Meals on Wheels services at a local level from:

- Mount Isa
- Camooweal
- Dajarra
- Karumba
- Birdsville
- Bedourie
- Burketown



NWRH develops community capacity through our local workforce at all levels resulting in increased retention in remote areas; locally informed service design and service uptake:

- In 2016/2017, NWRH commenced an Emerging Leaders Program (ELP) adapting the International Health Service Leadership Framework to reflect the diversity of regions and an inclusive employment lifecycle

During the 2016-17 financial year NWRH employed an additional 26 people from the local communities in the Lower Gulf - Doomadgee (7), Mornington (14), Normanton (5), most were employed to work in our Aged Care Facilities.

RECONCILIATION ACTION PLAN

NWRH has progressed the Reconciliation Action Plan (RAP) developed in 2015/2016. Our changing environment and growth, ensures the next path in the journey of Reconciliation Australia is to progress to the Innovate RAP.

NWRH has evolved our RAP through a number of phases. The initial RAP effort recognised that as Health Service providers the NWRH Cultural Protocols of Reconciliation Australia needed to be formalised. The Traditional Owners and local Custodians across our delivery area are central to respectful and safe relationships, brokering protocols leading to Cultural Security.

In 2016/2017 NWRH transitioned services from NWRH to an Aboriginal Community Controlled Health Organisation (ACCHO), Gidgee Healing. The following outcomes were achieved:

- Retention of local Aboriginal workforce in communities
- Continuity of services of clients being transitioned
- Adherence to privacy and confidentiality laws through collaborative consent process
- Strategic direction for NWRH to prevent competition with ACCHOs
- Formal partnership between NWRH and Gidgee Healing

Other Significant Achievements

- Appointment of a dedicated Manager position for Cultural and Community Relations on the NWRH Executive Management Team

COMMUNITY CULTURAL PROTOCOLS

"It is enlightening to see NWRH taking a lead approach to implement and follow community cultural protocols as we deliver health, aged care, disability and well-being services in regional, rural and remote areas of North Queensland. This process marks an important step in addressing the Closing of the Gap campaign."

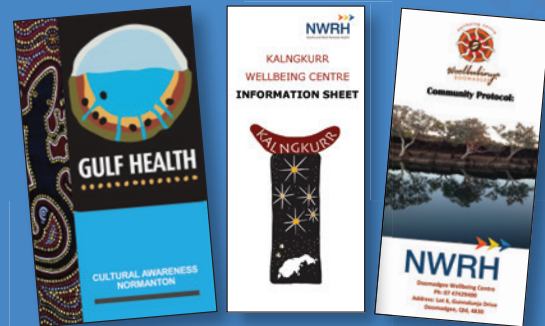
Randal Ross | NWRH Manager Cultural and Community Relations

ACKNOWLEDGMENTS

Kalngkurr Wellbeing Centre, Mornington Island

Shana McMullen and Kaiden Nash, Normanton

Kelly Barclay and the Woolbubinya Wellbeing Centre, Doomadgee



- Roll out of Cultural Foundation Training
- Compilation of baseline data on current level of understanding on Aboriginal and Torres Strait Islander history, cultures and achievements (Online Cross-Cultural Training)
- Increased accessibility of a calendar of Aboriginal and Torres Strait Islander significant events and active participation

Financial Overview

NWRH's short and long-term objectives are to deliver comprehensive, high quality and cost-effective packages of primary health and wellbeing, aged care and disability services.

During the year the principal continuing activities of the company were to support, enhance and deliver primary health care, residential aged care, home care and home support programs and to respond effectively to local health care needs.

During the 2016/2017 financial year the Company managed 35 (2016: 36) individual programs totalling \$23.6m (2016: \$20.2m). The grant income received from contracts during the 2016/2017 financial year were a mix of Western Queensland Primary Health Network 35% (2016: 58%); Commonwealth 49% (2016: 27%); State 6% (2016: 10%) and non-Government Funded Departments 10% (2016: 1%).

NWRH recorded a loss from ordinary activities for the 2016/2017 financial year totalling \$2.848m. This loss was based on the disposal of assets totalling \$2.891m that were attached to the Indigenous Australian's Health Program (IAHP). These assets were held by NWRH on behalf of the Commonwealth of Australia and transferred to the Community Controlled sector. Excluding the accounting treatment for this loss on disposal (being a non-cash flow transaction), the Company recorded a net surplus from ordinary activities of \$42,936 (2016: \$60,120).

The Company remains in a strong financial position as recorded in its 2016/2017 balance sheet, represented by its net current asset position of \$4.3m (2016: \$4.2m) and a total equity accumulated surplus of \$2.14m (2016: \$2.10m).

A copy of the full financial report and auditors report has been provided to the members and all relevant funding organisations.

Key Achievements



SUCCESSFUL TRANSITION

of "Phase 1" of the Australian Indigenous Health Program (IAHP) to the Aboriginal Community Controlled Sector including Staff, Assets and Infrastructure.



COMMENCED THE PROVISION

of **NDIS** services in Townsville, North West and Lower Gulf as a registered NDIS service provider



SUCCESSFUL TRANSITION

of the Integrated Team Care and Supplementary Services (ITC) program to Nukal Murra (Aboriginal Community Controlled Sector Consortium)

3-Year



accreditation approvals by the Commonwealth for the three Residential Aged Care facilities



Decrease in the average residential aged care facility vacancy rate from **15% to 5%** during NWRH's first full year of operation

Successful

completion of "Phase 1" of the improvements and upgrades to the three residential aged care facilities located in Doomadgee, Normanton and Mornington Island as part of the transition program from the previous service provider to NWRH



Increased efficiency of in the delivery of Primary Health Care services

8%



Increased efficiency of in the delivery of Mental Health services

7%





Our Future

Phil Barwick, Chairman NWRH

The 2016/2017 year reported an interesting mix of challenges and opportunities for the NWRH entity and heralds a refining of the target groups. We have witnessed consolidation and streamlining of our suite of services and the organisational systems, and moderate geographical expansion of our delivery boundaries adding to an exciting year.

The Board of Directors and the Executive Management team have maintained focus on the strategies in place since 2016 planning outcomes were determined.

Broadly speaking this has the organisation continuing to grow services into the National Disability Insurance Scheme framework, consolidating primary health care services to our seniors living at home or in residential facilities, seamlessly and systemically divesting health services to Aboriginal Community Controlled medical entities, and ramping up into more focussed areas of allied health services and other services across North Queensland.

It has been an immense pleasure to once again work with our highly skilled Directors and Executive team members that lead NWRH. Looking through to next year and beyond I see great opportunity for the organisation to reach more clientele more often. This hardworking group must be recognised for their dedication to achieving health outcomes and reducing the incidence

of illness throughout the communities that we service with our brand of primary health care services.

I will pay tribute to our staff of allied health professionals, clinical staff, administration team members, as well as all line managers and team leaders for their ongoing support of our company's direction and strategies. I sincerely thank each of them for their personal dedication to improving the health of residents across North Queensland.

Phil Barwick – Chairman



Governance

The Company is overseen by a Board of six highly qualified Directors who meet monthly. The Board and Board sub committees ensure strong governance and oversight of all elements of NWRH operations. The Board sub committees include:

- Audit and Risk
- Cultural Competency and Stakeholder Engagement
- Clinical Governance
- Change Management
- Remuneration

This multilayer approach to governance provides transparency and insight into all elements of the organisations operation. The Board and Senior Executive Management undertake annual Strategic Planning activities to monitor new opportunities.

The organisation benefits from four highly skilled and experienced Managers, led by the Chief Executive Officer (CEO) who has held various roles within the organisation for 21 years including the last 7 as CEO.

The NWRH corporate structure is designed on a "place based" principle with current areas of responsibility including Central West, North West, Lower Gulf, East Coast and Corporate. This allows consistent concentration on local partnerships and maintenance of program activities.



Our Principles



1. People own their own health



2. Communities control their own health services where possible



3. Staff are employed locally, and assisted to build their skills and capabilities



4. Flexibility and responsiveness is possible because staff live where they work

“We have firm connections with communities based on ongoing relationships and genuine understanding of needs and cultural sensitivities.”

NWRH

NORTH AND WEST REMOTE HEALTH

NWRH respectfully acknowledge the Traditional Owners, Elders and Leaders past, present and emerging as Custodians of the lands across which we deliver Health and Wellbeing Services

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