



Danila Dilba[®]
Health Service

ANNUAL REPORT

2020 - 2021





Contents

About Us	5
Our Values	6
Social determinants of health	7
Our Board	8
Chairperson's Report	12
CEO's Report	14
Our Service Delivery Model	16
Danila Dilba Health Services Map	17
Year At A Glance: 2020-21	18
Awards	20
2017-2022 Strategic Plan	22
Clinics	24
COVID-19 Response and our Vaccination Centres	27
Clinical Governance	28
Services and Programs	30
Research, Policy and Advocacy	36
Danila Dilba's Dan Murphy's victory	38
Corporate Services	40
Financials	47



About Us

Danila Dilba was established in 1991 to provide medical services for Biluru (Aboriginal and Torres Strait Islander people) in the Yilli Rreung (greater Darwin) region. Beginning with just one clinic and seven staff, Danila Dilba now employs more than 200 staff and operates nine clinics across our region, delivering high quality, integrated health services that include a range of specialist and allied health services, social and emotional wellbeing services, and health promotion and education. Our clinics are managed by senior Aboriginal staff.

Our name, our people, our region

Our full name, Danila Dilba Biluru Butji Binnilutlum, was given by people of the Larrakia Nation, the Traditional Custodians of the land where Darwin and Palmerston are situated. In the Larrakia language, Danila Dilba means 'dilly bag used to collect bush medicines' and Biluru Butji Binnilutlum means 'Aboriginal people getting better from sickness'. Aboriginal and Torres Strait Islander people from around Australia have visited Larrakia Country for generations. Some of the visitors stayed and we are now blessed with a rich cultural diversity.

Our logo

Our logo was designed by Larrakia Elder, the late Reverend Wally Fejo. The story of the logo is: the fish being in a school are excited when jumping around and convey to us our exciting, healthy life. The turtle going back to lay her eggs represents the people. The stick represents a hunting tool used to find to find her eggs. The overall circle emulates looking inside a dilly bag from above. The snake brings the underlying threat of danger to our wellbeing and reminds us that we should always sustain ourselves and be on guard for our health.



Danila Dilba
Health Service

Our Purpose

Our purpose is to improve the physical, mental, spiritual, cultural, and social wellbeing of the Biluru community in the Yilli Rreung (Greater Darwin) area. We achieve this through innovative comprehensive primary health care programs, community services and advocacy. Our work is based on principles of equity, access, empowerment, self-determination, and collaboration.

Our Values



Respect



Trust, honesty and integrity



Fairness, transparency and accountability



High professional standards, ethics and quality

What is a community-controlled health service?

Danila Dilba is part of a national network of community controlled Aboriginal community controlled primary health care services that deliver more than three million episodes of care every year. Despite improvements on some measures, there are still significant disparities between Aboriginal and non-Aboriginal peoples' health in the Northern Territory.

Aboriginal health services have an important role to play in addressing inequality. We make health services available to our communities and deliver comprehensive primary health care that is easy to access and provided in a culturally respectful and safe environment.

We work to address the social determinants of health including the broader issues that affect our people's health, through evidence-based research and public advocacy. We also work to empower individuals, families and communities to optimise their health.

Accessible health services are critical to good health care. Our community controlled primary health care service design is built around treating the whole person, including physical and social and emotional wellbeing, and providing health services close to where people live.

What is comprehensive primary health care?

- Meeting people's needs through comprehensive and integrated health services throughout the life course, strategically prioritising key health services for individuals and families, and public health functions to improve overall health.
- Systematically addressing the broader determinants of health through evidence-based public policies and actions.
- Empowering individuals, families, and communities to optimise their health and advocating for policies that promote and protect health and wellbeing.

Social Determinants of Health

The social determinants of health are ‘the causes of the causes’ of poor health. These include living conditions, educational opportunities, employment, working conditions and income, access to transport and health care, and community and social support. They create the circumstances that contribute to health risk factors that lead to poor health outcomes.



SOCIAL DETERMINANTS OF HEALTH



Our Board

DIRECTORS



Carol Stanislaus
(Chair)

Carol Stanislaus (Chair) is a Tiwi woman, born and raised on Larrakia country and a descendant of the NT Stolen Generation. She has worked in a variety of Indigenous positions in tourism, government and justice, and currently works with the Australian Government's National Indigenous Australians Agency. She holds a Bachelor of Applied Science in Aboriginal Community Management and Development. Carol is a member of the Danila Dilba Audit and Risk Management Committee.



Camille Lew Fatt

Camille is a local Aboriginal woman, born and raised in Darwin. She holds a Graduate Certificate in Business (Public Sector Management), Bachelor of Commerce and Diploma of Business. Camille is currently the Director, Aboriginal Employment and Career Development with the NT Government.



Samantha Ludwig

Samantha, a Kungarakangurindji woman from the Northern Territory, is a highly accomplished policy and project manager with more than 20 years of domestic and international experience. She has Masters' degrees in International Health Management and in Management of Human Resources. She is currently Director, Executive Services at the Batchelor Institute.



Michael McGregor

Michael has over 20 years' experience working with Aboriginal communities in the Northern Territory across a wide range of sectors including health, employment and training, and business development. Michael brings a varied array of skills to the Danila Dilba board after working for the Australian Government implementing capacity strengthening initiatives with non-government and government funded organisations across the Territory.



Rus Nasir

Rus is a Djugan man whose family is from Broome, Western Australia. He was born and raised in Darwin. He holds a Bachelor of Behavioural Science, Psychology and Law. Rus has held senior roles in the government, higher education, Aboriginal community-controlled organisations and the private sector. He has a keen interest in Indigenous business development and is currently employed in the NT Department of Health Aboriginal Policy Unit, focusing on improving the health and wellbeing of Aboriginal Territorians.



Shaun Tatipata

Shaun is the founding Director of Australia's first Aboriginal-owned optical and eye care provider, the Deadly Vision Centre. This Aboriginal Enterprise promotes health and wellbeing, while also celebrating Aboriginal and Torres Strait Islander culture and community. Shaun trained as an Aboriginal Health Worker in 2001. Since graduating, he's delivered primary healthcare services and implemented outreach programs in Aboriginal Community Controlled Health Organisations, as well as with the Northern Territory Government. Until recently, Shaun led The Fred Hollows Foundation's Indigenous Australia Program. Shaun, who is of Wuthathi and Ngarrindjeri descent, is passionate about strengthening service coordination through improved leadership and governance and helping to close the gap in eye health outcomes for Aboriginal and Torres Strait Islander Australians.

Our Board

DIRECTORS



Wayne Kurnoth

Wayne is a Larrakia man from the Fejo family group, and is also a member of the DDHS Audit and Risk Management Committee. He is currently employed as the First Nations Union Organiser for United Workers Union (UWU) supporting UWU members with workplace issues such as bullying and harassment, stolen wages and enterprise agreements, and having a voice across the NT. Wayne represents UWU on the National ACTU Indigenous Council. Previously, he worked as a boilermaker and welder for 17 years in the shipbuilding, construction and oil and gas industries.

Our Board

INDEPENDENT DIRECTORS



Deborah Butler

Deb is a Jawoyn woman, born and raised in Katherine. She has a Bachelor of Business and a Master of Public Health. Deb is currently Director for System Performance at the Northern Territory Department of Health. She has over 18 years' experience working with government projects and policy in various roles in both South Australia and the NT, primarily dealing with Aboriginal housing and health policy.



Bronwyn Rossingh

Bronwyn has been working and living in the NT for over 20 years. Bronwyn is a Fellow of Certified Practising Accountants Australia, a Graduate of the Australian Institute of Company Directors and has a PhD on Culture Legitimate Accountability. She has worked in Indigenous communities in community engagement, governance, financial management, community development, youth leadership, and education and training pathway development. Previously she worked for chartered accounting firms in Perth and London for over ten years. Bronwyn is an Independent Director and a member of the DDHS Audit and Risk Management Committee.

Our Board

DIRECTORS



Sue Roman
(Larrakia Director)

Sue is a senior Larrakia Elder who has retired from full-time employment.

Term finished in November 2020



Shannon Daly
(Deputy Chair)

Shannon was employed by the Top End Health Service as the Consumer and Cultural Consultant at Royal Darwin Hospital. Shannon has 13 years active experience as an Aboriginal Health Practitioner (AHP, previously AHW) and has been an AHP educator and AHP lecturer. Shannon completed her AHP training through Danila Dilba in 2001. Shannon is passionate about the AHP role which is vital to providing culturally safe and competent care to Aboriginal people. Shannon left NT Health in April 2021 to pursue a career in mining and resigned from the Board effective 18 June 2021.

Term finished in June 2021

Chairperson's Report



Carol Stanislaus
(Chair)

This year marks the 30th Anniversary of Danila Dilba Health Service (DDHS), and it has been an exciting and challenging one. We continue to strive towards improving the health of our mob; this year, we opened our vaccination centres and consolidated our good work by opening our new clinics, Humpty Doo and Don Dale. We brought a number of allied health staff in-house, and successfully advocated for the public health interests of our people, in challenging the development of the alcohol megastore, Dan Murphy's.

In the past year, we sadly lost a number of our past members and Directors. DDHS is forever grateful for their contributions and support. On behalf of the organisation, I'd like to give my sincerest condolences to their families and friends.

We have been updating our strategic plan to ensure that DDHS stays a strong, healthy and viable organisation. We continue to improve our governance, such as upskilling the Board and offering Australian Institute of Company Director (AICD) training.

There has been important work done to review and update the DDHS Delegations and Risk Register, as well as contributing to COVID-19 pandemic planning and the opening of our vaccination centres. Careful planning ensures DDHS is flexible to the constantly changing needs of our clients in a pandemic environment.

The new DDHS strategic plan will focus on meeting challenges and community expectations. The DDHS Board participated in a workshop with Social Ventures Australia (SVA) that focused on consolidating our services and increasing strategic growth.



We've been in the business of protecting Darwin in a culturally safe way for 30 years, and this year is no different.



Our long-term capabilities as an organisation depend on our access to funding, which is why we are undertaking a review of our funding model. As the organisation has expanded and client numbers have grown, we now see over 2000 visiting and transient clients, and 800 clients that are sleeping rough. We want to continue to provide these clients with a high level of support and care, but also consolidate and focus on our core business. That business is the primary healthcare of regular DDHS clients; to fulfil our responsibilities to them, we are looking to increase access to services and reduce appointment waiting times in a sustainable way.

In the short term, DDHS is working hard to get our mob vaccinated, ahead of serious and devastating community spread. Getting vaccinated is the best way to protect your family and community from COVID-19, a dangerous and very real virus. The vaccination is safe and extremely effective at reducing hospitalisation and death. We want all our clients to come talk to us about getting vaccinated and any worries they might have. We've been in the business of protecting Darwin in a culturally safe way for 30 years, and this year is no different.

The Board and I are incredibly proud of the work we do at DDHS and extend a heartfelt thank you to all of our staff who've continued to remain committed to the organisation and resilient in the face of a global pandemic.

CEO's Report



Olga Havnen
(CEO)

COVID-19 continued to be one of the biggest challenges that our organisation has had to face. We've been adaptable and agile in an everchanging landscape of COVID-related challenges, and it is because of the commitment and dedication of our staff that we have been able to continue to provide our services and support to the Darwin community in working throughout the pandemic.

Governments, health sectors and businesses struggled to deal with the myriad of challenges that confronted us. DDHS's challenges ranged from keeping our clients, community and staff safe, to ensuring that we had adequate supplies of PPE, educating and raising awareness in our community of the risks and dangers posed by COVID-19, and ensuring that we were well prepared to respond.

This is a testament to our dedicated and highly committed staff. The NT has been extremely fortunate that we had not experienced any outbreak of community spread of COVID-19. It is deeply concerning that too many of our people have become reluctant to be vaccinated as a result of misinformation within the community and on social media.

As travel restrictions are lifted and people are able to travel from interstate and overseas, the potential for a serious outbreak of COVID-19 in our community cannot be underestimated – it would be devastating! We need to do all that we can to make sure that everyone is fully immunised and to constantly remind people of the importance of practicing good hand hygiene, using face masks and where possible – social distancing. Most of these safe practices are almost impossible for our clients and communities to achieve when many people don't have adequate housing and find meeting their basic needs difficult.

“

The dogged determination of the founding members to have our own Aboriginal community-controlled health service is a real testament to the vision and drive of community leaders.

”

2021 marks Danila Dilba's 30th anniversary. This is no small achievement. The dogged determination of the founding members to have our own Aboriginal community-controlled health service is a real testament to the vision and drive of community leaders. We have grown from a small, one clinic service to now having local clinics close to where our people live. Danila Dilba has grown over the years to become a mature, sophisticated organisation that strives to ensure we will be a sustainable, viable organisation accessible to all First Nations people who live in our service region. We know that DDHS is regarded by our community as a highly trusted and respected service - something that can only be achieved when our clients and community have a strong, positive relationship with our health professionals. It has been inspiring to see the increasing number of local people becoming part of the health service team, including drivers, administration, clinicians, qualified health workers, nurses, GPs and allied health specialists. It is the quality of our staff that makes such a difference to our clients.

As my time as CEO is nearing eight years it is time for me to hand over to someone new to continue to lead Danila Dilba on its next phase of the journey. I have enjoyed the tremendous support of our Chairperson - Carol Stanislaus and the board, as well as the support and contributions of our Senior Leadership Team. There are way too many people to thank individually but I would like all of the team at DDHS to know that I have valued and enjoyed working with you all over these years. We could not have achieved what we have without your amazing contributions and commitment. I wish the board, staff and community well and encourage our members to remain actively engaged and involved in the important next stage of DDHS' growth in the coming years.

Our Service Delivery Model

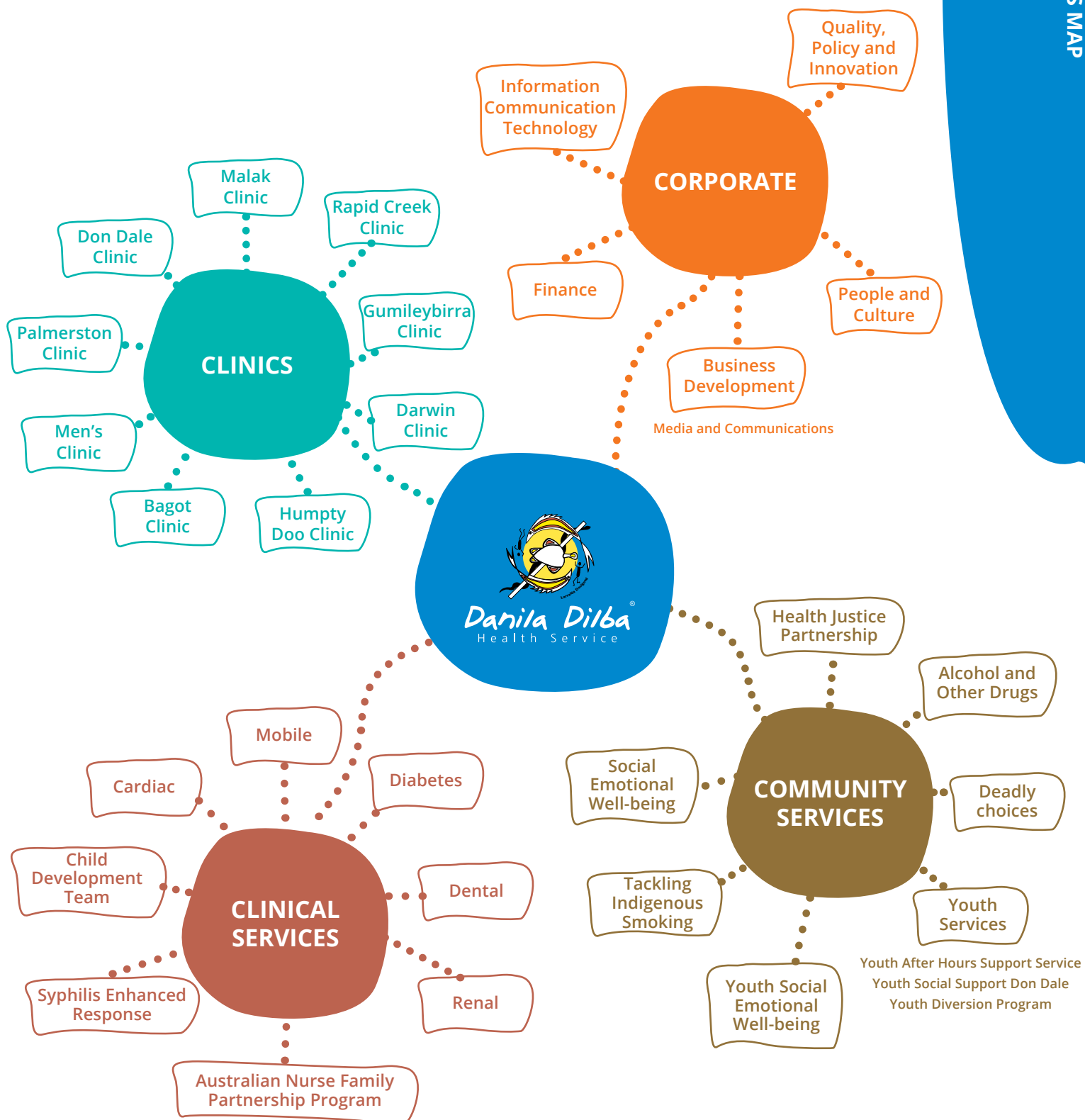
Over the past six years, Danila Dilba has worked to develop and refine a service model that both meets our clients' needs and is sustainable. The process is ongoing as DDHS continues to grow and mature.

Our service design was adapted from the Institute for Urban Indigenous Health (IUIH) model in south-east Queensland.

The key elements of our service model are:

- Cultural safety
- Services close to where people live
- Integrated services – a 'one stop shop' taking a whole of life care approach
- Permanent staff allocated to each clinic to build team stability and improve continuity of care for our clients
- Social support and counselling services
- Extended clinic hours
- Continuous Quality Improvement (CQI)
- Data collection – informs what we do and how we do it.

Danila Dilba Health Services Map



Year at a glance: 2020 - 2021

WHERE OUR CLIENTS LIVE - TOP THREE



- 27% Palmerston & surrounds
- 19% Fannie Bay to Berrimah
- 19% North-Eastern suburbs



NUMBER OF REGULAR CLIENTS

9,678
TOTAL



5,412
FEMALE



4,266
MALE



NUMBER OF NEW CLIENTS

3,818
TOTAL



TOTAL MEDICARE INCOME



\$5,275,126

TOTAL EPISODES OF CARE



74,315

TOTAL CLIENT CONTACTS



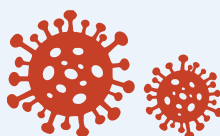
118,849

NUMBER OF PRESCRIPTIONS ISSUED



52,139

COVID-19 TESTS



1,490

COVID-19 VACCINATIONS (MARCH - JUNE 2021)



3,321

FLU VACCINATIONS

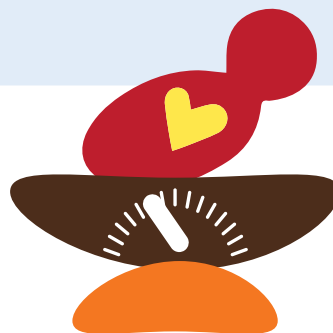
1,523



NUMBER OF ANFPP MUMS

30

Currently 30, but 50 within the financial year (some have graduated)



BABIES BORN WITH NORMAL BIRTH WEIGHT

127 (84%)

Note from last year: a normal birth weight is between 2500-3500gms. A normal birth weight is a good start to life.

NUMBER OF ANFPP BIRTHS

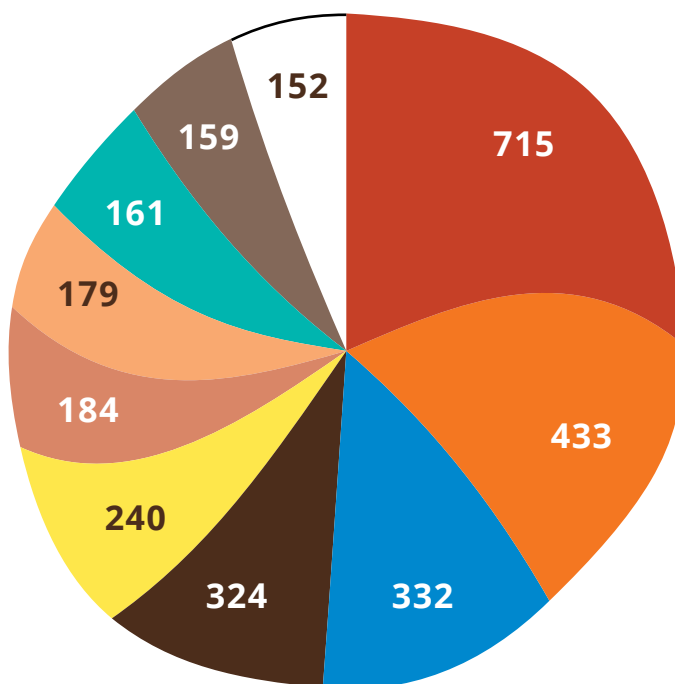
31

AOD REFERRALS



100

TOP 10 REFERRALS



- DDHS SEWB Counsellor
- Dentist external
- NT Cardiac
- Paediatrician
- RDH Antenatal
- DDHS Dietitian
- DDHS Physiotherapist
- Optometrist
- General surgeon
- NT Hearing Services

Awards



Danila Dilba was awarded the prestigious International Juvenile Justice Observatory (IJJO) Juvenile Justice Without Borders International Award for 2020 for its work with Don Dale Youth Detention Centre.

The IJJO is based in Brussels. This particular award recognises experts and institutions that show a steady commitment towards the development of juvenile justice systems.

Over the first five months of DDHS taking over health services at Don Dale Youth Detention Centre, its residents have had more than 2,500 contacts with our health professionals.

Danila Dilba continues to be committed to youth justice reform and addressing the health issues that stem from and result in youth incarceration.



2017-2022 Strategic Plan

The Danila Dilba Strategic Plan builds on the achievements of the organisation and confirms a path moving forward.

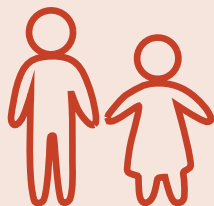
Work is currently underway to update the Strategic Plan, which isn't due until 2022. Below are highlights addressing the current Strategic Plan.

Strategic priority 1

Improving health and wellbeing across the life course. Improve the health and wellbeing of Biluru people through access to high quality, holistic and culturally safe comprehensive primary health care, incorporating prevention, early intervention and direct care services.



DDHS supported the health and wellbeing of our community and staff by developing and implementing responses to the COVID-19 pandemic including operating a respiratory clinic, vaccine centres, outreach and health education.



DDHS responded to challenges in addressing the developmental needs of children and young people by establishing an in-house paediatric service to assess, support and refer children with developmental concerns and added allied health capacity relevant to children and young people.



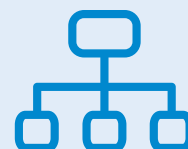
DDHS opened the Humpty Doo clinic to improve accessibility for clients in the rural area.

Strategic priority 2

Building organisational capacity and strength. Develop Danila Dilba's organisational capacity to deliver sustainable and effective services and support a skilled and culturally competent workforce.



DDHS undertook a detailed review of ICT and implemented reforms to ensure security, Telehealth capacity and work from home capability.



Organisation structures were revised as required to support better integration of programs and services.



Extensive training and staff education was conducted to support the skills and knowledge needed for rollout of the COVID-19 response.

Strategic priority 3

Strengthen partnerships. Develop and strengthen partnerships with community and other stakeholders to enhance the work of DDHS and build collaboration at local, regional, territory and national levels.



DDHS strengthened its health justice partnership with NT Legal Aid Commission through the development of Legal Health Mob.



The successful outcome in opposing the public health harms that would flow from the Dan Murphy's proposed store, was based on strong existing local partnerships and the formation of new national partnerships.



The DDHS response to COVID-19 was grounded in being part of partnerships across Greater Darwin involving both government and non-government organisations with roles in health and welfare services.

Strategic priority 4

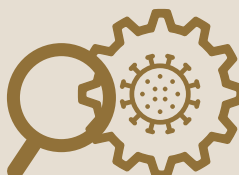
Achieving continuous improvement and integration of services. Ensure continuous quality improvement (CQI) activities lead to evidence-based service design and improvements to services to address clients and community needs.



Knuckey Street, Malak, Palmerston and Men's Clinics were reassessed for AGPAL accreditation. All four clinics that were due for accreditation in 2020-21 were successful in gaining accreditation.



The DDHS Social and Emotional Wellbeing service model was reviewed, taking a CQI approach and building on success while addressing challenges.



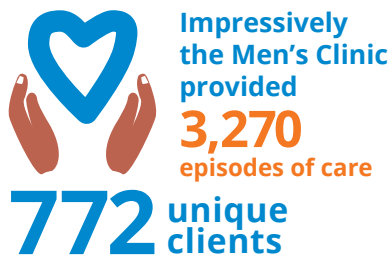
DDHS systems including Communicare were kept under review and CQI improvements made throughout the year to integrate COVID-19 specific activities.

Clinics



Men's Clinic

The Men's Clinic continues to provide culturally appropriate care to men and remains an important service that we provide. Aboriginal and Torres Strait Islander male clients can engage with our qualified male health professionals in a safe space for them.



It has been using TeleHealth to reach patients, particularly in COVID-19 shutdowns, and has hosted GP registrars, medical students and AHPS.



Humpty Doo

As a new clinic established in this financial year, Humpty Doo Clinic is especially open to feedback and making clients feel at home.



A commendable effort for our small clinic in rural Darwin. The clinic brings a sense of community and engagement with healthcare, and has very high attendance rates from clients. We've been pleased to hear from our clients who've said how happy they are to have a DDHS clinic closer to them, helping them receive culturally safe and appropriate care.



Bagot

Bagot Clinic is located within the Bagot community, and services local residents as well as clients from the Darwin and Palmerston regions. This past year, it has built rapport with its local community and the local representative body, Bagot Community Incorporated. It is striving to work in collaboration to achieve better health outcomes for the community.



including school-based health checks at Haileybury Rendall School. It has increased both its staffing and its engagement with the local community.



Rapid Creek

In 2021 our clinic has a team of five GP's (includes GP Registrar) one AHP, two registered nurses, trainee Aboriginal health worker and we have welcomed additional DDHS and external visiting services which include a DDHS Paediatrician, RDH Paediatrician, Physiotherapist, Dietitian and Legal Health mob.

We provide an outreach aged care service that supports clients at the Regis Tiwi aged care facility with culturally appropriate holistic primary health care.

Rapid Creek Clinic also provides a space for the Bringing Them Home Seniors' Group who usually gather three times a month to prepare and enjoy a meal and other social activities.



The clinic also has a community room equipped with an industrial

kitchen and shower facilities which will be used by various groups such as our dietitian, diabetes group, clinical and non-clinical in-services and GP Registrar training.

We have seen a trend in the increasing number of presentations from children under five, school-aged children and adolescents.

Danila Dilba's Rapid Creek clinic has engaged with the Clontarf Academy and Stars Foundation at Casuarina Senior College and Nightcliff Middle School. Our aim is to build a strong relationship with the Academies and Foundations to improve health outcomes for our young Indigenous boys and girls. By providing quality and culturally safe health checks it encourages our younger generation to access primary health care at an early age.

Knuckey Street

Knuckey Street Clinic is located in the heart of Darwin city. As such, it is well positioned to provide care to much of the Darwin population including our rough sleeper clients. It also provides a high number of walk-in services while maintaining optimal chronic disease management.



Knuckey Street
cares for
3,260
clients and
provided
8,385
episodes of care!

“

We contribute to the health of our long-grass mob by encouraging and providing showers for good hygiene, encouraging health checks to prevent chronic health conditions, Orange Sky coming fortnightly to provide laundry for clients and providing donated breakfast food by one of our AHPs fortnightly.

”

-- Knuckey Street Clinic Manager

Clinics



Malak

Malak Clinic is a busy clinic with a diverse range of clients. Its face-to-face contacts have increased enormously over the past year, in part due to increasing services to Juninga Aged Care Facility and school-based health checks at Sanderson Middle School, Marrara Christian College and Dripstone Middle School. The clinic has also hosted a student doing an AHP traineeship, as well as many registrar GPs in the past year.



Palmerston and Gumilebybirra

The Palmerston Clinic and Gumilebybirra Clinic next door provide care for the local Palmerston region, Monday-Saturday. These clinics are large in size and workloads.



They also provide significant support services, including midwifery, diabetes, legal, pharmacy, social work, alcohol and other drugs, physiotherapy and paediatrics and women's health. It provides GP visits to Terrace Gardens Nursing Home and school-based health checks for Clontarf students.

Don Dale Clinic

On 1 July 2020, Danila Dilba took over the provision of primary health care at Don Dale Youth Detention Centre, making us the first ACCHO to provide primary health care in a youth detention setting in Australia. This establishment phase has not been without challenges, but Danila Dilba has been able to deliver a continuous service with high quality results.



The clinic team has worked closely with the Department of Territory Families, Housing and Communities both at an operational and policy level to ensure the provision of primary health care to vulnerable young people in detention. The team has also been able to deliver integrated services with the Danila Dilba Youth Social Support Program.

COVID-19 Response and our Vaccination Centres



In order to encourage our community to get vaccinated and protect ourselves from COVID-19, Danila Dilba established the COVID-19 Vaccination Centres. Vaccinations were not only open to our clients, but to the general public, in an effort to protect the broader Darwin community.

Our staff have coordinated an incredible effort in efficiently providing vaccines, proactively engaging with communities and individuals to increase uptake, and helping to spread correct information about the virus and vaccination. These efforts have been particularly impressive in periods of high demand, such as during lockdowns. Between 1 March and 30 June 2021, Danila Dilba provided 3,321 COVID-19 vaccinations.

Darwin Vaccination Centre

The Darwin Vaccination Centre was established on 30 March 2021, making it our first designated vaccination centre.

Palmerston Vaccination Centre

The Palmerston Vaccination Centre was established next door to our existing Palmerston Clinic to increase accessibility to the Palmerston region on 20 April 2021.

Mobile Vaccinations

Mobile engagement across the Greater Darwin region to support vaccination against COVID-19 was a significant undertaking and played an important role in our community. The Mobile Team provided information and engagement to our rough sleeper population as well as local Aboriginal people within the Darwin and Palmerston region.

Clinical Governance

Incident Reporting

At Danila Dilba, any clinical incidents that occur are reported through the organisation's incident reporting system. These incidents are investigated by our clinic managers who are responsible for implementing a plan of corrective action. Once this stage is completed, Regional Managers are then responsible

for reviewing and ensuring that the appropriate action has been implemented.

The investigation process and corrective action is then approved and finalised by the Head of Clinical Governance. All clinical incidents are considered and evaluated by the DDHS Clinical Safety and Quality Committee

who agree on service wide safety and quality activity (such as an immunisation safety action plan), with the aim of reducing the risk of these incidents occurring again. The Head of clinical Governance then provides a report on this to the DDHS Board Audit & Risk Committee.



Clinical Incidents

Incident Type	Number
Adverse Reaction/Event	3
Blood/Bodily Fluid Exposure	0
Documentation Error	20
Immunisation Error	17
Medication Error	15
Needle Stick Injury	0
Other	23
Total	78

AGPAL Accreditation

Knuckey Street, Palmerston, Malak and Men's Clinics were reassessed for accreditation during this year. The accreditation surveyors performed onsite surveys between 27 – 30 April 2021. All four clinics were assessed as meeting the RACGP 5th Edition Standards for General Practice and were reaccredited on 27 July 2021.

Pharmacy

The Danila Dilba pharmacy service gives 'whole of service' support to clinic staff and clients providing subsidised medicines, home medicine reviews, chronic disease support, input to prescribing practice and suggestions for ongoing quality improvement. The pharmacy service helps clients with complex health needs to understand their prescribed medicines and follow their medication management plan.

Feedback survey

This question is about HOW our health staff talk to you. Please think about your last visit to DDHS.

	Poor	Fair	Good	Very Good	Excellent	N/A
How well each staff member treated you	1	2	3	4	5	
How well you were explained your circumstances	1	2	3	4	5	
How well you were treated as an individual	1	2	3	4	5	

This question is about THE WAY our health staff talk to you about your last visit.

	Poor	Fair	Good	Very Good	Excellent	N/A
How well you were explained your circumstances	1	2	3	4	5	
How well you were treated as an individual	1	2	3	4	5	
How well you were explained your circumstances	1	2	3	4	5	
How well you were treated as an individual	1	2	3	4	5	

This question is about the information given to you by health staff at your last visit.

	Poor	Fair	Good	Very Good	Excellent	N/A
How well you were explained your circumstances	1	2	3	4	5	6
How well you were treated as an individual	1	2	3	4	5	6
How well you were explained your circumstances	1	2	3	4	5	6
How well you were treated as an individual	1	2	3	4	5	6

Client feedback survey

Q6. This question is about your privacy and confidentiality.

	Poor	Fair	Good	Very Good	Excellent	N/A
Being able to discuss personal issues or sensitive issues	1	2	3	4	5	
Your medical records are kept private at DDHS	1	2	3	4	5	
You were asked for your permission before another clinician accessed your records at the appointment	1	2	3	4	5	

This question is about your experience with the other healthcare professionals at your last visit.

	Poor	Fair	Good	Very Good	Excellent	N/A
The Doctor knew your medical history at the clinic	1	2	3	4	5	
The Doctor gave you options for specialists or other health providers you would like to see	1	2	3	4	5	
The Doctor gave you a list of other health staff you could see	1	2	3	4	5	

This question is about your experience with Danila Dilba Health Service.

	Poor	Fair	Good	Very Good	Excellent	N/A	Don't Know
How well you were explained your circumstances	1	2	3	4	5	6	7
How well you were treated as an individual	1	2	3	4	5	6	7
How well you were explained your circumstances	1	2	3	4	5	6	7
How well you were treated as an individual	1	2	3	4	5	6	7

Services and programs



Active Mob

Danila Dilba's clinics offer front line medical care to our patients, however, strengthening health and wellbeing requires an extended team of allied health and associated staff to meet the holistic needs of our mob.

Danila Dilba employs a range of allied health staff, including a diabetes educator, dietitian, podiatrist, social and emotional wellbeing counsellors, a social worker, and a physiotherapist. We also have relationships with other allied health providers such as optometrists whom we refer to. This team of health professionals delivers the best all round care to our clients.

Paediatric Services

The Paediatric service commenced in March 2021 and employs two part-time Paediatricians and a medical receptionist/clinical care coordinator to run the service. This program has allowed GPs and other medical staff at Danila Dilba to internally refer clients. As a result, clients have been seen more quickly than they would if they were referred to

other service providers. Our paediatric team has delivered comprehensive specialist care, including diagnostic assessments that have supported families and carers to understand their children's needs. The Clinical Care Coordinator plays a vital role in building relationships with people and ensuring families are supported to attend appointments and engage with our services.

Podiatry

IN TOTAL,
DDHS's podiatry
program saw
179
PATIENTS
in the past
financial year.



DDHS employed a Podiatrist (a foot, ankle and leg expert) at the very end of this financial year, having previously engaged an external podiatrist to provide services. This has increased podiatry services from at most 1 day a month to 3 days a week. The podiatrist is currently based at Knuckey Street with visits to Bagot and Palmerston.

Dietitian

Danila Dilba created a dietitian position this past financial year. Our dietitian, Bernadeen, has upskilled the Aboriginal Health Practitioners and worked directly with clients to improve their health through diet choices. Broad educational work has been based out of schools, educating parents on healthy affordable lunches, healthy eating for toddlers and educating teenagers on alternatives to sugary drinks. Bernadeen receives an average of 12 new referrals a week, and has seen 140 new clients since starting in her role in February of 2021, with many returning several times to learn more about healthy eating.

Diabetes educator

The Diabetes Educator has been vital in providing diabetes and self-management guidance and education to pre-diabetics, type 1, type 2, and gestational diabetic patients. An important part of her role has been to develop individualised diabetes education plans for patients in collaboration with medical providers, and to provide nutritional counselling



for weight control and diabetes management. In particular, the diabetes educator did great work with teenagers with diabetes in assisting with meal planning and nutritional management.

Physiotherapist

The Physiotherapist was officially employed in a part time capacity by DDHS for the first time in February 2021 after having been in a visiting role for the past 7 years.

IN IT,
they had
202 CLIENT CONTACTS
in both clinics and at individual client homes, and were available at clinics
39 times

In addition, the physiotherapist contributed to grant applications and the hiring of other new allied health staff, an exercise group program launching next financial year as well as the Strong Lungs project with Monash University and Alfred Health, also launching in 2022.

Australian Nurse Family Partnerships Program

The Australian Nurse Family Partnership Program (ANFPP) is a home visiting program that supports women pregnant with an Aboriginal and/or Torres Strait child and family to improve their own health and the health of their baby.

IN 2020-21
the
ANFPP TEAM
RECORDED



In 2020-21 the ANFPP team recorded 3,282 client contacts

The program also assists with the delivery of food drops to sick clients and families in crisis, helps clients gain permanent accommodation, and facilitated child health checks and immunisations.

Mobile Clinic

The Mobile Clinic operates from the Knuckey Street Clinic and continues to deliver services to vulnerable groups within the community. The team operates outreach clinics for vulnerable populations and people who are homeless, delivers health checks in town communities and works in collaboration with other local service providers.

Social and Emotional Wellbeing

Our Social and Emotional Wellbeing (SEWB) is one of the largest mental health teams in Darwin. The team provides general counselling, mental health nursing and child-appropriate services across all our clinic sites, and in outreach and group therapy settings in partnership with other community organisations. Danila Dilba clients can access these services through a GP referral from a DDHS clinic.

Services and programs



Tackling Indigenous Smoking

The Tackling Indigenous Smoking (TIS) team focuses on increasing community awareness of QUIT smoking messages and the availability of support services for those wanting to reduce or cease smoking. The TIS team holds a range of community events, works with partner organisations and is also involved in school education programs with the Deadly Choices campaign, which encourages young people to avoid taking up smoking or to get help to quit.

Alcohol and Other Drugs

The Alcohol and Other Drugs (AOD) team works with clients in most clinics, offering support to access treatment and help clients to prevent relapses.

The team takes a 'whole of person' approach, working with clients to address issues that contribute to alcohol and other drug use, such as mental health, social isolation, or other underlying causes.

Approaches include therapeutic yarning circles, healing camps and groups which bring men together to connect, share knowledge and stories and build relationships in a safe space.

Deadly Choices

Deadly Choices is an early intervention and prevention program that complements Danila Dilba's clinical programs. Primarily targeted at children and youth, Deadly Choices aims to empower Aboriginal and Torres Strait Islander people to make healthy choices for themselves and their families by encouraging people to stop smoking, get regular annual 'Health Checks', eat good food and exercise daily. Deadly Choices also works in partnership with local schools and youth programs such as Clontarf and the Stars Foundation.

Youth Diversion Program

Danila Dilba delivers a youth diversion program, which is a pre-court program that diverts children aged 10-18 away from crime, prosecution and custody. The program is based on

restorative justice principles and aims to address and prevent harm beyond punishment and towards healing. Run in partnership with the YWCA, the program assists young offenders and those at risk by addressing the causes of their offending behaviour and providing holistic supports.

The program includes case management and youth justice conferencing, social and emotional wellbeing, crime prevention and mentoring programs, as well as 'giving back to the community' and activities to support the wellbeing and recovery process for victims.

Current crime prevention programs include road safety education, substance misuse, anger management and violence prevention. The program is an important part of Danila Dilba's overall aim to see major changes in the way young people experience the justice system in the Northern Territory.



Thank you, First Nations Broadcasting for working with us on this Suicide Prevention campaign. A massive thank you to our two local stars; Peter Kopp and Allen Calma – who lent their voices and faces to this important message and helped DDHS raise awareness of the support available to our community, in this space.

Legal Health Mob

Danila Dilba and NT Legal Aid Commission (NLTAC) further developed our Health Justice Partnership by seconding a full time lawyer from NT Legal Aid Commission and employing an Indigenous Outreach worker to form a pilot program “Legal Health Mob”. The program also uses administrative support from the NLTAC Family Law Section, in-reach legal assistance from the NLTAC Civil Law Section and other legal, health and social

service partners including DDHS’ NDIS Connectors and Social and Emotional Wellbeing teams.

Legal Health Mob hosts legal clinics across six of DDHS clinics on a weekly and fortnightly basis and can attend at their preferred DDHS clinic for intake and/ or advice appointments. Legal Health Mob can refer clients to another legal or community service if needed and offer clients support with any other legal

and social issues that come up, in a considered and culturally appropriate way, through our Indigenous Outreach Worker.

Legal Health Mob looks forward to what the next phase of the partnership will look like as it moves into the second half of the pilot and explores ways to secure sustainable funding.

Beach Hype Day!

Another great event from the DDHS team, with a great turn out and plenty of activities for our mob!



World NØ Tobacco Day!

Danila Dilba held a touch carnival on Sunday 30 May at the NT Rugby grounds, in Marrara, to mark World No Tobacco Day and promote healthier living and kicking the habit. There was a fantastic turn out and the teams involved all gave it 100%. Congratulations to all teams who braved the heat, but especially to the Stingrays and the SB All Stars, for tying in the final!



Policy, Advocacy and Research



The Danila Dilba Policy, Advocacy and Research team advocates for evidence-based policy and legislation that advances Aboriginal self-determination, leadership and wellbeing. We take an active role in advocating across a range of policy and practical issues that impact on health and wellbeing outcomes for Aboriginal people, including child protection, youth justice, housing and homelessness, mental health, alcohol policy and other socio-economic issues.

In the past financial year, Danila Dilba maintained a high-profile role and have been considerably active in the advocacy space, in particular in the area of youth justice and the landmark decision to retract the development of a Dan Murphy's mega store in Darwin – a significant win for public health in Darwin.

Policy and advocacy

Coordinating with other organisations

Danila Dilba continues its fight for better health outcomes for Indigenous people through collaborative work with other community organisations and government. Danila Dilba is an active member of many consultative and working groups to provide our input on matters affecting our communities.

The Specialist Advisory Group for the NT's new detention centre

Youth justice advocacy

Our youth justice advocacy continues to be a large focus within the policy and advocacy team, which has only strengthened through our increased presence in this area through our clinic in Don Dale and Youth Diversion Program. Key issues we have advocated for include obtaining Medicare in detention, raising awareness on the prevalence of disability among

youth detainees, advocating for the improvement of conditions in detention and promoting alternatives to detention. In particular, DDHS pushed back hard against the harsher bail laws introduced in the NT in May 2021, in concert with other community organisations.

Submissions

In the last financial year, DDHS' policy team wrote numerous submissions to federal, Territory and local government on a range of issues affecting our Aboriginal communities. Danila Dilba was invited to provide a further statement to the Senate References Committee following our submission into the Senate inquiry into FASD. Our submission was also highlighted and referenced continuously throughout the Senate's findings. DDHS was also requested to provide further evidence via written and oral statements to the Disability Royal Commission in recognition of our valuable insights in this area.



Research

In 2020-21, Danila Dilba contributed to seven ground-breaking research projects to improve Indigenous health. Participating in research keeps Danila Dilba on the cutting edge of providing excellent healthcare to our clients and strengthens our relationships with academia, health institutes and government.

Our partners in research included the University of South Australia, the NT Department of Health and Flinders University. Our main research partner is the Menzies School of Health Research.

Major projects this financial year included:

- An Aboriginal-led study looking into how to make sure Aboriginal health services reflect Aboriginal world views and cultural considerations
- Vaccination studies to prevent infections like rotavirus and gonorrhoea
- Treatments for scabies
- Diabetes management programs
- Examining the impact of primary healthcare workforce structures.

Danila Dilba's Dan Murphy's victory

Significant achievement – *no one thought we were going to win.*

We're aware that a proposal for a Dan Murphy's in Mt Isa has been withdrawn – we've had a great impact just in Darwin.

Community leaders won their battle against Woolworths' proposed Dan Murphy's superstore in April this year in one of the most extraordinary

moments of forced corporate accountability Australia that has ever seen.

It was a win for the Darwin community and proved that it can change its fate with strong leaders like Helen Fejo Frith of Bagot Community, AMSANT CEO John Paterson and Danila Dilba's Olga Havnen. The NT has the highest rate of alcohol consumption in the country, and with alcohol linked to 64% of all assaults, 71% of domestic violence, 48% of road fatalities and 36% of sexual assaults, putting the biggest liquor store in the country in Darwin wasn't going to help. The Territory

experiences 141 premature deaths a year because of drinking.

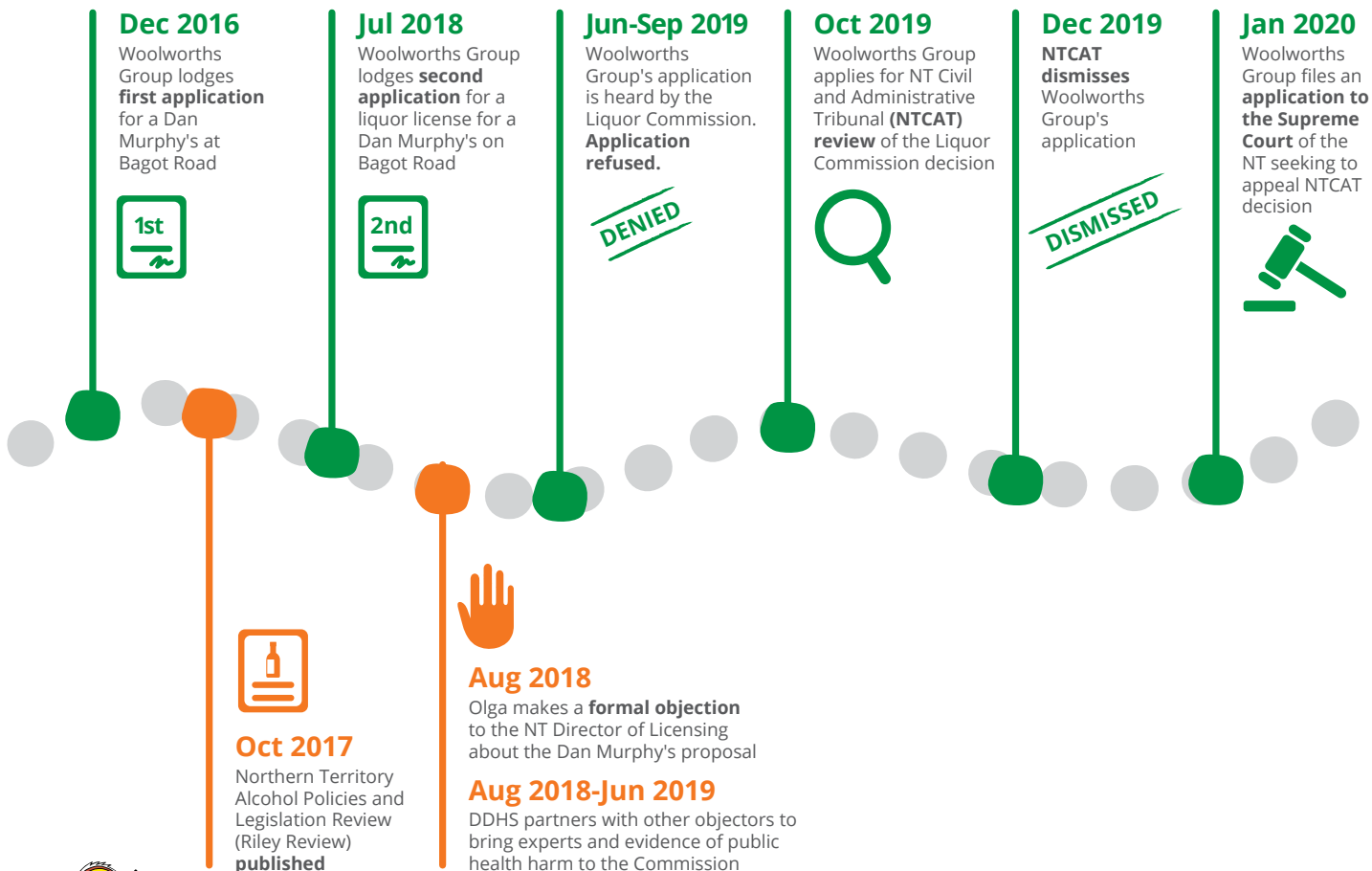
Danila Dilba is in the business of both looking after Indigenous people when they present to clinics, but also long before that if it can.

Spurred on by the need to prevent further alcohol-related harms in Darwin, DDHS did everything in its power and coordinated with other influential organisations to support other community leaders. Danila Dilba gathered evidence, engaged with experts, wrote letters to and had meetings with MLAs, campaigned with petitions and inspired public understanding

Dan Murphy's Timeline



Woolworths Group timeline



Danila Dilba timeline

of the health effects of an alcohol superstore near Darwin's local Aboriginal communities.

Woolworths commissioned an Independent Panel Review into its actions around its Dan Murphy's proposal. Olga responded to the announcement of the Review by saying

“ This decision provides Woolworths with an opportunity to become a national leader in corporate responsibility and influence the business sector in its engagement with Aboriginal and Torres Strait Islander people, communities, and organisations.

”

The Review found that they put profits above public interest, lobbied for legal changes that led to fair process being ignored, and did not meet standards of a leading corporate citizen. In many ways, the review only proved what Danila Dilba had already seen; corporate giants have exceptionally large influence on government decisions and when this is paired with limited interest in what the community thinks, feels and needs, the results are potentially devastating.

Strong community advocacy pushed Woolworths from turning a blind eye to the health

impacts of alcohol on Indigenous communities and lobbying to have its Dan Murphy's approved to handing back its liquor license and acknowledging its failure to consult. It is a result for Darwin to be enormously proud of.

Mar 2020

Liquor Amendment Act 2020 (NT) is passed



May 2020

Letter from Olga to Cairns, Woolworths Group CEO calling them to abandon NTCAT appeal and their Dan Murphy's plans



Jul 2020

Letter from Olga to Cairns reiterating Woolworths Group's failure to address public health concerns

Meeting between Olga, Chris Newton (FML investors) and NT Airports to discuss DDHS concerns



Sep 2020

Letter from Olga to NT Airports with a neutral position on there located Dan Murphy's

Nov 2020

The Liquor Further Amendment Act 2020 (NT) commences. This allows the Director of Liquor Licensing alone to determine Woolworths Group's application quickly



Nov 2020

Letter from DDHS, NTCOSS and AMSANT criticising Cairns for misrepresenting their position.

Letter from DDHS to Cairns to say no to Dan Murphy's at the new location, and criticising failure to engage properly with Indigenous organisations

Dec 2020

Director of Liquor Licensing approves Woolworths Group's application for Dan Murphy's at McMillans Road.

Dec 2020 - Apr 2021

Woolworths Group announces independent review. Review finds in favour of dissenters of the Dan Murphy's. Woolworths gives up liquor license



Dec 2020

Aboriginal leaders organise and meet with Endeavour Drinks CEO to explain alcohol related harms likely from the proposal.

Olga and other local leaders write an open letter calling on Woolworths Board to reconsider proposal.

Olga and other leaders write to NT Airports Investors and MLAs to raise the harms of the proposal



Mar 2021

Danila Dilba files case in NT Supreme Court against NT Liquor Licensing director and Woolworths Group

Corporate Services



The work of Corporate services enable Danila Dilba to be a modern, inclusive, and responsive workplace.

DDHS goes to great lengths to ensure that we protect our data, our cyber security and IT capabilities are maintained and upgraded so that the organisation can continue to operate smoothly and seamlessly.

The Corporate Services portfolio provides services across Management, Finance, People and Culture, Information and Communications Technology, and Work Health and Safety.

The whole portfolio ensures that Danila Dilba is recognised as a vibrant, sustainable and connected organisation that welcomes our clients, staff and the community.

During 2020-21, Corporate Services went through dynamic changes including a Finance Review, a People and Culture review, the continuation of the ICT Transformation project and the implementation of Technology One, Enterprise Resource Planning software.

Technology One Implementation

Over the last financial year, Danila Dilba has been preparing to bring in Technology One, a system that manages all manner of business needs. Technology One was picked from a number of submissions because it will meet Danila Dilba's needs as the organisation grows and changes.

In particular, this system will support finance and budgeting, grant management, payroll, people and culture, integrated reporting and incident reporting. Having this information on one easy to use system will help Danila Dilba and its staff deliver its strategic goals better.

Over the next financial year all of the Technology One modules will be rolled out.

Finance System Review

Bartlett Consulting reviewed the current Finance team structure, processes, capabilities and outputs and how they were contributing to Danila Dilba. They made a series of recommendations, including the implementation of Technology One and a restructuring of the Finance team.

Based on the new structure, Finance Officer position was made redundant and reclassified as Financial Controller. A new position – Management Accountant was created to support managers in the creation of budgets and forecasts, the analysis of actual performance against plans, the alignment and reporting against grants and funding lines, and the project management of finance process improvements.

Information and Communication Technology (ICT)

Danila Dilba established the 'ICT Strategy' in 2019 which focussed on achievement of two strategic objectives:

1. Setting the foundation for implementing a resilient, robust and effective technology infrastructure to support DDHS future initiatives
2. Building momentum towards a digitally integrated and agile business through introduction of new business systems that improve information flow within DDHS.

The ICT team works with internal and external stakeholders to provide and manage DDHS ICT services, to enable an instant

open, secure and accessible systems for the organisation.

To support the team with the ongoing projects, DDHS introduced a Senior Systems Administrator position and successfully recruited to this position. The following is the revised team structure.

In the ICT space this past financial year, some major achievements included

- moving completely from desktops to laptops custom built for DDHS with monitoring tools enabled for security.
- multifactor authentication has been introduced for increased security when working from remote locations.

- email security awareness training for staff
- ICT Risk Register was developed to identify and assess the hazards, threats, risks and controls associated with DDHS' ICT Infrastructure and Operations.

A Cyber Security Health Check of DDHS's environment conducted in November 2020 by Beyond Technology Consulting concluded that overall security health of the organisation was above average and demonstrated focus and awareness on the importance of technology related security practices.



Senior Leadership Team and Board members, farewell CEO Olga Haven.

Corporate Services

People and Culture (HR)

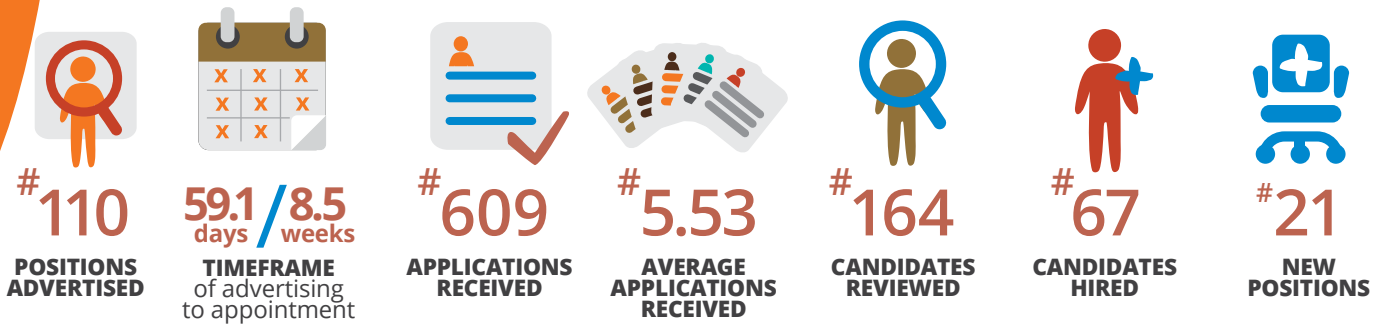
The Danila Dilba workforce strategy is founded on a recognition that central to the organisation achieving its ambitions is the capability and capacity of its workforce. Danila Dilba's future is directly linked to the contributions of its staff. The need for our people to be innovative, adaptable and agile has never been greater.

People and Culture Business Partner model

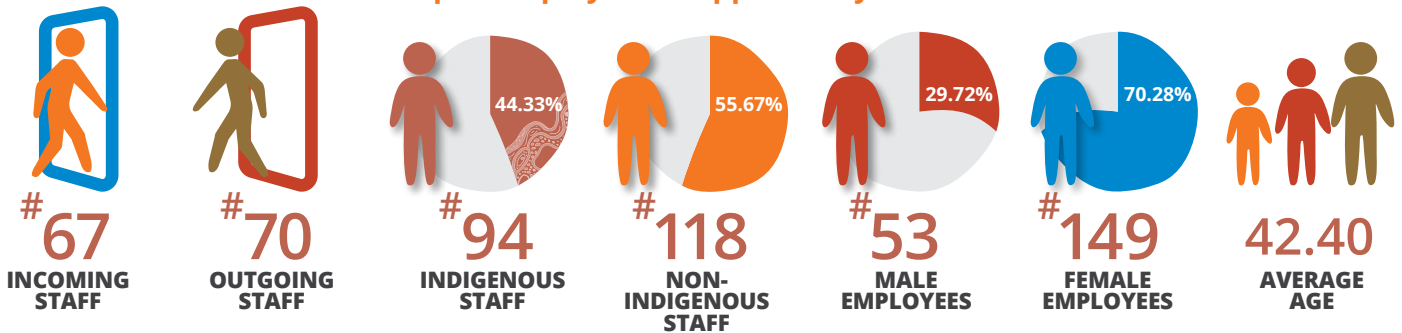
Based on the recommendations from a review by external consultant CJ Consulting, DDHS has established the People and Culture team and implemented a Business partner model with HR Coordinators assigned to specific clinics and business units to support staff members and managers by building relationships and personalised

services. The Business Partner approach is to support active integration of DDHS strategic and business needs with people management and development practices. The Learning and Development Officer position has also been incorporated into the People and Culture team.

Recruitment



Equal Employment Opportunity





Learning and Development

Learning and Development was re-oriented at the start of 2020 to assist in the organisational change management required to meet the challenges of COVID-19.

As a result of this, Danila Dilba used a multi model approach including face to face training, online learning platforms, video conferencing, practical skills training, and scenario-based training to meeting the learning requirements for operating in the COVID-19 world.

This included Hand Hygiene/ Infection Control, Personal Protective Equipment, Telehealth operations, Swabbing for COVID 19 and COVID clinical Scenario training whilst maintaining effective operations.

Danila Dilba Health Service Learning and Development strategy has continued to priorities the learning and development opportunities presented within the workplace with the 70:20:10 approach.

Vocational training and professional development

Danila Dilba supports staff to further their career aspirations through qualifications and the following staff members were support to study while being

1 Certificate IV in Alcohol and Other Drugs (AOD)

Darrin Weetra

Joseph Fitz

Karina Kassman

2 Certificate IV in Aboriginal and Torres Strait Islander Primary Health Care Practice

Jessica Smith

Emily Large

John Kastellorizios

3 Certificate III in Information, Digital Media and Technology

Kobe Sheppard-Greenoff

GP Registrars and Medical student placements

Danila Dilba continue to provide support for conducting weekly learning sessions to current GP Registrars where topics are

explored through case studies provided by GP Supervisors.

DDHS is always striving for achieving continuous improvement and integration of services and employing GP Registrars plays a vital role in our ongoing and future medical workforce implementation.

In 2020-21, 13 GP Registrars were placed at Danila Dilba for training terms ranging from 6-12 months, as part of our organisational capacity to deliver sustainable and effective services to the community.

3 GP Registrars have decided to stay back with DDHS after completing their fellowship.

In partnership with Flinders' University, DDHS facilitated the training of 12 medical students (3rd Year) in various clinics, depicting DDHS commitment in supporting students and assisting in training future doctors.

Corporate Services



Business development

Sustainable funding

In 2020-21 the Business Development Team worked towards setting the foundations for more sustainable funding for the organisation in years to come. A market assessment of available funding opportunities for Danila Dilba was conducted and linked to appropriate business areas at Danila Dilba. This piece of work will enable Danila Dilba to proactively target funding opportunities in the future.

Increasing DDHS' discretionary income

The Business Development team has been looking into ways to increase DDHS' discretionary income. Danila Dilba has been successful in gaining a minor grant to become "NDIS ready". This will help the organisation move towards becoming an NDIS service provider which allows the organisation to gain funding for services we currently do not get funded for such as transport.

New grants

In the 2020-21 financial year, Danila Dilba submitted 28 grant applications for new opportunities. Of the total number of applications submitted 29 per cent were successful. The total value of successful grants generated by the Business Development Unit totalled \$588,882 (excluding GST), and resulted in the creation of eight full-time equivalent positions, including X opportunities for Indigenous staff.

Communications

With a newly established Communications Teams from the previous year, Danila Dilba was well positioned to provide high quality communications tailored to our clients and community. This because especially crucial in an environment where COVID-19 information was rapidly changing and complex.

The Communications Team was able to achieve an increase Danila Dilba's social media presence and media coverage and produce easy-to-understand materials about COVID-19 for our clients,

including a suite of videos and printed materials, such as regular newsletters.

The Communications Team was also able to maximise communication lines internally through intranet, regular internal updates and influence in the content of All Staff meetings.

Service Excellence

Danila Dilba aspires to be the best Aboriginal Health Service in Australia. To do so, it must be a strong organisation. Meika Wright was employed as our Service Excellence Coach in 2020, and to date has concentrated on improving Danila Dilba's organisational culture and performance. This year has focused on development DDHS Best Practice Framework, designed to support positive accountability and this is complimented by creating and implementing a two-year monthly Leadership Program for all leaders.

The leadership Program has focused of building engagement



and leadership skills with all managers at DDHS.

Leadership sessions

Fourteen leadership activities have been conducted in 2021 thus far including:

- Co-creating a DDHS Values and Expectations Charter, awaiting the endorsement of the board
- Communications skills workshops to encourage open feedback
- Pledging a commitment to positive workplace culture
- Deep diving into job role expectations and skills
- Understanding performance measures and accountability
- Action planning for the future

- Encouraging staff to develop and implement their own ideas
- Connecting individual performance to team goals and encouraging reflection
- Managing performance development rather than discipline

All managers have access to leadership coaching with the Service Excellence Coach, to focus on continuous improvement of self and team. The outcome of Service Excellence should be seen through improvement in performance of a variety of business Key Performance Indicators.





**Danila Dilba Biluru Butji Binnilutium
Health Service Aboriginal Corporation**

ABN 57 024 747 460 | ICN 1276

ANNUAL REPORT

Year Ended 30 June 2021



Directors' Report

Year ended 30 June 2021

DIRECTORS AND DIRECTORS' MEETINGS

The following persons were members of the Board of Danila Dilba Biluru Bitji Binnilutlum Health Service Aboriginal Corporation ("Danila Dilba") for the year ended 30 June 2021:

CURRENT DIRECTORS	POSITION	MEETINGS	TERM EXPIRES
Ms Carol Stanislaus	Chair	11	2 May 2022
Mr Wayne Kurnoth	Larrakia Director	3	Nov 2023 ¹
Ms Camille Lew Fatt	Director/Deputy Chair from 3/9/21	10	Nov 2022
Ms Samantha Ludwig (formerly Crossman)	Director	5	Nov 2023 ¹
Mr Michael McGregor	Director	7	Nov 2022 ¹
Mr Rus Nasir	Director	8	Nov 2022 ¹
Mr Shaun Tatipata	Director	2	Nov 2023 ¹
Dr Bronwyn Rossingh	Independent Director/Non Member	6	1 Mar 2022
Ms Deborah Butler	Independent Director/Non Member	7	5 Sep 2022

NON-CURRENT DIRECTORS	POSITION	MEETINGS ATTENDED	DATE CEASED
Ms Shannon Daly (nee Grant)	Deputy Chair	8	Resigned 18 Jun 2021
Ms Sue Roman	Larrakia Director	4	26 Nov 2020

Eleven Directors Meetings were held during the financial year, with the Annual General Meeting being held on 26 November 2020.

¹All Term Expires dates of Nov 2022 or Nov 2023 refer to the AGMs in 2022 and 2023 respectively, the exact date of which is currently unknown.

Audit and Risk Management Committee

The Audit and Risk Management Committee (ARMC) provides advice and assurance to the Board on the effectiveness of the safety and quality systems (in relation to both clinical and cultural safety) and the integrity of financial reporting by DDHS. Four ARMC meetings were held during the financial year. The following were members of the ARMC during 2020-21:

ARMC MEMBERS	POSITION	MEETINGS ATTENDED	TERM EXPIRES
Mr Shane Smith	Independent Chair (non member or Director)	4	13 Jul 2022
Ms Carol Sanislaus	Member Director	4	2 May 2022
Ms Shannon Daly	Member Director (21/8/20-14/5/21)	1	14 May 2021
Mr Wayne Kurnoth	Member Director (from 14/5/21)	0	Nov 2023 ¹
Dr Bronwyn Rossingh	Director	2	1 Mar 2022
Adjunct Associate Professor Bernie Harrison	Independent Member (non member or Director)	4	13 Jul 2022

Secretary

Ms Jill McGarry (BA (Hons), MA, Grad Cert. Project Mgmt, JD) is the Corporation Secretary.

Directors' Report

Year ended 30 June 2021

PRINCIPAL ACTIVITIES

During the financial year the principal activities of Danila Dilba Biluru Bitji Binnilutlum Health Service Aboriginal Corporation consisted of:

- Primary Health Care
- Community Programs
- Care Coordination
- Pharmacy
- Health Systems
- Youth Justice Advocacy and Programs

Danila Dilba also provides for visiting specialist services as outlined within the Annual Report. Peripheral integrated services to the core business included corporate, finance, human services, marketing, client transport and information technology. The Board undertook training provided by the Australian Institute of Company Directors and VUCA Trusted Advisors and completed a Chief Executive Officer review process.

REVIEW OF OPERATIONS

The Corporation continues to grow with service provisions and positive movements in Medicare and Grant Funds, Benefits from the organisational procurement review allowed for decreased operational expenditure, although the Corporation recorded a deficit for the year of \$487,933 (2020: \$250,774 deficit, in addition there was a \$750,000 loss on revaluation of land). The adoption of new accounting standard AASB 16 has not heavily impacted the Corporation through the income statement. All grant funding received in the financial year has been recognised under the new standards.

SIGNIFICANT CHANGES IN THE STATE OF AFFAIRS

There were no significant changes to the Corporation's state of affairs during the year.

DISTRIBUTIONS PAID TO MEMBERS DURING THE YEAR

There were no distributions made to members during the year nor were there unpaid or declared distributions to members outstanding at year end.

ENVIRONMENTAL REGULATIONS

The Corporation's operations are not regulated by any significant environmental regulation under a law of the Commonwealth or of a State or Territory.

PROCEEDINGS ON BEHALF OF THE CORPORATION

There were no applications for leave to bring proceedings made during the year under section 169-5 of the Corporations (Aboriginal and Torres Strait Islander) Act 2006 (CATSI Act).

AUDITORS INDEPENDENCE DECLARATION

The Auditors Independence Declaration for the year ended 30 June 2021 has been received and can be found on page 6 of the report.

SIGNIFICANT EVENTS AFTER THE BALANCE SHEET DATE

No matters or circumstances have arisen since the end of the financial year which significantly affect or may significantly affect the operations of the Corporation, the results of those operations, or the status of the affairs of the Corporation in future financial years.

LIKELY DEVELOPMENTS

The Corporation expects to maintain the present status and level of operations and hence there are no likely developments in the Corporation's operations.

QUALIFICATIONS, EXPERIENCE AND SPECIAL RESPONSIBILITIES OF DIRECTORS

Current board members

Carol Stanislaus (Chair) is a Tiwi woman, born and raised on Larrakia country and a descendant of the NT Stolen Generation. She has worked in a variety of Indigenous positions in tourism, government and justice, and currently works with the Australian Government's National Indigenous Australians Agency. She holds a Bachelor of Applied Science in Aboriginal Community Management and Development. Carol is a member of the Danila Dilba Audit and Risk Management Committee, and the North Australian Aboriginal Justice Agency (NAAJA).

Camille Lew Fatt (Deputy Chair appointed 3 September 2021) is a local Aboriginal woman, born and raised in Darwin. She holds a Graduate Certificate in Business (Public Sector Management), Bachelor of Commerce and Diploma of Business. Camille is currently the Director, Aboriginal Employment and Career Development with the NT Government.

Wayne Kurnoth (Larrakia Director) a Larrakia man from the Fejo family group, is also a member of the DDHS Audit and Risk Management Committee. He is currently employed as the First Nations Union Organiser for United Workers Union (UWU) supporting UWU members with workplace issues such as bullying and harassment, stolen wages and enterprise agreements, and having a voice across the NT. Wayne represents UWU on the National ACTU Indigenous Council. Previously, he worked as a boilermaker and welder for 17 years in the shipbuilding, construction and oil and gas industries.

Samantha Ludwig (formerly Crossman) a Kungarakan-Gurindji woman from the Northern Territory is a highly accomplished policy and project manager with more than 20 years of domestic and international experience. She has Masters' degrees in International Health Management and in Management of Human Resources. She is currently Director, Executive Services at the Batchelor Institute.

Michael McGregor has over 20 years' experience working with Aboriginal communities in the Northern Territory across a wide range of sectors including health, employment and training, and business development. Michael brings a varied array of skills to the Danila Dilba board after working for the Australian Government implementing capacity strengthening initiatives with non-government and government funded organisations across the Territory.

Rus Nasir is a Djungan man whose family is from the Broome, Western Australia. He was born and raised in Darwin. He holds a Bachelor of Behavioural Science, Psychology and Law. Rus has held senior roles in the government, higher education, Aboriginal community-controlled organisations and the private sector. He has a keen interest in Indigenous business development and is currently employed in the NT Department of Health Aboriginal Policy Unit, focusing on improving the health and wellbeing of Aboriginal Territorians.

Shaun Tatipata is the founding Director of Australia's first Aboriginal-owned optical and eye care provider, the Deadly Vision Centre an Aboriginal Enterprise that promotes health and wellbeing, while also celebrating Aboriginal and Torres Strait Islander culture and community. Shaun trained as an Aboriginal Health Worker in 2001. Since graduating, he's delivered primary healthcare services and implemented outreach programs in Aboriginal Community Controlled Health Organisations, as well as with the Northern

Directors' Report

Year ended 30 June 2021

Territory Government. Until recently, Shaun led The Fred Hollows Foundation's Indigenous Australia Program. Shaun, who is of Wuthathi and Ngarrindjeri descent, is passionate about strengthening service coordination through improved leadership and governance and helping to close the gap in eye health outcomes for Aboriginal and Torres Strait Islander Australians.

Deborah Butler is a Jawoyn woman, born and raised in Katherine. She has a Bachelor of Business and a Master of Public Health. Deb is currently Director for System Performance at the Northern Territory Department of Health. She has over 18 years' experience working with government projects and policy in various roles in both South Australia and the NT, primarily dealing with Aboriginal housing and health policy.

Dr Bronwyn Rossingh has been working and living in the NT for over 20 years. Bronwyn is a Fellow of Certified Practising Accountants Australia, a Graduate of the Australian Institute of Company Directors and has a PhD on Culture Legitimate Accountability. She has worked in Indigenous communities in community engagement, governance, financial management, community development, youth leadership, and education and training pathway development. Previously she worked for chartered accounting firms in Perth and London for over ten years. Bronwyn is an Independent Director and a member of the DDHS Audit and Risk Management Committee.

Former board members

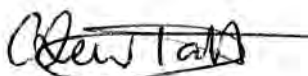
Shannon Daly (nee Grant) (former Deputy Chair) was employed by the Top End Health Service as the Consumer and Cultural Consultant at Royal Darwin Hospital. Shannon has 13 years active experience as an Aboriginal Health Practitioner (AHP, previously AHW) and has been an AHP educator and AHP lecturer. Shannon completed her AHP training through Danila Dilba in 2001. Shannon is passionate about the AHP role which is vital to providing culturally safe and competent care to Aboriginal people. Shannon left NT Health in April 2021 to pursue a career in mining and resigned from the Board on 18 June 2021.

Sue Roman (Larrakia Director) is a senior Larrakia Elder who has retired from full-time employment. Sue's term on the board ended in November 2020.

This report is made in accordance with a resolution of directors on 29 October 2021.



Ms Carol Stanislaus
Chairperson
Dated 29 October 2021



Ms Camille Lew Fatt
Deputy Chairperson
Dated 29 October 2021

Contents and General Information

Year ended 30 June 2021

CONTENTS	Page
Auditor's Independence Declaration	6
Statement of Profit or Loss and Other Comprehensive Income	7
Statement of Financial Position	8
Statement of Changes in Equity	9
Statement of Cash Flows	10
Notes to the Financial Statements	11
Directors' Declaration	35
Independent Auditor's Report	36

GENERAL INFORMATION

The Danila Dilba Butji Binnilutlum Health Service Aboriginal Corporation was established as an incorporated association in June 1991 under the *Commonwealth of Australia Aboriginal Councils and Associations Act 1976* (Now the *Corporations Aboriginal and Torres Strait Islander Act 2006*) and is registered under the *Australian Charities and Not-for-profits Commission Act 2012*. Danila Dilba Butji Binnilutlum Health Service Aboriginal Corporation operates as a provider of primary health care to Aboriginal people of the greater Darwin area of the Northern Territory of Australia.

The principal place of business is:

28-30 Knuckey Street, Darwin, Northern Territory, 0800, Australia Telephone Number +61 8 8942 5400

OPERATIONS AND PRINCIPAL ACTIVITIES

As an Aboriginal community controlled health organisation, Danila Dilba Butji Binnilutlum Health Service Aboriginal Corporation aims to provide a holistic comprehensive primary health care service that focuses on empowering and building the community's capacity to determine its own health needs. This means 'Aboriginal health staying in Aboriginal hands'.

Main services, programs and projects conducted through the year:

- Clinical Services
- Men's Health and Wellbeing
- Women and Children's Health and Wellbeing
- Community Outreach
- Eye and Ear Health
- Sexual Health
- Youth Services
- Counselling and Support Services

**AUDITOR'S INDEPENDENCE DECLARATION UNDER
SECTION 339-50 OF THE CORPORATIONS (ABORIGINAL AND TORRES STRAIT ISLANDER) ACT 2006 AND
SECTION 60-40 OF THE AUSTRALIAN CHARTITIES AND NOT-FOR-PROFITS COMMISSION ACT 2012**

**TO THE DIRECTORS OF DANILA DILBA BILURU BUTJI BINNILUTLUM HEALTH SERVICE ABORIGINAL
CORPORATION**

I declare that, to the best of my knowledge and belief, during the year ended 30 June 2021 there have been:

- (i) No contraventions of the auditor independence requirements as set out in *the Corporations (Aboriginal and Torres Strait Islander) Act 2006* and section 60-40 *Australian Charities Not-for-profits Commission Act 2012*, in relation to the audit; and
- (ii) No contraventions of any applicable code of professional conduct in relation to the audit.



Nexia Edwards Marshall NT
Chartered Accountants



Noel Clifford
Partner

Dated: 2 November 2021

Statement of Profit or Loss and Other Comprehensive Income

For the year ended 30 June 2021

REVENUE	NOTES	2021 \$	2020 \$
Grant income	2a	24,581,242	21,277,913
Medicare receipts	2b	5,275,126	5,391,568
Sundry income	2c	585,484	555,792
Total revenue		30,441,852	27,225,273
EXPENDITURE			
Administration	3a	2,087,666	1,167,450
Employee benefits expense	3b	23,214,682	21,158,956
Depreciation and amortisation	3c	1,861,484	1,641,853
Loss on disposal of property, plant and equipment	3d	158,150	-
Bad debts		20,511	-
Finance costs	3e	370,429	345,118
Motor vehicle expenses	3f	138,303	138,603
Operational expenses	3g	2,964,241	2,875,607
Other	3h	114,319	148,460
Total expenditure		30,929,785	27,476,047
DEFICIT FOR THE YEAR		(487,933)	(250,774)
OTHER COMPREHENSIVE LOSS			
Items that will not be reclassified subsequently to profit or loss:			
Loss on revaluation of land		-	750,000
TOTAL COMPREHENSIVE LOSS FOR THE YEAR		(487,933)	(1,000,774)

The above statement of profit or loss and other comprehensive income should be read in conjunction with the accompanying notes

Statement of Financial Position

As at 30 June 2021

	NOTES	2021 \$	2020 \$
CURRENT ASSETS			
Cash and cash equivalents	4	419,676	1,094,488
Trade and other receivables	5	346,840	238,101
Other current assets	6	479,080	194,812
Total current assets		1,245,596	1,527,401
NON-CURRENT ASSETS			
Property, plant and equipment	7	9,263,234	10,074,163
ROU Leased Assets	8	5,963,327	6,681,369
Total non-current assets		15,226,561	16,755,532
Total Assets		16,472,157	18,282,933
CURRENT LIABILITIES			
Trade and other payables	9	1,557,859	2,430,271
Lease liabilities	10	698,285	725,434
Employee provisions	11	1,633,636	1,771,336
Borrowings	12	52,951	49,381
Total current liabilities		3,942,731	4,976,422
NON-CURRENT LIABILITIES			
Lease liabilities	10	5,516,018	6,079,355
Employee provisions	11	572,716	245,580
Borrowings	12	32,639	85,590
Total non-current liabilities		6,121,373	6,410,525
Total Liabilities		10,064,104	11,386,947
NET ASSETS		6,408,053	6,895,986
ACCUMULATED FUNDS			
Retained earnings		2,418,801	2,906,734
Reserves		3,989,252	3,989,252
Total Accumulated Funds		6,408,053	6,895,986

The above statement of financial position should be read in conjunction with the accompanying notes

Statement of Changes in Equity

As at 30 June 2021

	RETAINED EARNINGS \$	LAND REVALUATION RESERVE \$	ASSET REPLACEMENT RESERVE \$	TOTAL \$
Balance at 1 July 2019	3,157,508	4,550,000	189,252	7,896,760
Deficit for the year	(250,774)	-	-	(250,774)
Other comprehensive loss	-	(750,000)	-	(750,000)
Balance at 30 June 2020	2,906,734	3,800,000	189,252	6,895,986
Balance at 1 July 2020	2,906,734	3,800,000	189,252	6,895,986
Deficit for the year	(487,933)	-	-	(487,933)
Balance at 30 June 2021	2,418,801	3,800,000	189,252	6,408,053

The above statement of changes in equity should be read in conjunction with the accompanying notes

Statement of Cash Flows

As at 30 June 2021

CASH FLOWS FROM OPERATING ACTIVITIES	NOTES	2021 \$	2020 \$
Grant income		24,328,265	21,670,234
Receipts from customers		5,729,987	6,121,636
Interest received		1,373	2,434
Payments to suppliers and employees		(29,233,478)	(24,898,014)
Finance costs		(370,429)	(345,118)
Net cash provided by operating activities	13	455,718	2,551,172
CASH FLOWS USED IN INVESTING ACTIVITIES			
Purchases of property, plant and equipment		(292,463)	(1,013,924)
Net cash used in investing activities		(292,463)	(1,013,924)
CASH FLOWS USED IN FINANCING ACTIVITIES			
Repayment of borrowings		(49,381)	(46,053)
Lease liability payments		(788,686)	(724,825)
Net cash used in financing activities		(838,067)	(770,878)
NET (DECREASE)/INCREASE IN CASH AND CASH EQUIVALENTS		(674,812)	766,370
Cash and cash equivalents at the beginning of the reporting period		1,094,488	328,118
Cash and cash equivalents at the end of the reporting period	4	419,676	1,094,488

The above statement of cash flows should be read in conjunction with the accompanying notes

Notes to the Financial Statements

As at 30 June 2021

Note 1: Statement of Significant Accounting Policies

The principal accounting policies adopted by Danila Dilba Butji Binnilutlum Health Service Aboriginal Corporation (the Corporation) in the preparation of the financial report are set out below:

a. Basis of preparation

The financial statements are general purpose financial statements that have been prepared in accordance with Australian Accounting Standards (including Australian Accounting Interpretations), the Corporations (Aboriginal and Torres Strait Islander) Regulations 2017, and the *Australian Charities and Not-for-profits Commission Regulations 2013*. The Corporation is a not-for-profit entity for reporting purposes under Australian Accounting Standards.

Currency

The financial report is presented in Australian dollars and rounded to the nearest dollar.

Historical cost convention

These financial statements, except for the cash flow information, have been prepared on an accrual basis and are based on historical costs, modified where applicable, by the measurement at fair value of selected non-current assets, financial assets and financial liabilities.

Critical accounting estimates

The preparation of financial statements in conformity with Australian Accounting Standards requires the use of certain accounting estimates. It also requires management to exercise its judgement in the process of applying the Corporation's accounting policies.

b. Revenue recognition policy

Revenue recognition

The Corporation generates its revenue from grants and rendering of client services over time and at a point in time.

Revenue is measured based on the consideration to which the Corporation expects to be entitled in a contract with a customer and excludes amounts collected on behalf of third parties. The goods and services are sold both on their own in separately identified contracts with customers and together as a bundled package of goods and/or services.

Revenue from contracts with customers is recognised when control of the goods or services are transferred to the customer at an amount that reflects the consideration to which the Corporation expects to be entitled in exchange for those goods or services.

Contributed Assets

The Corporation receives assets from the government and other parties for nil or nominal consideration in order to further its objectives. These assets are recognised in accordance with the recognition requirements of other applicable accounting standards (for example AASB 9, AASB 116 and AASB 138).

On initial recognition of an asset, the Corporation recognises related amounts being contributions by owners, lease liability, financial instruments, provisions, revenue or contract liability arising from a contract with a customer.

Notes to the Financial Statements

As at 30 June 2021

Note 1: Statement of Significant Accounting Policies (continued)

b. Revenue recognition policy (continued)

The Corporation recognises income immediately in profit or loss as the difference between initial carrying amount of the asset and the related amounts.

Operating Grants, Donations and Bequests

When the entity receives operating grant revenue, donations or bequests, it assesses whether the contract is enforceable and has sufficiently specific performance obligations in accordance with AASB 15.

When both these conditions are satisfied, the Corporation:

- identifies each performance obligation relating to the grant;
- recognises a contract liability for its obligations under the agreement; and
- recognises revenue as it satisfies its performance obligations.

When the contract is not enforceable, or does not have sufficiently specific performance obligations, the Corporation:

- recognises the asset received in accordance with the recognition requirements of other applicable accounting standards (for example AASB 9, AASB 16 and AASB 138);
- recognises related amounts (being contributions by owners, lease liability, financial instruments, provisions, revenue or contract liability arising from a contract with a customer); and
- recognises income immediately in profit or loss as the difference between the initial carrying amount of the asset and the related amount.

If a contract liability is recognised as a related amount above, the Corporation recognises income in profit or loss when or as it satisfies its obligations under the contract.

Capital Grant

When the Corporation receives a capital grant, it recognises a liability for the excess of the initial carrying amount of the financial asset received over any related amounts (being contributions by owners, lease liability, financial instruments, provisions, revenue or contract liability arising from a contract with a customer) recognised under the Australian Accounting Standards.

The Corporation recognises income in profit or loss when or as the Corporation satisfies its obligations under terms of the grant.

Interest Income

Interest income from a financial asset is recognised when it is probable that the economic benefits will flow to the Corporation and the amount of income can be measured reliably. Interest income is accrued on a time basis, by reference to the principal outstanding and the effective interest rate applicable, which is the rate that exactly discounts estimated future cash receipts through the expected life of the financial asset to that asset's net carrying amount on initial recognition.

Rental Income

Revenue from investment properties is generally recognised in the accounting period in which the services are rendered, using straight-line basis, over the term of the lease contract. Such leases are classified as other than finance lease.

c. Employee Benefits

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

Notes to the Financial Statements

As at 30 June 2021

Note 1: Statement of Significant Accounting Policies (continued)

c. Employee Benefits (continued)

employee benefits payable later than one year have been measured at the present value of the estimated cash outflows to be made for those benefits. In determining the liability, consideration is given to employee wage increases and the probability that the employee may not satisfy vesting requirements. Those cash outflows are discounted using market yields on corporate bond rates with terms to maturity that match the expected timing of cash flows attributable to employee benefits.

d. Material Estimates or Judgements

In the preparation of the financial statements, management has made judgements, estimates and assumptions that affect the amounts reported for assets and liabilities as at the balance sheet date and the amounts reported for revenues and expenses during the year. Actual results may differ from these estimates. Estimates and underlying assumptions are reviewed on an ongoing basis. Management have adopted a revaluation methodology which is reviewed on an ongoing basis. Land assets were revalued by an independent valuer as at 30 June 2020, resulting in a write down of those assets by \$750,000 (refer Note 7).

e. Superannuation

Employees' superannuation entitlements are principally provided through the Australian Retirement Fund. The Corporation pays 9.5% (2020: 9.5%) of an employee's salary as per the compulsory superannuation guarantee levy.

	2021	2020
Full time equivalent employees as at 30 June	228.1	178.4

f. Income Tax

The income of the Corporation is exempt from income tax pursuant to the provisions of section 50-5 of the *Income Tax Assessment Act, 1997*.

g. Goods and Services Tax

Revenue expenses and assets are recognised net of the amount of goods and services tax (GST), except:

- where the amount of GST incurred is not recoverable from the taxation authority, it is recognised as part of the cost of acquisition of an asset or as part of an item of expense; or
- for receivables and payables which are recognised inclusive of GST, the net amount of GST recoverable from, or payable to, the taxation authority is included as part of receivables or payables.

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

h. Trade and Other Receivables

Trade and other receivables include amounts due from members as well as amounts receivable from customers for goods sold in the ordinary course of business. Receivables expected to be collected within 12 months of the end of the reporting period are classified as current assets. All other receivables are classified as non-current assets.

Accounts receivable are initially recognised at fair value and subsequently measured at amortised cost using the effective interest method, less any provision for impairment.

Notes to the Financial Statements

As at 30 June 2021

Note 1: Statement of Significant Accounting Policies (continued)

i. Property, Plant and Equipment and Right-of-Use Assets

Land assets are valued at fair value and are measured on the basis of market value, being the revalued amount at the date of the revaluation. The land was last independently valued on 21 August 2020 by Colliers International Pty Ltd. Independent revaluations are conducted every three to five years in order to keep values current. Each year a desk top audit will also be done to ensure that any unexpected increases or decreases in value are not overlooked.

Plant and equipment is stated at cost less accumulated depreciation and any accumulated impairment losses. Depreciation is provided on property, plant and equipment. Land is not a depreciating asset. Depreciation is calculated on a straight-line basis so as to write off the net cost or other revalued amount of each asset over its expected useful life. The following estimated useful lives are used in the calculation of the depreciation:

	2021 (YEARS)	2020 (YEARS)
Buildings	20	20
Plant and equipment	3-5	3-5
Motor vehicles	5	5
Clinical software	3	3
Right -of-use leased buildings	1-10	1-10
Right -of-use leased motor vehicles	1-4	1-4

Policy treatment of revaluation

An item of property, plant and equipment is derecognised upon disposal or when there is no future economic benefit to the Corporation. Gains and losses between carrying amount and the disposal proceeds are taken to profit or loss.

j. Impairment of Non Financial Assets

At the end of each reporting period, the entity reviews the carrying amounts of its tangible and intangible assets to determine whether there is any indication that those assets have been impaired. If such an indication exists, the recoverable amount of the asset, being the higher of the asset's fair value less costs of disposal and value in use, is compared to the asset's carrying amount. Any excess of the asset's carrying amount over its recoverable amount is recognised in profit or loss.

Where the assets are not held primarily for their ability to generate net cash inflows - that is, they are specialised assets held for continuing use of their service capacity - the recoverable amounts are expected to be materially the same as fair value.

Where it is not possible to estimate the recoverable amount of an individual asset, the Corporation estimates the recoverable amount of the cash-generating unit to which the asset belongs.

Where an impairment loss on a revalued individual asset is identified, this is recognised against the revaluation surplus in respect of the same class of asset to the extent that the impairment loss does not exceed the amount in the revaluation surplus for that class of asset.

k. Financial Instruments

Initial recognition and measurement

Financial assets and financial liabilities are recognised when the Corporation becomes a party to the contractual provisions to the instrument. For financial assets, this is the date that the Corporation commits itself to either the purchase or sale of the asset (i.e trade date accounting is adopted).

Notes to the Financial Statements

As at 30 June 2021

Note 1: Statement of Significant Accounting Policies (continued)

k. Financial Instruments (continued)

Financial instruments (except for trade receivables) are initially measured at fair value plus transaction costs, except where the instrument is classified "at fair value through profit or loss", in which case transaction costs are expensed to profit or loss immediately.

Where available, quoted prices in an active market are used to determine fair value. In other circumstances, valuation techniques are adopted.

Trade receivables are initially measured at the transaction price if the trade receivables do not contain significant financing component or if the practical expedient was applied as specified in AASB 15.63.

Classification and subsequent measurement

Financial Liabilities

Financial liabilities are subsequently measured at:

- amortised cost; or
- fair value through profit or loss.

A financial liabilities is measured at fair value through profit or loss if the financial liability is:

- a contingent consideration of an acquirer in a business combination to which AASB 3 applies;
- held for trading; or
- initially designated as fair value through profit or loss.

All other financial liabilities are subsequently measured at amortised cost using the effective interest method.

The effective interest method is a method of calculating the amortised cost of a debt instrument and of allocating interest expense in profit or loss over the relevant period.

The effective interest rate is the internal rate of return of the financial asset or liability. That is, it is the rate that exactly discounts the estimated future cash flows through the expected life of the instrument to the net carrying amount at initial recognition.

A financial liability is held for trading if it is:

- incurred for the purpose of repurchasing or repaying in the near term;
- part of a portfolio where there is an actual pattern of short-term profit taking;
- a derivative financial instrument (except for a derivative that is in a financial guarantee contract or a derivative that is in an effective hedging relationship); or
- any gains or losses arising on changes in fair value that are recognised in profit or loss to the extent that they are not part of a designated hedging relationship.

The change in fair value of the financial liability attributable to changes in the issuer's credit risk is taken to other comprehensive income and is not subsequently reclassified to profit or loss. Instead, it is transferred to retained earnings upon derecognition of the financial liability.

If taking the change in credit risk in other comprehensive income enlarges or creates an accounting mismatch, then these gains or losses are taken to profit or loss rather than other comprehensive income.

A financial liability cannot be reclassified.

Financial Asset

Financial assets are subsequently measured at:

- amortised cost;
- fair value through other comprehensive income; or
- fair value through profit or loss

Notes to the Financial Statements

As at 30 June 2021

Note 1: Statement of Significant Accounting Policies (continued)

k. Financial Instruments (continued)

On the basis of the two primary criteria, being:

- the contractual cash flow characteristics of the financial asset; and
- the business model for managing the financial asset.

A financial asset is subsequently measured at amortised cost when it meets the following conditions:

- the financial asset is managed solely to collect contractual cash flows; and
- the contractual terms within the financial asset give rise to cash flows that are solely payments of principal and interest on the principal amount outstanding on specified dates.

A financial asset is subsequently measured at fair value through other comprehensive income when it meets the following conditions:

- the contractual terms within the financial asset give rise to cash flows that are solely payments of principal and interest on the principal amount outstanding on specified dates; and
- the business model for managing the financial asset comprises both contractual cash flows collection and the selling of the financial asset.

By default, all other financial assets that do not meet the conditions of amortised cost and the fair value through other comprehensive income's measurement condition are subsequently measured at fair value through profit or loss.

The Corporation initially designates financial instruments as measured at fair value through profit or loss if:

- it eliminates or significantly reduces a measurement or recognition inconsistency (often referred to as "accounting mismatch") that would otherwise arise from measuring assets or liabilities or recognising the gains and losses on them on different bases;
- it is in accordance with the documented risk management or investment strategy and information about the groupings was documented appropriately, so the performance of the financial liability that was part of a group of financial liabilities or financial assets can be managed and evaluated consistently on a fair value basis; and
- it is a hybrid contract that contains an embedded derivative that significantly modifies the cash flows otherwise required by the contract.

The initial designation of the financial instruments to measure at fair value through profit and loss is a one-time option on initial classification and is irrevocable until the financial asset is derecognised.

Derecognition

Derecognition refers to the removal of a previously recognised financial asset or financial liability from the statement of financial position.

Derecognition of financial liabilities

A liability is derecognised when it is extinguished (i.e. when the obligation in the contract is discharged, cancelled or expires). An exchange of an existing financial liability for a new one with substantially modified terms, or a substantial modification to the terms of a financial liability, is treated as an extinguishment of the existing liability and recognition of a new financial liability.

The difference between the carrying amount of the financial liability derecognised and the consideration paid and payable, including any non-cash assets transferred or liabilities assumed, is recognised in profit or loss.

Notes to the Financial Statements

As at 30 June 2021

Note 1: Statement of Significant Accounting Policies (continued)

k. Financial Instruments (continued)

Derecognition of financial assets

A financial asset is derecognised when the holder's contractual rights to its cash flows expires, or the asset is transferred in such a way that all the risks and rewards of ownership are substantially transferred.

All of the following criteria need to be satisfied for derecognition of a financial asset:

- the right to receive cash flows from the asset has expired or been transferred;
- all risk and rewards of ownership of the asset have been substantially transferred; and
- the Corporation no longer controls the asset (i.e. it has no practical ability to make unilateral decisions to sell the asset to a third party).

On derecognition of a financial asset measured at amortised cost, the difference between the asset's carrying amount and the sum of the consideration received and receivable is recognised in profit or loss.

On derecognition of a debt instrument classified as fair value through other comprehensive income, the cumulative gain or loss previously accumulated in the investment revaluation reserve is reclassified to profit or loss.

On derecognition of an investment in equity which was elected to be classified under fair value through other comprehensive income, the cumulative gain or loss previously accumulated in the investments revaluation reserve is not reclassified to profit or loss, but is transferred to retained earnings.

Impairment

The Corporation recognises a loss allowance for expected credit losses on:

- financial assets that are measured at amortised cost or fair value through other comprehensive income;
- lease receivables;
- contract assets (e.g. amount due from customers under construction contracts);
- loan commitments that are not measured at fair value through profit or loss; and
- financial guarantee contracts that are not measured at fair value through profit or loss;

Loss allowance is not recognised for:

- financial assets measured at fair value through profit or loss; or
- equity instruments measured at fair value through other comprehensive income.

Expected credit losses are the probability-weighted estimate of credit losses over the expected life of a financial instrument. A credit loss is the difference between all contractual cash flows that are due and all cash flows expected to be received, all discounted at the original effective interest rate of the financial instrument.

The Corporation uses the simplified approaches to impairment, as applicable under AASB 9:

Simplified approach

The simplified approach does not require tracking of changes in credit risk in every reporting period, but instead requires the recognition of lifetime expected credit loss at all times.

This approach is applicable to trade receivables.

In measuring the expected credit loss a provision matrix for trade receivables has been used, taking into consideration various data to get to an expected credit loss (i.e. diversity of its customer base, appropriate groupings of its historical loss experience etc).

Notes to the Financial Statements

As at 30 June 2021

Note 1: Statement of Significant Accounting Policies (continued)

k. Financial Instruments (continued)

Recognition of expected credit losses in financial statements

At each reporting date, the Corporation recognises the movement in the loss allowance as an impairment gain or loss in the statement of profit or loss and other comprehensive income.

The carrying amount of financial assets measured at amortised cost includes the loss allowance relating to that asset.

Assets measured at fair value through other comprehensive income are recognised at fair value with changes in fair value recognised in other comprehensive income. An amount in relation to change in credit risk is transferred from other comprehensive income to profit or loss at every reporting period.

For financial assets that are unrecognised (e.g. loan commitments yet to be drawn, financial guarantees), a provision for loss allowance is created in the statement of financial position to recognise the loss allowance.

l. Trade and Other Payables

Liabilities for trade and other payables are carried at cost, which is the fair value of the consideration to be paid in the future for goods and services received, whether or not billed to the Corporation.

m. Cash and Cash Equivalents

Cash and cash equivalents includes cash on hand, deposits held at call with financial institutions, other short-term highly liquid investments with original maturities of three months or less that are readily convertible to known amounts of cash and which are subject to an insignificant risk of change in value. Where accounts at financial institutions are overdrawn, balances are shown in current liabilities on the balance sheet.

n. Commitments

Commitments are recognised when the Corporation has a legal or constructive obligation, as a result of past events, for which it is probable that an outflow of economic benefits will result and that outflow can be reliably measured. Commitments recognised represent the best estimate of the amounts required to settle the obligation at reporting date.

o. Leases

The majority of the Corporation's accounting policies for leases are set out in note 8.

Identifying Leases

The Corporation accounts for a contract, or a portion of a contract, as a lease when it conveys the right to use an asset for a period of time in exchange for consideration. Leases are those contracts that satisfy the following criteria:

- There is an identified asset;
- The Corporation obtains substantially all the economic benefits from use of the asset; and
- The Corporation considers whether the supplier has substantive substitution rights. If the supplier does have those rights, the contract is not identified as giving rise to a lease.

In determining whether the Corporation obtains substantially all the economic benefits from use of the asset, the Corporation considers only the economic benefits that arise from use of the asset, not those incidental to legal ownership or other potential benefits.

Notes to the Financial Statements

As at 30 June 2021

Note 1: Statement of Significant Accounting Policies (continued)

o. Leases (continued)

In determining whether the Corporation has the right to direct use of the asset, the Corporation considers whether it directs how and for what purpose the asset is used throughout the period of use. If there are no significant decisions to be made because they are predetermined due to the nature of the asset, the Corporation considers whether it was involved in the design of the asset in a way that predetermines how and for what purpose the asset will be used throughout the period of use. If the contract or portion of a contract does not satisfy these criteria, the Corporation applies other applicable AASBs rather than AASB 16.

Concessionary Leases

For leases that have significantly below-market terms and conditions principally to enable the Corporation to further its objectives (commonly known as peppercorn/concessionary leases), the Corporation has adopted the temporary relief under AASB 2018-8 and measures the right-of-use assets at cost on initial recognition.

p. Going Concern

The financial statements have been prepared on a going concern basis, which contemplates continuity of normal business activities and the realisation of assets and settlement of liabilities in the ordinary course of business.

The Corporation reported a current year operating loss of \$487,933 (2020: loss of \$250,774 and an additional loss of \$750,000 on revaluation of land). The statement of Financial Position reports current assets of \$1,245,596 (2020: \$1,527,401) and current liabilities of \$3,942,731 (2020: \$4,976,422). As at 30 June 2021 the current liabilities are greater than the current assets by \$2,697,135 (2020: \$3,449,021). The Corporation's statement of Cash Flows reports a decrease in cash of \$674,812 (2020: Increase of \$766,370). The ability of the Corporation to continue as a going concern is dependent upon continued funding from the Commonwealth and Northern Territory Governments and on Management and the Directors taking the necessary steps to improve the profitability of the Corporation's operations and improve its working capital position. In this regard Management and the Directors have taken the following corrective action:

An organisation Budget Taskforce, whose members include two Directors and Senior Management, has been established to meet regularly to closely monitor the organisation's financial results. The taskforce will identify opportunities to reduce expenditure and increase income to improve its working capital position, with its findings to be reported regularly to the Audit and Risk Management Committee and to the Board of Directors. The Audit and Risk Management Committee has been tasked with increasing its scrutiny of the organisation's financial position and its budgets. The CEO is in discussions with the Commonwealth Department of Health seeking a more equitable funding model. The organisation is funded on the basis of its clients being local residents when in reality, a significant number of its clients live in remote areas of the NT and are visiting Darwin.

q. Nature and Purpose of Reserves

Land Revaluation Reserve

The Land Revaluation Reserve is to record increments and decrements in the fair value of land.

Asset Replacement Reserve

The Asset Replacement Reserve is to record funds set aside for the replacement of capital assets.

Notes to the Financial Statements

As at 30 June 2021

Note 1: Statement of Significant Accounting Policies (continued)

r. New and Amended Accounting Standards Adopted by the Corporation

Initial adoption of AASB 2020-04 COVID-19 - Related Rent Concessions

AASB 2020-4 Amendments to Australian Accounting Standards - Covid-19-Related Rent Concessions amends AASB 16 by providing a practical expedient that permits lessees to assess whether rent concessions that occur as a direct consequence of the COVID-19 pandemic and, if certain conditions are met, account for those rent concessions as if they were not modifications.

Initial adoption of AASB 2018-6 Amendments to Australian Accounting Standards - Definition of a Business

AASB 2018-6 amends and narrows the definition of a business specified in AASB 3 Business Combinations, simplifying the determination of whether a transaction should be accounted for as a business combination or an asset acquisition. Corporations may also perform a calculation and elect to treat certain acquisitions as acquisitions of assets.

The standards listed above did not have any impact on the amounts recognised in prior periods and are not expected to significantly affect the current or future periods.

Notes to the Financial Statements

As at 30 June 2021

	2021 \$	2020 \$
Note 2: Revenue and Other Income		
Note 2a. Revenue from government and other grants and contributions		
<i>Commonwealth Government</i>		
Department of Health	13,577,778	12,644,788
Department of Social Services	1,089,125	562,457
National Indigenous Australians Agency	638,976	645,076
Primary Health Network	3,466,554	3,201,620
Total Commonwealth Government grants	18,772,433	17,053,941
<i>Northern Territory Government</i>		
Department of Health	2,785,772	1,794,429
Territory Families	1,011,222	772,500
Total Territory Government grants	3,796,994	2,566,929
Total government grants	22,569,427	19,620,870
<i>Other</i>		
Northern Territory General Practice Education Ltd	1,193,960	936,706
Other Grants	691,293	623,073
Other Government income	50,000	50,000
Donations and fundraising	76,562	47,264
Total other grants and contributions	2,011,815	1,657,043
Total revenue from grants and contributions	24,581,242	21,277,913
Note 2b. Medicare		
Commonwealth Government medicare receipts	5,275,126	5,391,568
Note 2c. Other income		
Interest from Australian Financial Institutions	1,373	2,434
Reimbursements	-	123,023
Rental income	-	58,121
Qumax	95,517	95,273
NACCHO	141,414	
Sundry income	347,180	276,941
Total other income	585,484	555,792

Notes to the Financial Statements

As at 30 June 2021

	2021 \$	2020 \$
Note 3: Expenses		
Note 3a. Administration expense		
<i>Accounting fees</i>	16,072	48,735
Bank charges	4,608	9,032
Board governance expense	89,309	58,763
Business planning report and evaluation	38,945	52,010
Hire of plant and equipment	59,954	-
Information technology services	1,277,457	508,221
Insurance	151,129	94,565
Legal services	52,492	43,782
Membership fees	24,712	25,232
Postage	10,016	12,018
Stationery	86,675	73,211
Telephone	233,487	224,222
Other	42,810	17,659
Total administration expense	2,087,666	1,167,450
Note 3b. Employee benefits expense		
Salaries	20,909,263	18,954,368
Superannuation	1,769,198	1,666,791
Work cover	199,367	235,092
Staff training	96,794	149,208
Other	240,060	153,497
Total employee benefits expense	23,214,682	21,158,956
Note 3c. Depreciation and amortisation		
<i>Property, plant and equipment</i>		
Buildings	596,994	524,644
Plant and equipment	287,601	200,669
Clinical software	44,297	51,945
Motor vehicles	16,350	16,350
	945,242	793,608
<i>Right-of-use assets</i>		
Buildings	670,984	633,425
Motor vehicles	245,258	214,820
	916,242	848,245
Total depreciation and amortisation	1,861,484	1,641,853

Notes to the Financial Statements

As at 30 June 2021

	2021 \$	2020 \$
Note 3d. Loss on write down of property, plant and equipment		
<i>Buildings</i>		
Proceeds	-	-
Written down value	39,085	-
	39,085	-
<i>Plant and equipment</i>		
Proceeds	-	-
Written down value	114,993	-
	114,993	-
<i>Clinical Software</i>		
Proceeds	-	-
Written down value	4,072	-
	4,072	-
Total loss on write down of property, plant and equipment	158,150	-
Note 3e. Finance costs		
Interest - borrowings	7,905	11,213
ROU lease interest - buildings	348,843	315,407
ROU lease interest - motor vehicles	13,681	18,498
Total finance costs	370,429	345,118
Note 3f. Motor vehicle expenses		
Fuel and oil	53,704	69,342
Repairs and maintenance	47,204	20,960
Registration and insurance	37,395	48,301
Total motor vehicle expenses	138,303	138,603

Notes to the Financial Statements

As at 30 June 2021

	NOTE	2021 \$	2020 \$
Note 3g. Operational expenses			
Advertising and promotions		54,296	134,139
Agency staff		21,959	39,981
Auspicing fees		155,242	24,646
Cleaning		417,628	369,154
Client services		325,213	261,679
Consultants		241,646	318,074
Dental supplies		1,160	4,618
GP Locums		30,832	14,135
Health and safety		8,077	23,382
Lease expense		380,815	458,997
Medical supplies		641,321	569,849
Minor equipment purchases		83,329	120,809
Publications and resources		10,967	11,771
QUMAX expenditure		2,500	24,574
Repairs and maintenance		258,785	124,421
Security		125,480	50,844
Utilities		195,533	209,663
Other		9,458	114,871
Total operational expenses		2,964,241	2,875,607
Note 3h. Other expenses			
Property costs		93,034	47,732
Travel and accommodation		21,285	100,728
Total other expenses		114,319	148,460

Notes to the Financial Statements

As at 30 June 2021

	NOTE	2021 \$	2020 \$
Note 4: Cash and Cash Equivalents			
Cash at bank		419,126	1,093,288
Cash on hand		550	1,200
Total cash and cash equivalents	15	419,676	1,094,488
Note 5: Trade and Other Receivables			
Trade debtors		346,840	29,548
Other debtors - grants and medicare		-	208,553
Provision for impairment		-	-
Total trade and other receivables	15	346,840	238,101

The Corporation applies the simplified approach to providing for expected credit losses prescribed by AASB 9, which permits the use of lifetime expected loss provision for all accounts receivable. To measure the expected credit losses, accounts receivable have been grouped based on shared credit risk characteristics and the days past due. Credit losses also incorporate forward-looking information. There is no loss allowance required.

Credit risk

The Corporation has no significant concentration of credit risk with respect to any single counterparty or counterparties other than those receivables specifically provided for and mentioned within this note. The main source of credit risk to the Corporation is considered to relate to the class of assets described as "accounts receivable and other debtors".

The Corporation always measures the loss allowance for accounts receivable at an amount equal to lifetime expected credit loss. The expected credit losses on accounts receivable are estimated using a provision matrix by reference to past default experience of the debtor and an analysis of the debtor's current financial position, adjusted for factors that are specific to the debtors, general economic conditions of the industry in which the debtors operate and an assessment of both the current as well as the forecast direction of conditions at the reporting date.

There has been no change in the estimation techniques used or significant assumptions made during the current reporting period.

The Corporation writes off an accounts receivable when there is information indicating that the debtor is in severe financial difficulty and there is no realistic prospect of recovery (e.g. when the debtor has been placed under liquidation or has entered into bankruptcy proceedings) or when the trade receivables are over two years past due, whichever occurs earlier.

As at 30 June 2021, current receivables with a nominal value of \$54,745 (2020: \$132,089) were past due but not impaired. These relate to a number of customers for whom there is no history of default.

Notes to the Financial Statements

As at 30 June 2021

	2021 \$	2020 \$
Note 6: Other Current Assets		
Bond paid	65,630	64,720
Prepayments	355,426	98,446
Other	58,024	31,646
Total other current assets	479,080	194,812
Note 7: Property, Plant and Equipment		
Land, at fair value	4,400,000	4,400,000
Buildings, at cost	7,425,373	7,487,350
Less: Accumulated depreciation	(3,104,955)	(2,530,853)
	4,320,418	4,956,497
Plant and equipment, at cost	1,881,368	2,357,553
Less: Accumulated depreciation	(1,396,575)	(1,807,629)
	484,793	549,924
Motor vehicles, at cost	81,749	81,749
Less: Accumulated depreciation	(47,687)	(31,337)
	34,062	50,412
Clinical software, at cost	524,611	553,566
Less: Accumulated depreciation	(500,650)	(481,236)
	23,961	72,330
Work in progress, at cost	-	45,000
Total property, plant and equipment	9,263,234	10,074,163

A land revaluation was conducted on 14 August 2020 by Colliers International. Numbers 32 and 36 Knuckey Street were revalued with a decrease in value of \$500,000 for 36 Knuckey Street and a decrease in value of \$250,000 for 32 Knuckey Street. Land assets are valued at fair value and are measured on the basis of market value, being the revalued amount at the date of the revaluation. No items of property, plant and equipment are expected to be sold or disposed of within the next 12 months.

Notes to the Financial Statements

As at 30 June 2021

Note 7: Property, Plant and Equipment (continued)

	LAND AT FAIR VALUE	BUILDINGS AT COST	PLANT AND EQUIPMENT AT COST	MOTOR VEHICLES AT COST	CLINICAL SOFTWARE AT COST	WORK IN PROGRESS AT COST	TOTAL
	\$	\$	\$	\$	\$	\$	\$
Year ended 30 June 2020							
Opening balance	5,150,000	4,741,084	528,761	66,762	102,781	14,460	10,603,848
Additions	-	740,057	221,832	-	7,034	45,000	1,013,923
Asset recognition	-	-	-	-	14,460	(14,460)	-
Depreciation	-	(524,644)	(200,669)	(16,350)	(51,945)	-	(793,608)
Revaluation	(750,000)	-	-	-	-	-	(750,000)
Closing balance	4,400,000	4,956,497	549,924	50,412	72,330	45,000	10,074,163
Year ended 30 June 2021							
Opening balance	4,400,000	4,956,497	549,924	50,412	72,330	45,000	10,074,163
Additions	-	-	292,463	-	-	-	292,463
Disposals	-	(39,085)	(114,993)	-	(4,072)	-	(158,150)
Asset recognition	-	-	45,000	-	-	(45,000)	-
Depreciation	-	(596,994)	(287,601)	(16,350)	(44,297)	-	(945,242)
Closing balance	4,400,000	4,320,418	484,793	34,062	23,961	-	9,263,234

Note 8: Leases

All leases are accounted for by recognising a right-of-use asset and a lease liability except for:

- Leases of low value assets; and
- Leases with a duration of 12 months or less.

Lease liabilities are measured at the present value of the contractual payments due to the lessor over the lease term, with the discount rate determined by reference to the rate inherent in the lease unless (as is typically the case) this is not readily determinable, in which case the Corporation's incremental borrowing rate on commencement of the lease is used. Variable lease payments are only included in the measurement of the lease liability if they depend on an index or rate. In such cases, the initial measurement of the lease liability assumes the variable element will remain unchanged throughout the lease term. Other variable lease payments are expensed in the period to which they relate.

On initial recognition, the carrying value of the lease liability also includes:

- amounts expected to be payable under any residual value guarantee;
- the exercise price of any purchase option granted in favour of the Corporation if it is reasonably certain to assess that option;
- any penalties payable for terminating the lease, if the term of the lease has been estimated on the basis of termination option being exercised.

Notes to the Financial Statements

As at 30 June 2021

Note 8: Leases (continued)

Right-of-use assets are initially measured at the amount of the lease liability, reduced for any lease incentives received, and increased for:

- lease payments made at or before commencement of the lease;
- initial direct costs incurred; and
- the amounts of any provision recognised where the Corporation is contractually required to dismantle, remove or restore the leased asset (typically leasehold dilapidations).

Subsequent to initial measurement lease liabilities increase as a result of interest charged at a constant rate on the balance outstanding and are reduced for lease payments made. Right-of-use assets are amortised on a straight-line basis over the remaining term of the lease or over the remaining economic life of the asset if, rarely, this is judged to be shorter than the lease term.

When the Corporation revises its estimate of the term of any lease (because, for example, it re-assesses the probability of a lessee extension or termination option being exercised), it adjusts the carrying amount of the lease liability to reflect the payments to make over the revised term, which are discounted using a revised discount rate. The carrying value of lease liabilities is similarly revised when the variable element of future lease payments dependent on a rate or index is revised, except the discount rate remains unchanged. In both cases an equivalent adjustment is made to the carrying value of the right-of-use asset, with the revised carrying amount being amortised over the remaining (revised) lease term. If the carrying amount of the right-of-use asset is adjusted to zero, any further reduction is recognised in profit or loss.

When the Corporation renegotiates the contractual terms of a lease with the lessor, the accounting depends on the nature of the modification:

- if the renegotiation results in one or more additional assets being leased for an amount commensurate with the standalone price for the additional rights-of-use obtained, the modification is accounted for as a separate lease in accordance with the above policy;
- in all other cases where the renegotiated increases the scope of the lease (whether that is an extension to the lease term, or one or more additional assets being leased), the lease liability is remeasured using the discount rate applicable on the modification date, with the right-of-use asset being adjusted by the same amount;
- if the renegotiation results in a decrease in the scope of the lease, both the carrying amount of the lease liability and right-of-use asset are reduced by the same proportion to reflect the partial or full termination of the lease with any difference recognised in profit or loss. The lease liability is then further adjusted to ensure its carrying amount reflects the amount of the renegotiated payments over the renegotiated term, with the modified lease payments discounted at the rate applicable on the modification date. The right-of-use asset is adjusted by the same amount.

For contracts that both convey a right to the Corporation to use an identified asset and require services to be provided to the Corporation by the lessor, the Corporation has elected to account for the entire contract as a lease, i.e. it does not allocate any amount of the contractual payments to, and account separately for, any services provided by the supplier as part of the contract.

Nature of leasing activities (in the capacity as lessee)

The Corporation leases a number of properties in the jurisdictions from which it operates. In some jurisdictions it is customary for lease contracts to provide for payments to increase each year by inflation or in others to be reset periodically to market rental rates. In some jurisdictions' property leases the periodic rent is fixed over the lease term. The Corporation leases buildings under agreements of between one or ten years which in some cases include options to extend. On renewal the lease terms are renegotiated. The Corporation also leases motor vehicles at fixed payments under agreements of one to four years.

Notes to the Financial Statements

As at 30 June 2021

Note 8: Leases (continued)

Right-of-Use Assets

	LAND AND BUILDINGS \$	MOTOR VEHICLES \$	TOTAL \$
Year ended 30 June 2020			
As at 1 July 2019	5,826,447	422,955	6,249,402
Additions	1,229,206	51,006	1,280,212
Depreciation	(633,425)	(214,820)	(848,245)
Closing balance	6,422,228	259,141	6,681,369
Year ended 30 June 2021			
Opening balance	6,422,228	259,141	6,681,369
Additions	-	198,200	198,200
Depreciation	(670,984)	(245,258)	(916,242)
Other			
Closing balance	5,751,244	212,083	5,963,327

Note 9: Trade and Other Payables

	2021 \$	2021 \$
Trade payables	-	527,541
Accrued expenses	717,804	21,278
Accrued employee benefits	144,979	431,342
GST liability	405,402	827,651
Payroll liabilities	-	132,874
Contract liabilities	289,674	489,585
Total trade and other payables	1,557,859	2,430,271

Trade payables are generally settled within 30 days and all the payables are expected to be settled within 12 months.

Contract liabilities are unexpended grants received during the year where the agreement between the grantor and Corporation creates enforceable rights and obligations that are sufficiently specific. The value of those specific performance obligations which have not been met at balance date and which can be reliably measured are reported.

Financial liabilities at amortised cost classified as accounts payable and other payables

	NOTE		
Trade and other payables:			
- total current		1,557,859	2,430,271
- total non-current			-
		1,557,859	2,430,271
Less: GST payable		(405,402)	(827,651)
Less: Contract liabilities		(289,674)	(489,585)
Financial liabilities as trade and other payables	15	862,783	1,113,035

Notes to the Financial Statements

As at 30 June 2021

	2021 \$	2020 \$
Note 10: Lease Liabilities		
<i>Current</i>		
Secured	128,518	188,005
Non secured	569,767	537,429
	698,285	725,434
<i>Non-current</i>		
Secured	70,893	65,072
Non secured	5,445,125	6,014,283
	5,516,018	6,079,355
Total lease liabilities	6,214,303	6,804,789

Lease liabilities represent the discounted future rentals payable by the Corporation.

Motor vehicle leases are secured by the leased asset and are negotiated on an average term not exceeding five years.

Property leases are unsecured and are negotiated on various terms up to 25 years.

Note 11: Provisions		
<i>Current</i>		
Employee benefits: Annual leave	1,439,614	1,319,121
Employee benefits: Long Service leave	194,022	452,215
	1,633,636	1,771,336
<i>Non-current</i>		
Employee benefits: Long Service leave	572,716	245,580
Total provisions	2,206,352	2,016,916

Analysis of employee provisions - annual leave and long service leave

Opening balance at 1 July 2020	2,016,916
Net additional provisions	189,436
Balance at 30 June 2021	2,206,352

The provisions for employee benefits represents amounts accrued for annual leave and long service leave. The organisation does not expect the full amount of the current annual leave and long service leave balances to be settled within the next 12 months. These amounts must be classified as current liabilities since the organisation does not have an unconditional right to defer the settlement of these amounts in the event employees wish to use their leave entitlements.

Note 12: Borrowings		NOTE
Current	52,951	49,381
Non-current	32,639	85,590
	15	85,590
		134,971

The loan is secured against the fit-out works completed. This loan is repayable in instalments over five years. Interest is charged on the principal sum at a rate of 7% nominal interest per annum. Interest paid for the year ended 30 June 2021 is \$7,884 (2020: \$11,213) compounding monthly until the expiry date of the lease or the date on which the principal and all interest is paid in full.

The Corporation has an overdraft facility of \$1,000,000. Interest is payable on the outstanding balance at the prevailing variable rate. It was unused in both the current and previous financial year.

Notes to the Financial Statements

As at 30 June 2021

	2021 \$	2020 \$
Note 13: Cashflow Information		
Reconciliation of cash flow from operating activities with current year deficit		
Current year deficit	(487,933)	(1,000,774)
<i>Adjust for non-cash items:</i>		
Revaluation of property, plant and equipment-	-	750,000
Depreciation and amortisation	1,861,484	1,641,853
Loss on disposal of property, plant and equipment	158,150	-
	1,531,701	1,391,079
<i>Changes in assets and liabilities:</i>		
<i>(Increase) / decrease in assets:</i>		
Trade and other receivables	(108,739)	64,049
Other current assets	(284,268)	(120,834)
<i>Increase / (decrease) in liabilities:</i>		
Trade and other payables	(872,412)	392,251
Contract liabilities	-	489,585
Provisions	189,436	335,042
Cash provided by operating activities	455,718	2,551,172

Note 14: Changes in Liabilities arising from Financing Activities

	LOANS \$	LEASE LIABILITY \$	TOTAL \$
Balance at 30 June 2019	181,024	-	181,024
Net cash used in financing activities	(46,053)	(724,825)	(770,878)
Leases recognised on adoption of AASB 16	-	6,249,402	6,249,402
Acquisition of lease	-	1,280,212	1,280,212
Balance at 30 June 2020	134,971	6,804,789	6,939,760
Acquisitions	-	198,200	198,200
Net cash used in financing activities	(49,381)	(788,686)	(838,067)
Balance at 30 June 2021	85,590	6,214,303	6,299,893

Notes to the Financial Statements

As at 30 June 2021

Note 15: Financial Risk Management

The main risks the Corporation is exposed to through its financial instruments are liquidity risk, credit risk, market risk, interest rate risk and concentration of credit risk.

Liquidity Risk

Liquidity risk is the risk that the Corporation will not be able to meet its obligations as and when they fall due.

Credit Risk

Credit risk is the risk of financial loss to the Corporation if a customer or counterparty to a financial instrument fails to meet its contractual obligations. Exposure to credit risk is monitored by management on an ongoing basis. The maximum exposure to credit risk, excluding the value of any collateral or other security, is limited to the total carrying value of financial assets, net of any provisions for impairment of those assets, as disclosed in the balance and notes to the financial statements.

The main source of credit risk to the Corporation is considered to relate to the class of assets described as "accounts receivable and other debtors".

The Corporation writes off an accounts receivable when there is information indicating that the debtor is in severe financial difficulty and there is no realistic prospect of recovery (e.g. when the debtor has been placed under liquidation or has entered into bankruptcy proceedings) or when the trade receivables are over two years past due, whichever occurs earlier. None of the accounts receivable that have been written off are subject to enforcement activities.

Financial assets are monitored regularly with no financial assets past due or impaired at balance date. Further there have been no credit terms renegotiated. Management have established business continuity plans, policies and procedures to mitigate operational banking risks.

Market Risk

Market risk is the risk that changes in market prices, such as interest rates and equity prices will effect the Corporation's income or the value of its holding of financial instruments. Exposure to market risk is closely monitored by management and carried out within guidelines set by the Board.

The Corporation does not have any material market risk exposure.

Interest Rate Risk

Interest rate risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in interest rates. The Corporation manages its interest rate risk by maintaining floating rate cash and fixed rate debt.

Sensitivity Analysis

At balance date, the Corporation had the following assets exposed to variable interest rate risk:

	2021 \$	2020 \$
Financial Assets		
Cash at bank	419,126	1,093,288

There are no financial liabilities exposed to variable interest rate risk.

Notes to the Financial Statements

As at 30 June 2021

Note 15: Financial Risk Management (continued)

The table below details the interest rate sensitivity analysis of the Corporation at balance date, holding all variables constant. A 100 basis point change is deemed to be a possible change and is used when reporting interest rate risk.

	2021		2020	
	EFFECT ON P&L \$	EFFECT ON EQUITY \$	EFFECT ON P&L \$	EFFECT ON EQUITY \$
Base points + 1%	4,191	4,191	10,933	10,933
Base points - 1%	(4,191)	(4,191)	(10,933)	(10,933)

The table below reflects the undiscounted contractual settlement terms for the financial instruments of a fixed period of maturity, as well as management's expectations of the settlement period for all financial instruments:

Year ended 30 June 2021

	WITHIN 1 YEAR \$	1-5 YEARS \$	OVER 5 YEARS \$	TOTAL CARRYING \$
Financial Assets - Cash Flow Realisable				
Cash and cash equivalents	419,676	-	-	419,676
Trade and other receivables	346,840	-	-	346,840
Total	766,516	-	-	766,516
Financial Liabilities - Due for Payment				
Trade and other payables	862,783	-	-	862,783
Loan	52,951	32,639	-	85,590
Lease Liabilities	698,285	3,308,930	2,207,088	6,214,303
Total	1,614,019	3,341,569	2,207,088	7,162,676

Year ended 30 June 2020

	WITHIN 1 YEAR \$	1-5 YEARS \$	OVER 5 YEARS \$	TOTAL CARRYING \$
Financial Assets - Cash Flow Realisable				
Cash and cash equivalents	1,094,488	-	-	1,094,488
Trade and other receivables	238,101	-	-	238,101
Total	1,332,589	-	-	1,332,589
Financial Liabilities - Due for Payment				
Trade and other payables	1,113,035	-	-	1,113,035
Loan	49,381	85,590	-	134,971
Lease Liabilities	725,434	3,264,427	2,798,720	6,788,581
Total	1,887,850	3,350,017	2,798,720	8,036,587

Notes to the Financial Statements

As at 30 June 2021

Note 15: Financial Risk Management (continued)

The following table provides the fair values of the Corporation's assets measured and recognised as a recurring basis after initial recognition and their categorisation within the fair value hierarchy.

Freehold Land	Fair value hierarchy	2021 \$	2020 \$
32 Knuckey St	Level 2	2,550,000	2,550,000
36 Knuckey St	Level 2	1,850,000	1,850,000
		4,400,000	4,400,000

The fair value measurement amounts of freehold land include office buildings in Darwin in close proximity to the CBD.

Note 16: Key Management Personnel Compensation

The aggregate compensation made to directors and other members of key management personnel is set out below:

Short term employee benefits	1,354,880	1,441,610
Post-employment benefits	109,251	298,328
	1,464,131	1,739,938

Note 17: Related Parties

During the financial year ended 30 June 2021, no loans or other related party transactions were made to any Board member or key management personnel other than car parking \$1,495 (2020: \$Nil). No Board members were paid sitting fees (2020: \$Nil) and no sitting fees were paid from grant funds (2020: \$Nil).

Note 18: Economic Dependency

The Corporation is dependent on continued funding from the Commonwealth and Northern Territory Governments and the Directors have no reason to believe that this will not continue. The Commonwealth core funding agreement is for three years and will expire 30/6/2023. The Corporation are in negotiation with the Commonwealth and are confident that it will be renewed for a further three years. Core funding from the Northern Territory Government agreements are typically for five years. Funding for the mobile and Bagot clinics will end on 30/6/2022 and the Corporation are confident that this will be renewed for a further five years. Funding for the Youth Detention service was secured on 1/7/2020 and will expire 30/6/2025.

Note 19: Contingent Liabilities and Contingent Assets

The Corporation are not aware of any contingent liabilities or contingent assets (2020: \$Nil).

Note 20: Events Occurring after Reporting Period

The Corporation are not aware of any significant events since the end of the reporting period.

	2021 \$	2020 \$
Note 21: Auditors' Remuneration		
Amounts paid or due and payable for:		
Audit or review service - Auditors 2020	8,677	21,278
Other services - initial adoption AASB16 - Auditors 2020	7,395	
Audit or review service - Auditors 2021	12,500	-
Total auditors' remuneration	28,572	21,278

Director's Declaration

The Directors of Danila Dilba Biluru Butji Binnilutlum Health Service Aboriginal Corporation, declare that in the Directors' opinion:

1. The financial statements and notes, as set out on pages 7 to 31, are in accordance with the Corporations (Aboriginal and Torres Strait Islander) Act 2006 (CATSI Act 2006), the Corporations (Aboriginal and Torres Strait Islander) Regulations 2017 and with the Australian Charities and Not-for-profits Commission Act 2012 (ACNC Act) and:
 - a. comply with Australian Accounting Standards - Reduced Disclosure Requirements and the Corporations (Aboriginal and Torres Strait Islander) Regulations 2017 ; and any applicable determinations made by the Registrar of Aboriginal Corporations under Division 336 of the Corporations (Aboriginal and Torres Strait Islander) Act 2006; and
 - b. give a true and fair view of the financial position of the Corporation as at 30 June 2021, its performance and cash flows for the year ended on that date.
2. In the Directors' opinion there are reasonable grounds to believe that the Corporation will be able to pay its debts when they become due and payable.

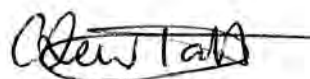
This declaration is made in accordance with a resolution of the Directors and with subsection 60.15(2) of the Australian Charities and Not-for-profits Commission Regulation 2013.



Ms Carol Stanislaus

Chairperson

Dated 29 October 2021



Ms Camille Lew Fatt

Deputy Chairperson

Dated 29 October 2021

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF DANILA DILBA BILURU BUTJI BINNILUTLUM HEALTH SERVICE ABORIGINAL CORPORATION**REPORT ON THE AUDIT OF THE FINANCIAL REPORT****Opinion**

We have audited the financial report of Danila Dilba Biluru Butji Binnilutlum Health Service Aboriginal Corporation ("the Corporation"), which comprises the statement of financial position as at 30 June 2021, statement of profit or loss and other comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies, and the directors' declaration.

In our opinion, the accompanying financial report of the Corporation is in accordance with the requirements of Division 60 of the *Australian Charities and Not-for-profits Commission Act 2012* and the *Corporations (Aboriginal and Torres Strait Islander) Act 2006*, including:

- (i) giving a true and fair view of the Corporation's financial position as at 30 June 2021 and of its financial performance and its cash flows for the year then ended; and
- (ii) complying with Australian Accounting Standards – Reduced Disclosure Requirements, the *Corporations (Aboriginal and Torres Strait Islander) Regulations 2017* and *Australian Charities and Not-for-profits Commission Regulations 2013*.

Basis for Opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Report* section of our report. We are independent of the Corporation in accordance with the auditor independence requirements of the *Australian Charities and Not-for-profits Commission Act 2012* and the *Corporations (Aboriginal and Torres Strait Islander) Act 2006*, and the independence 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. 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.

Material Uncertainty Related to Going concern

We draw attention to Note 1 (p) Basis of Accounting, "Going concern" to the financial report. "The Corporation reported a current year operating loss of \$487,933 (2020: loss of \$250,774 and an additional loss of \$750,000 on revaluation of land). The statement of Financial Position reports current assets of \$1,245,596 (2020: \$1,527,401) and current liabilities of \$3,942,731 (2020: \$4,976,422). As at 30 June 2021 the current liabilities are greater than the current assets by \$2,697,135 (2020: \$3,449,021). The Corporation's statement of Cash Flows reports a decrease in cash of \$674,812 (2020: Increase of \$766,370). The ability of the Corporation to continue as a going concern is dependent upon continued funding from the Commonwealth and Northern Territory Governments and on Management and the Directors taking the necessary steps to improve the profitability of the Corporation's operations and improve its working capital position.

These events or conditions, along with the other matter stated in Note 1 (p) "Going Concern" indicate that a material uncertainty exists that may cast significant doubt on the Corporation's ability to continue as a going concern.

Our opinion is not modified in respect of this matter.

Other Matter

The financial report of the Corporation for the year ended 30 June 2020 was audited by another auditor who expressed an unqualified opinion on the financial report on 12 November 2020.

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF DANILA DILBA BILURU BUTJI BINNITUTLUM HEALTH SERVICE ABORIGINAL CORPORATION (CONTINUED)

REPORT ON THE AUDIT OF THE FINANCIAL REPORT (CONT.)

Directors' Responsibility for the Financial Report

The directors of the Corporation are responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards – Reduced Disclosure Requirements, the *Corporations (Aboriginal and Torres Strait Islander) Act 2006* and the *Australian Charities and Not-for-profits Commission Act 2012*; and is appropriate to meet the needs of the members. The directors are also responsible for such internal control as the directors determine is necessary to enable the preparation of the financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error.

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

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 Corporation's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the Directors.
- Conclude on the appropriateness of 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 Corporation's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial report or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Corporation to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial report, including the disclosures, and whether the financial report represents the underlying transactions and events in a manner that achieves fair presentation.

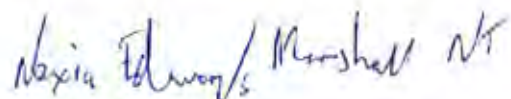


INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF DANILA DILBA BILURU BUTJI BINNILUTLUM HEALTH SERVICE ABORIGINAL CORPORATION (CONTINUED)

REPORT ON THE AUDIT OF THE FINANCIAL REPORT (CONT.)

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

We also provide the directors with a statement that we have complied with relevant ethical requirements regarding independence, and to communicate with them all relationships and other matters that may reasonably be thought to bear on our independence, and where applicable, actions taken to eliminate threats or safeguards applied.



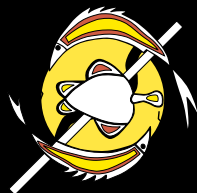
Nexia Edwards Marshall NT
Chartered Accountants



Noel Clifford
Partner

Dated: 2 November 2021





Danila Dilba[®]
Health Service

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