



APUNIPIMA CAPE YORK HEALTH COUNCIL ABORIGINAL CORPORATION

**ANNUAL REPORT
2004 / 2005**

Acknowledgements

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Chairperson's Report

Bernie Singleton

On behalf of Apunipima Cape York Health Council I am pleased to present to the members of Cape York Aboriginal Council, the Annual Report for the year ended 30 June 2005.

The Governing Committee fulfilled its responsibilities according to the Constitution by holding the required Governing Committee meetings and Executive Committee meetings throughout the financial year.

The vision for Apunipima Cape York Health Council has remained unchanged since the inception of the organisation in 1994, which is to ensure that

Cape York people are empowered to take responsibility for improving their own health at individual, clan and community levels, to equal that of other Australians.

Over the past twelve months, Apunipima Cape York Health Council has been able to achieve significant outcomes for Cape York. There has been increased service delivery in the areas of Family Well-Being, Foetal Alcohol Syndrome, development of Health Action Groups, Men's Health and the development of better partnerships and collaboration with other service providers.



The major achievement has been the movement of thinking from Government on progressing community control. Community Control is defined as the local community having control of issues that directly affect their community. Implicit in this definition is the clear statement that Aboriginal and Torres Strait Islander peoples must control the pace, shape and manner of all decision making and service delivery at all levels.

Through continuous advocacy by Apunipima Cape York Health Council, the environment in Cape York is changing and Government are willing to acknowledge the importance of community control as an underlying requirement for health improvements. This has created the first real opportunity for self-determination of health in Cape York and for the vision of the organisation to be realised.



Chairperson's Report *Continued*

Consequently, the Commonwealth Department of Health and Aging and Queensland Health commissioned the Cape York Institute for Policy and Leadership to provide a report on the viability of a community controlled health service for Cape York. The outcome of this report which was presented to the Cape York Regional Health Forum was the agreement of Government to further investigate the idea of "pooling of funds" and the transfer of service delivery to a Community Controlled Health Service through a staged process in-line with the development of capacity within Apunipima Cape York Health Council.

As the report was being developed, a delegation from Apunipima Cape York Health Council visited Aboriginal and Torres Strait Islander Community Controlled Health Services in the Kimberley, Northern Territory and New South Wales to identify how the experiences of these services could be used to expedite the process for Cape York.

The other significant achievement was the development of the Cape York Regional Health Forum which is a forum where Government and service providers are able to work collaboratively on delivery of effective services to Cape York people. The Commonwealth Department of Health and Aging through the Cape York Regional Health Forum commissioned the development of the Cape York Regional Health Strategy.

The Cape York Regional Health Strategy is a summary of the Whole of Health Plans and identifies the priorities that the Cape York Regional Health Forum will focus on over the next 3 years. Queensland Health and the Commonwealth Department of Health and Aging will invest future funding into the priority areas identified in the Cape York Regional Health Strategy.

Apunipima Cape York Health Council recognises in its current form that it will need to undergo significant changes and capacity building if it is to accept the role of developing a Community Controlled Health Service for Cape York and to lead the implementation of the Cape York Regional Health Strategy. The Apunipima Cape York Health Council began a major round of consultations to present the Regional Health Strategy and the concept of community control to the communities.



Chairperson's Report *Continued*

In addition, the consultations also involved presenting ideas of governance and electoral reform for Apunipima Cape York Health Council so that it was able to meet the challenges of health reform.

In principle, the communities have welcomed the idea of community control with the qualifier that they do not want to see a decrease in service quality. In turn Queensland Health has indicated that it will support trialing health reform. Apunipima Cape York Health Council will ensure that the Communities are kept informed and involved in the decision making process. Community Control can deliver the improved health outcomes that are needed but only in partnership with the Communities and the main health service providers.

It is hoped that through the two initiatives that it will empower the community to become more involved in developing solutions and providing directions on how the health status of Cape York people can be addressed.

Apunipima Cape York Health Council is a community owned and controlled organisation and as such depend on the communities becoming more involved in their future, so that we can work on their behalf to achieved improved health outcomes for the people of Cape York.





Corporate Services

Anthony Yagmoor

As a community controlled health organisation, one of the biggest challenges faced by Corporate Services is ensuring that the health council continues to operate its finances and governance in responsible manner. A financially strong and accountable organisation is essential for Apunipima to continue to attract the funding for greatly needed programs.

It would be a mistake to think that our business is about dollars and cents whilst health in indigenous communities is in urgent need of reform, however, it is pleasing to report that Apunipima Cape York Health Council as received an unqualified audit for the 2004/2005 financial year. Since its incorporation in 1994/95, Apunipima has never received anything less.

Apunipima has continued to increase its net asset base to allow the organisation to take on financial existence outside of specific purpose funding. Apunipima's ability to carry on its charter into the future is further enhanced by the financial health of the organisation.

On a personal note, I have thoroughly enjoyed working with all the Members, the Governing Committee and the staff of Apunipima and hope that we do make a positive difference to the health outcomes of the people of Cape York.

The following table is a summary of the projects administered by Apunipima during the period.

PROJECT TITLE	FUNDING AGENCY
Family Capacity Building	Dept Family & Community Services
Wujal Wujal Jail / Mens Centre redevelopment	Dept Family & Community Services
Family Wellbeing	Dept of Health and Ageing
Health Council Operating Expenses & Projects	Dept of Health and Ageing
Staff Training Support	Dept of Health and Ageing
Indigenous Churches of Queensland	Environmental Protection Agency
FAS Awareness	Queensland Health
Healthy Women's Initiative	Queensland Health

**INDEPENDENT AUDIT REPORT (EXAMINER'S REPORT)
TO THE MEMBERS OF APUNIPIMA CAPE YORK HEALTH COLINCIL ABORIGINAL
CORPORATION**

Scope

We have audited the financial report of Apunipima Cape York Health Council Aboriginal Corporation for the financial year ended 30 June 2005, being a special purpose financial report consisting of the statement of financial performance, statement of financial position and accompanying notes set out on pages 3 to 13. The corporation's committee is responsible for the financial report and has determined that the accounting policies used and described in Note 1 to the financial statements are appropriate to meet the requirements of the Aboriginal Councils and Associations Act 1976 and the needs of the members. We have conducted an independent audit of this financial report in order to express an opinion on it to the members of the corporation. No opinion is expressed whether the accounting policies used, and described in Note 1, are appropriate to the needs of the members.

The financial report has been prepared for distribution to members for the purpose of fulfilling the committee's financial reporting requirements under the Aboriginal Councils and Associations Act 1976. We disclaim any assumption of responsibility for any reliance on this report or on the financial report to which it relates to any person other than the members, or for any purpose other than that for which it was prepared.

Our audit has been conducted in accordance with Australian Auditing Standards. Our procedures included examination, on a test basis, of evidence supporting the amounts and other disclosures in the financial report and the evaluation of significant accounting estimates. These procedures have been undertaken to form an opinion whether, in all material respects, the financial report is presented fairly in accordance with the accounting policies described in Note 1 to the financial statements, so as to present a view which is consistent with our understanding of the corporation's financial position and performance as represented by the results of its operations. These policies do not require the application of all Accounting Standards and other mandatory professional reporting requirements in Australia.

The audit opinion expressed in this report has been formed on the above basis.

Audit opinion

In our opinion:

- (a) the financial report of Apunipima Cape York Health Council Aboriginal Corporation:
 - (i) is properly drawn up so as to present fairly the corporation's financial position as at 30 June 2005 and its performance for the year ended on that date, in accordance with the accounting policies described in Note 1 to the financial statements; and
 - (ii) is based on proper accounts and records and is in agreement with those accounts and records; and
- (b) the governing committee and the corporation have complied with the obligations imposed by the Aboriginal Councils and Associations Act 1976, the regulations and the rules of the corporation.



KPMG



Graham Coonan
Partner

Cairns
25 October 2005



Community Development

David Sharkey

The role of the Community Development Unit is to develop partnership with communities by

- Supporting and enhancing the role of our Governing Committee
- Developing strong links with Cape York Community Councils and other representative groups for Cape York communities.
- To support capacity building within the communities through joint projects.

Much of the unit's time was spent working with Lockhart River and Aurukun Communities to establish a strong Health Action Group, with initial work also undertaken in Coen.

These groups now meet monthly in each community and will be undergoing further training leading up to their incorporation. The ultimate goal is for these groups, with the support of Apunipima Cape York Health Council, to one day manage their own health service within their own community. It is planned that this work will extend to all Cape York communities in the future.

Three months of my time this year was spent on a fifty percent Secondment to the Cape York Institute for Policy and Leadership as the Apunipima Representative on their Health Reform Team. This team of experts from the fields of Medicine, Planning, Community Engagement and Finance, completed the "Cape York Health Reform Project". This work will assist to guide the Cape York Community Control and Reform agenda over the coming years.

I also focused on assisting Cape York Communities to complete their Whole of Health Community Plans, most of which have now been endorsed by their Community Shire Councils. Following on from this I, participated as part of a three person team undertaking a desktop analysis to examine regional priorities, future needs and initiatives. This information was used as part of the Cape York Regional Health Strategy.

The Community Development Unit will continue to provide assistance to communities to form Health Action Groups, be well represented in the area of health at negotiation tables and Learning Circles. We look forward to working with all members of the communities and will continue to maintain and form strong working relations and partnerships with all stakeholders.



Family Development

Elizabeth Pearson

Foetal Alcohol Syndrome

Foetal Alcohol Awareness develops initiates and implements health literacy programs, in partnership with external service providers and communities about Foetal Alcohol Syndrome.

Family Wellbeing

Family Wellbeing brings together key regional indigenous organisations, community councils, government and the private sector to explore ways in which the relationships between these institutions and the people of Cape York to build their capacity to self determine their own developmental pathways.

Healthy Women's Initiative

The Healthy Women's Initiative project was undertaken to improve sexual health outcomes for indigenous women in Cape York by developing and implementing a model for integrated women's health services.

Reaching Out

This is a community development model, through various funding agencies, aimed at up-skilling community based workers and offering early recognition and prevention skills to the community by interacting with community individuals and families at risk.

Men's Health

The Men's Health team have developed action plans with community men that will steer and direct men's group development in Cape York communities.

*To obtain more information on these programs please -
visit our website: www.apunipima.org.au
or email us at: apunipima@apunipima.org.au*



