

© National Aboriginal and Torres Strait Islander Children's Day

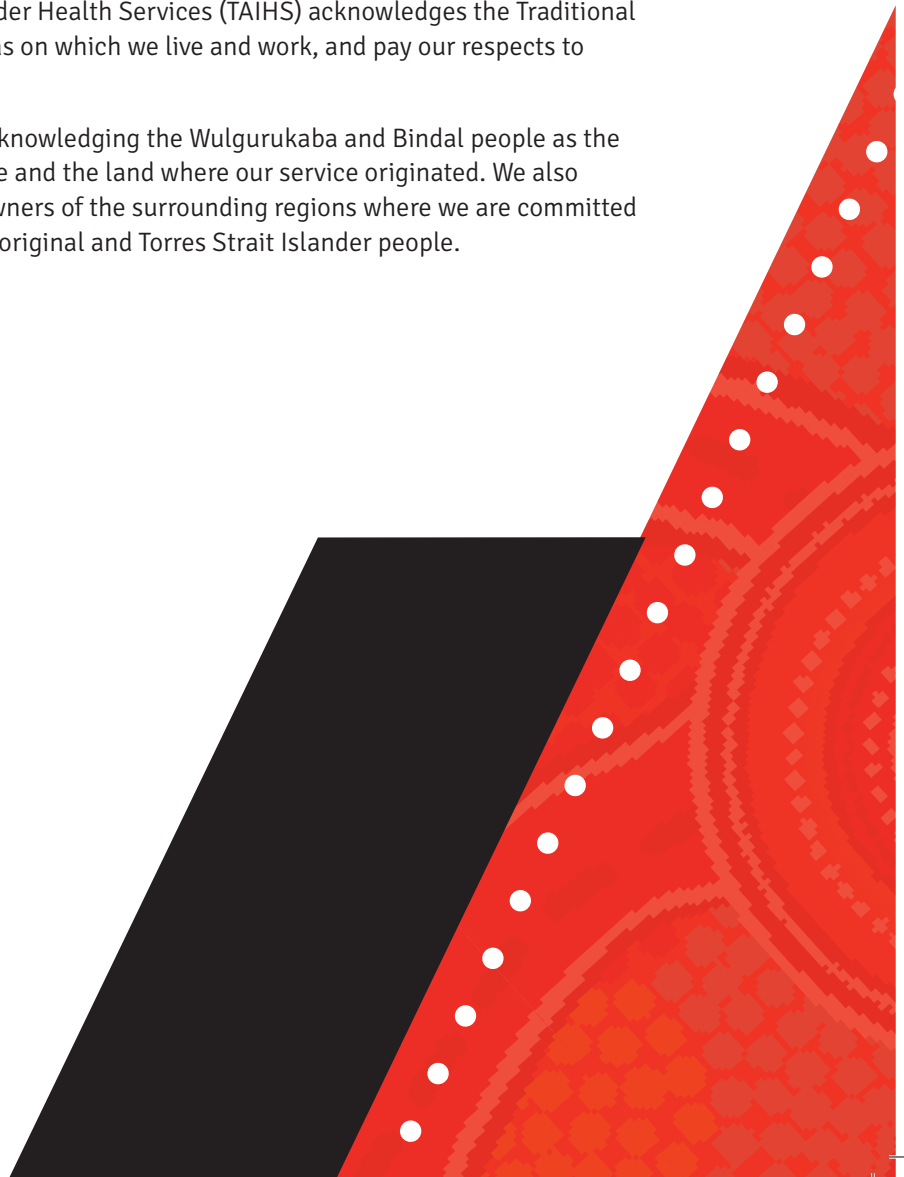


Townsville Aboriginal and Islander Health Service Annual Report 2018–19.
Published by Townsville Aboriginal and Islander Health Service (TAIHS), November 2019.
TAIHS acknowledges the financial and other support of the Australian and Queensland Governments.

Acknowledgement

Townsville Aboriginal and Islander Health Services (TAIHS) acknowledges the Traditional Custodians of the lands and seas on which we live and work, and pay our respects to Elders past and present.

TAIHS remains committed to acknowledging the Wulgurukaba and Bindal people as the Traditional Owners of Townsville and the land where our service originated. We also acknowledge the Traditional Owners of the surrounding regions where we are committed to delivering quality care for Aboriginal and Torres Strait Islander people.



Our history

The Townsville Aboriginal and Islanders Health Services (TAIHS) was established in 1974. At that time, it was the fourth Aboriginal community controlled health service (ACCHS) established in Australia, and was part of the wider move for Aboriginal and Torres Strait Islander communities to take control of the delivery of health care services in their communities.

Today, our strategic direction is determined by a Board of Directors comprising Aboriginal and Torres Strait Islander people from across the region. TAIHS's organisational mission and vision statements demonstrate a commitment to providing holistic and culturally appropriate health services, underpinned by a philosophy of community participation, and a strong focus on care and service coordination.





Our vision

We strive to provide a truly comprehensive model of care that responds to the physical, social, emotional, cultural and spiritual needs of our people.

Our mission

Excellence in the delivery of culturally appropriate services to support Aboriginal and Torres Strait Islander people to achieve better health and wellbeing outcomes.

Our values

TAIHS is committed to working in accordance with the following values to achieve our strategic vision:

- Working in partnership with our community to support empowerment and self-determination
- Adopting a culturally appropriate and holistic approach to addressing the health and wellbeing needs of our clients
- Providing high quality, evidence based care to achieve the best outcomes for our clients
- Striving for levels of excellence that meet and exceed community expectations
- Being accountable to our stakeholders by delivering on our commitments and maintaining the highest professional standards in service delivery and ethical practice
- Developing a learning organisation that supports the development of staff, teamwork and embraces positive change
- Upholding our organisational integrity- we value honesty, professionalism and respect in all that we do

Our Board of Directors



Michael Illin
Chairperson



Liela Murison
Deputy Chairperson



Coralie Cassady
Director



Esther Illin
Secretary



Desmond Cowburn
Director



Eva Kennedy
Director



Leone Malamoo
Director





Chief Executive Officer's Report

As we reach the end of another busy year at TAIHS, I continue to be impressed by the commitment everyone at TAIHS has made to taking on new challenges and new programs, and continuing to look at ways to improve services and ways of doing business. It has been another challenging year of audits, accreditations, evaluations and reviews. Everyone's openness to participating in these processes, and giving frank and open feedback about what we do well – and what we can do better – is what allows TAIHS to keep growing and improving.

Our Award-winning Primary Health Services have continued to expand the range of allied and specialist health services they can provide to the community, working closely with a wide range of health partners. A new Sexual Health program was funded this financial year, and TAIHS has secured funding to continue this program into the 2020 financial year. The new Sexual Health team has been working in partnership with Townsville Sexual Health services to increase education and screenings within community.

In Children and Families, we saw our Early Childhood House, Yamani Meta, reach its first birthday – with a lot to celebrate. The new Family Participation Program – which replaced the Recognised Entity from January 2019 – offers a new way of doing business with Child Safety, where families lead the decision making process. Our Foster & Kinship Care Service continued to with a number of staff in both Family Participation and Family Wellbeing attending training in the Family-Led Decision Making model.

Our Youth & Accommodation Services have continued to be a significant area of growth for the corporation, with workforce numbers in this area catching up to Primary Health Care. The Queensland Government renewed its commitment to funding The Lighthouse – the After Hours Youth Diversionary Service established in March 2017. Funding for the service was increased, allowing us to enter into partnership with Community Gro to establish a Youth Drop-in Centre in the Upper Ross. Our Accommodation Services went through a restructure, and adult accommodation services moved to Mundinburra.

I'd like to thank the TAIHS Board and all our amazing staff for another great year at TAIHS.



Dr Kath Anderson,
Chief Executive Officer

Chairperson's Report

As a new Chairperson, I have certainly learned a lot this year, and would like to thank my fellow board members, our Financial and Audit (FAR) Committee, and the management and staff at TAIHS for all their advice and support throughout the year.

I was pleased to be elected to the board of the Queensland Aboriginal and Islander Health Council (QAIHC) this year, to represent the North and North West Queensland region. Our involvement with our peak bodies is important to partnership-building and advocacy work across the region.

This was another strong financial year for TAIHS, and the organisation has continued to grow. To ensure that the workforce structure continues to meet the company's Strategic Objectives, the board have approved two significant workforce reviews this year: the Organisational Review undertaken by QAIHC, and the Health Workforce and Clinical Review, undertaken by the Institute for Urban Indigenous Health (IUIH).

While the IUIH review looks specifically at health workforce and clinical processes – to identify any gaps / areas for improvement – the QAIHC review is organisation-wide, and follows on from the last organisational review in 2016. The areas in scope for the QAIHC review included: Governance (Board); Financial Management; Corporate Governance (Management); Human Resources and Service Delivery. We will continue implementing the recommendations from these reviews over the 2019/20 financial years.

TAIHS plans to commence its major building project in Garbutt in the upcoming 2019/20 financial year, pending council approval of plans. Under the proposed development, our Gordon Street and Peel Street properties will be amalgamated, and three new buildings will be constructed. In January of this year, TAIHS moved the residents of Peel Street to a new facility at Camp Street, Mundingburra, in preparation for the proposed building work. Once the development is completed, all TAIHS services – except residential services and satellite clinics – will be based at Garbutt.

We were proud to see our early childhood program - Yamani Meta – win the QATSICPP Award for Innovation in the sector this year. The House celebrates its first birthday in 2019, and has had demonstrated success in supporting families with young children. Like all of Community Services programs, Yamani Meta is a good example of what makes TAIHS “More than a Health Service”.

Thank you to the members for your continued support of TAIHS over the year.



**Michael Illin,
Chairperson**



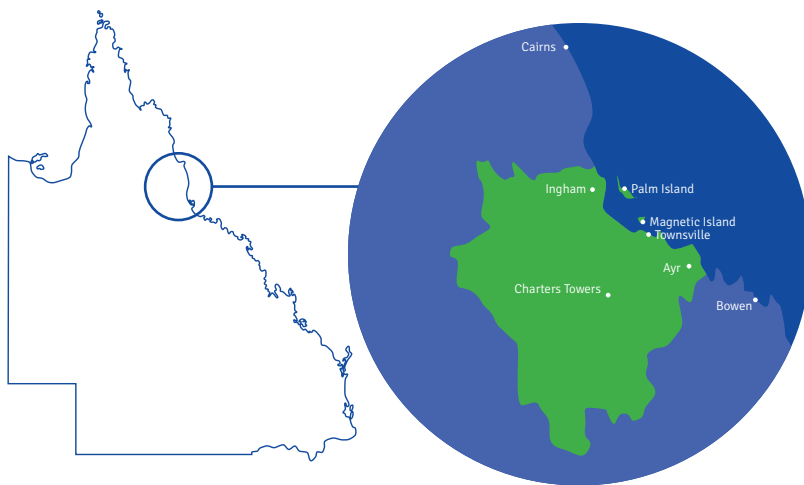
Primary Health

Townsville Regional Service Area

Aboriginal and Torres Strait Islander Patients seen at TAIHS clinics by location

Service Area	Total ATSI population in local govt. area	Number of TAIHS patients by postcode	% of ATSI population that are TAIHS patients
Townsville/Thuringowa	12,035	5,782	48.04%
Charters Towers	892	400	44.84%
Ingham (Hinchinbrook)	664	302	45.48%
Home Hill (Burdekin)	979	188	19.20%
Totals	14,570	6,672	45.79%

NB: Home Hill clinic only functioned 1 day per week in 2018. Increased to 2 days per week in 2019.



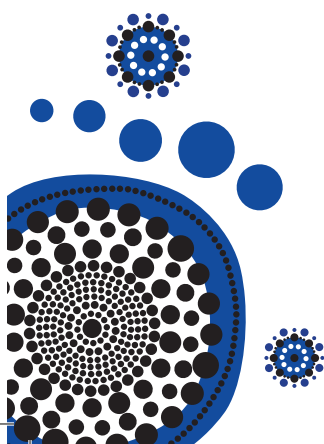
Principles of comprehensive Primary Health Care

- Self-determination
- Population health
- Socio-economic drivers that inform the development of systems of care
- Holistic, individualised assessment and care planning
- Equality of health outcomes for Aboriginal and Torres Strait Islander peoples
- Community directed service development
- Community engagement and participation
- Partnerships that meet client needs and contribute to the achievement of positive client outcomes



Significant Achievements

In 2017, TAIHS established a co-located mental health service at Gorden Street, in partnership with the Townsville Hospital and Health Service. This partnership has significantly lowered patient risk and the TAIHS SEWB Model of Care continues to expand which includes General Counselling, Social Work, AOD Counselling, Early Childhood Counselling, Early Childhood Development and Therapies, Financial Counselling services, Complex Care Coordination and Mental Health Nursing Services).



The Gorden Street clinic has expanded its specialist and allied health services, with services now including:

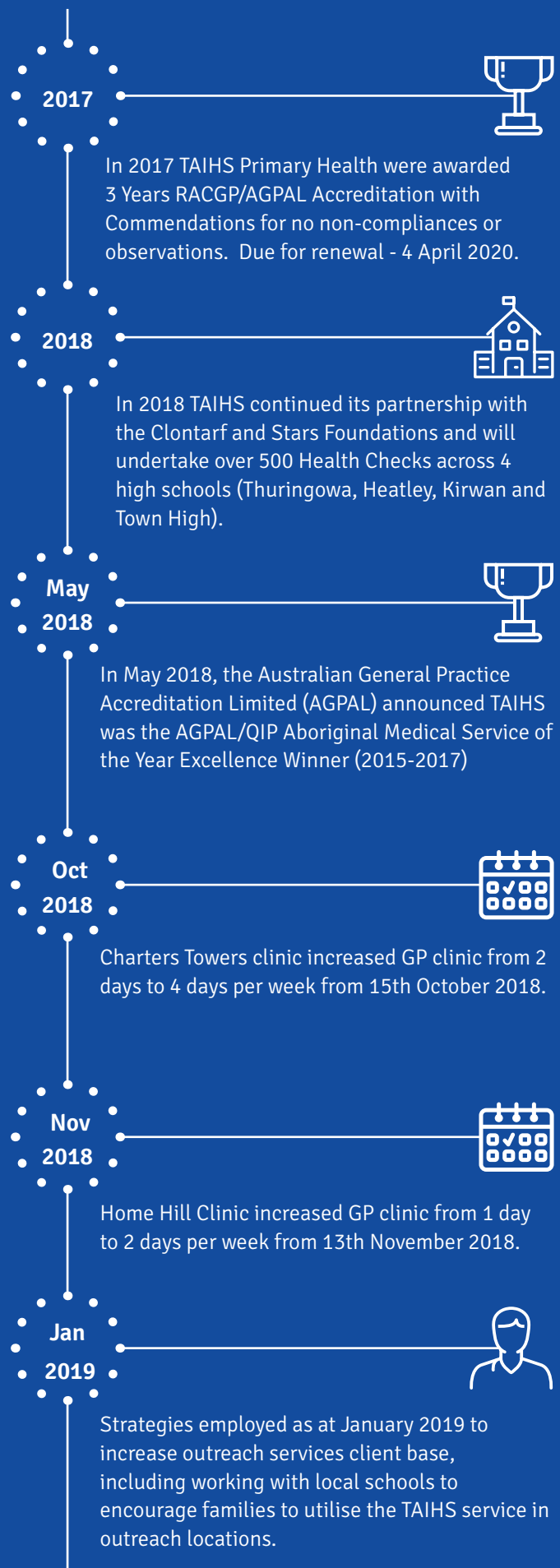
Specialists:

- Endocrinologist
- Nephrologist
- Paediatrician
- Cardiologist/
Sonographer
- Skin Doctor
- Pain Specialist

Allied Health:

- Podiatrist
- Optometrist
- Audiologist
- Dietician
- Diabetic Educator
- Occupational Therapy
- Speech Pathology
- Physiotherapist
- NDIS Registration
and Care Coordination
Services
- Social Work/Counselling

Primary Health continues to be involved in a number of regional and National research projects focused on Continuous Quality Improvement (CQI) in line with National Key Performance Indicators and the National CQI Framework.



Key Actions + Challenges

Implement the Syphilis Enhance Response working in partnership with Queensland Health, Townsville Public Health Unit, QAIHC and the Commonwealth Department of Health to:

- Increase screening and point of case testing (target group: 15-40 years and antenatal patients);
- Including sexual health screening/testing as part of the patient Annual Health Check
- Focussed management of Cardiovascular Disease and the establishment of CVD Care Coordination Nursing portfolio
- Review of Asthma and COPD Care Pathways and the establishment of Respiratory Care Coordination Nursing portfolios
- Increase community engagement activities in Ingham to encourage community access to TAIHS primary health services
- Expansion of specialised Social and Emotional Wellbeing Complex Care Services and the establishment of Mental Health Care Coordination Nursing portfolios and expansion of social work services
- Ensure positive test results are treated and followed up directly (including full set of baseline STI tests, treatment, education/health literacy, provision of sexual health aids, contact tracing and repeat testing of 'at risk' patients)
- Integration of Early Child Assessment and Development Services across SEWB, Maternal and Child Health and Family Wellbeing services
- Build on existing Continuous Quality Improvement Strategy to include internal clinical audits with a focus on opportunities for improvement

Primary Health Care has partnered with Brien Holden Vision to coordinate the new program "Provision of Eye Health Equipment & Training". This will support the increased rate of diabetes retinal screening and help build capacity to provide primary eye care and further support referral pathways and practices to comprehensive eye examinations for our patients. Retinal screening will commence in Home Hill and Charters Towers by the end of the year.

Maternal and Child Health is involved with INFLATE Clinical Trial Research with Western University. The goal of this INFLATE Trial is to see if nasal balloon auto-inflation is effective in treating Otitis media with effusion (OME) in Aboriginal and Torres Strait Islander children aged 3-16 years.

Our Aboriginal and Torres Strait Islander Health Professionals travelled to Brisbane to take part in the Cultural Mentor Workshop organised by Remote Vocational Training Scheme and have now commenced cultural mentoring with our Registrars.

Heath Report Card

CHILD IMMUNISATIONS

Child (Ages 1,2,5) nKPI essential Immunisations at Last Birthday, Active Patients

77%

% of regular clients
aged 12 months to
<24 months that are
fully immunised

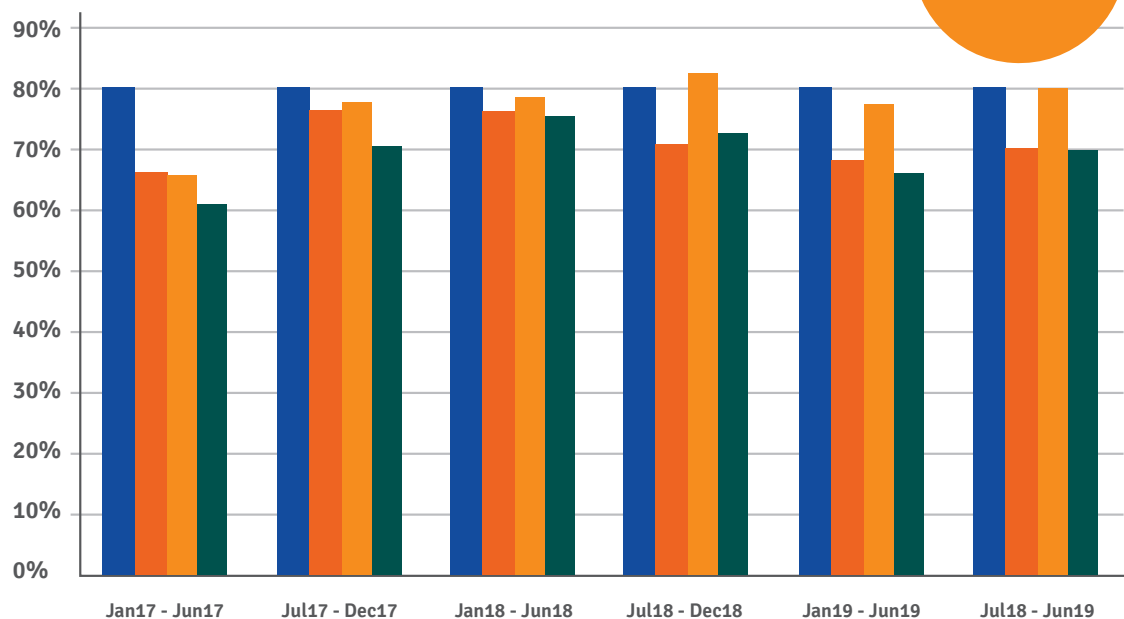
79%

% of regular clients
aged 24 months to
<36 months that are
fully immunised

76%

% of regular clients
aged 60 months to
<72 months that are
fully immunised

BENCHMARK
80%

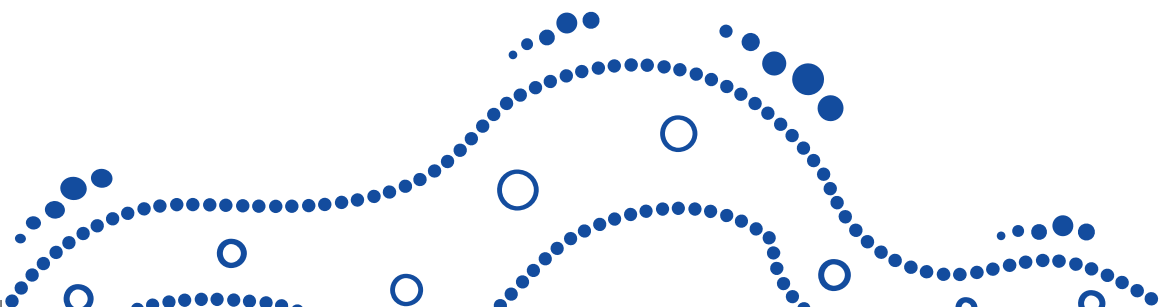


■ Benchmark & Indigenous children fully immunised

■ % of regular clients aged 12 months to <24 months that are fully immunised

■ % of regular clients aged 24 months to <36 months that are fully immunised

■ % of regular clients aged 60 months to <72 months that are fully immunised





MBS 715 ASSESSMENTS

715's completed by age group

47%

% of regular clients
aged 0-4 years with
715 claimed

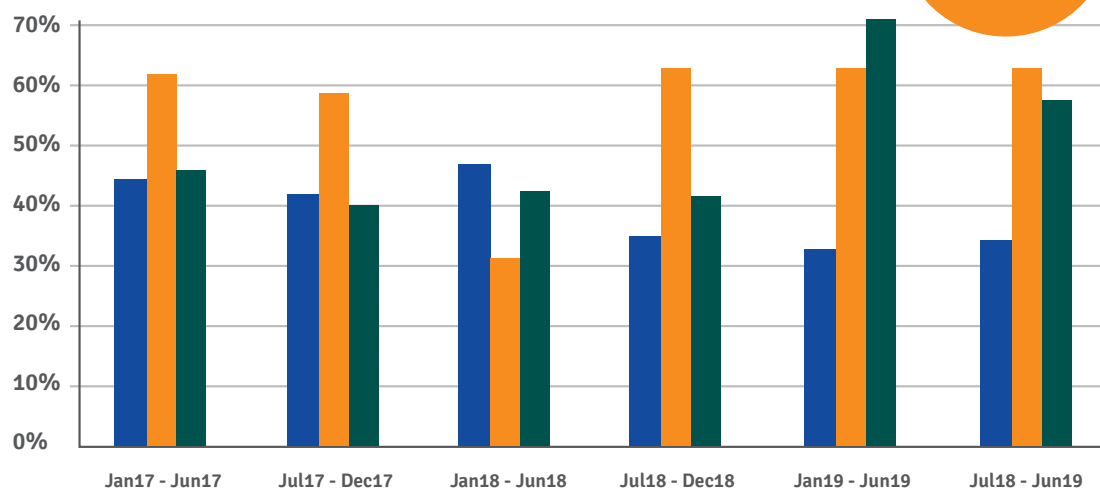
79%

% of regular clients
aged 24-64 years
with 715 claimed

76%

% of regular clients
aged 65 years + with
715 claimed

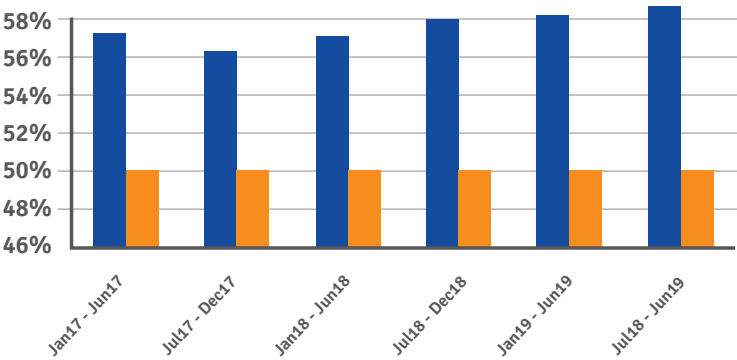
**BENCHMARK
43%**



■ % of regular clients aged 0-4 years with 715 claimed

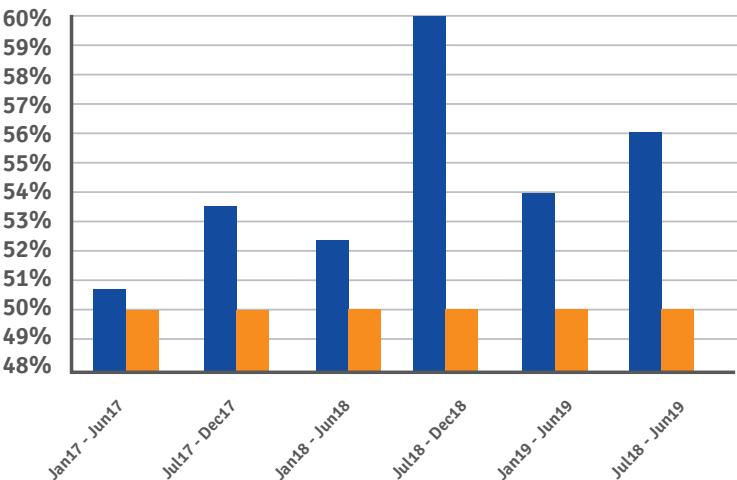
■ % of regular clients aged 65+ years with 715 claimed

■ % of regular clients aged 24-64 years with 715 claimed



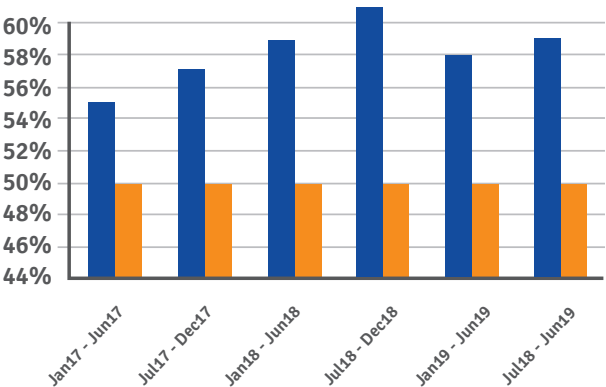
GPMPs T2D

- % of regular clients aged 0-4 years with 715 claimed
- % of regular clients aged 24-64 years with 715 claimed



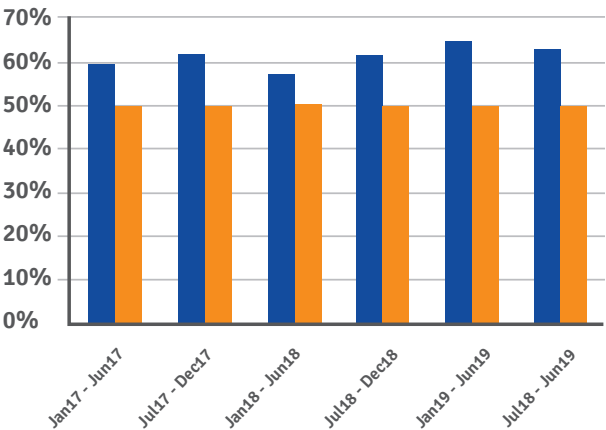
GPMPs COPD

- % of GPMP Item 721 claimed for regular COPD clients
- Benchmark



GPMPs Cardiovascular Disease

- % of GPMP Item 721 claimed for regular CKD clients
- Benchmark %



GPMPs CKD

- % of GPMP Item 721 claimed for regular CKD clients
- Benchmark %



Youth + Accommodation

Lighthouse - Turnbull Street

Funded by Department Of Child Safety, Youth and Women - expires June 2023

The Lighthouse is designed to support 10 to 17 year olds who are disengaged and/or at risk of engaging in at risk behaviours and criminal activity. The Lighthouse offers a safe place to form connections, including cultural connections.

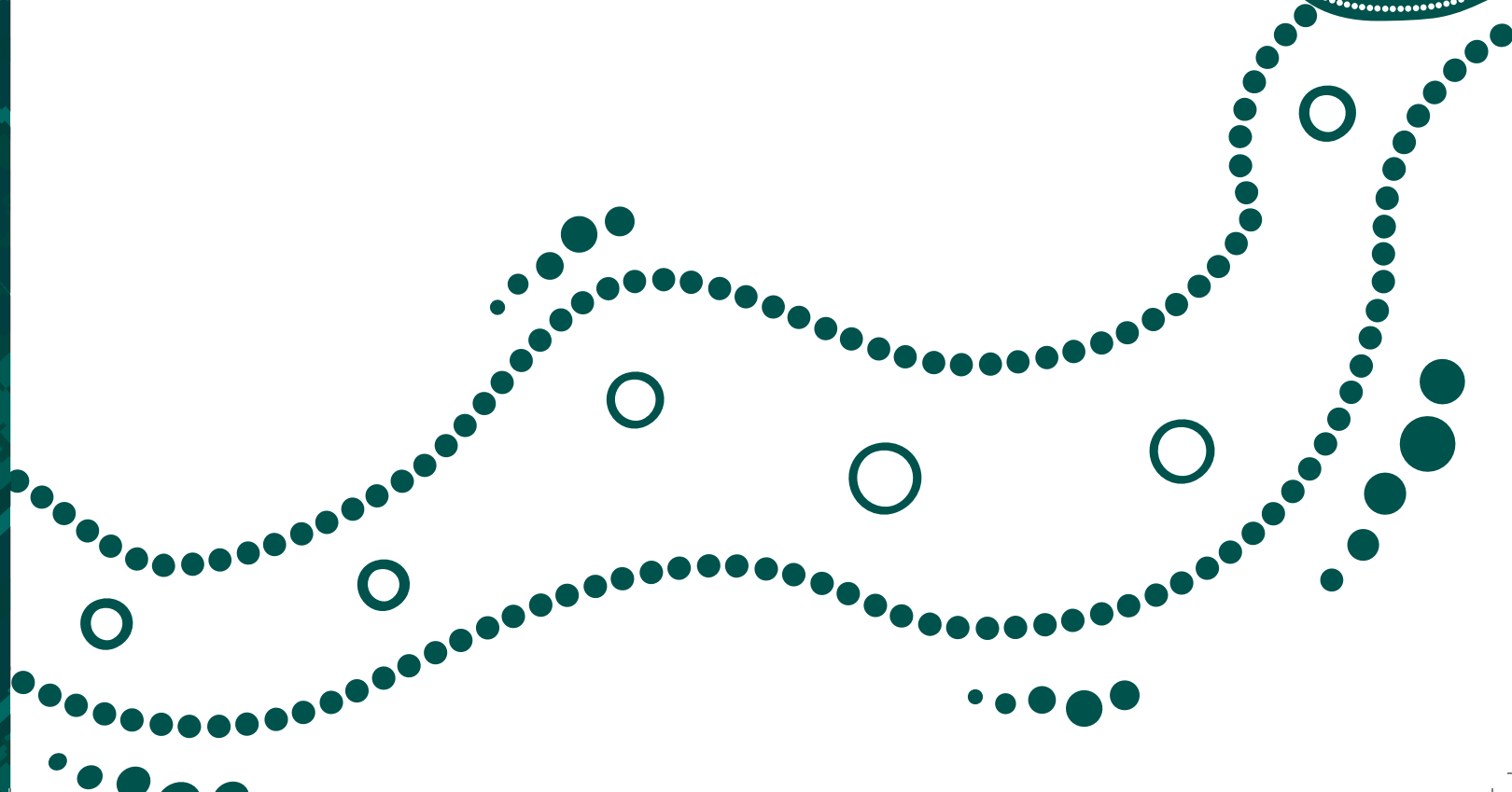
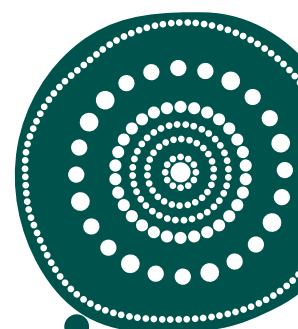
1 July 2018 – 29 June 2019



7049
DROP-INS



62
SLEEP-INS



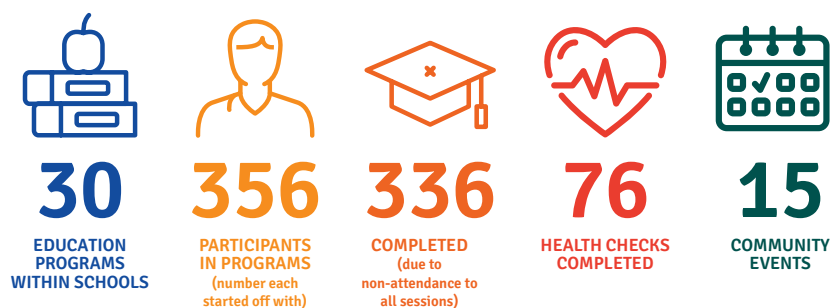
Peel Street

Deadly Choices – Peel Street

Funded by Institute for urban Indigenous Health Limited - expires June 2020

DC is a Health Promotion Program empowering Aboriginal and Torres Strait Islander peoples to make healthy choices for themselves and their families – to stop smoking, to eat good food and exercise daily.

1 July 2018 – 29 June 2019



Youth AOD and Mental Health Services – Peel Street

Funded by North Queensland Primary Health Network - expires June 2020

The Youth Mental Health Service supports young people aged 0-25 years of age providing culturally appropriate individual and group psychological and therapeutic services.

1 July 2018 – 29 June 2019



TAIHS Youth Support Services (TYSS) - Peel Street

Funded by Dept. Of Child Safety, Youth and Women - expires March 2021

TYSS provides general youth support services to young people aged 8-21 including the provision of information, referral, advice, assessment and case management.

1 July 18 – 29 June 19



Hugh Street

Supported Community Accommodation (SCA) - Hugh St

Funded by Department of Child Safety, Youth and Women – expires October 2019

The SCA is a service for young people in the Youth Justice system who are at risk of remand in custody, who have been granted bail with the condition of residing at the Supervised Community Accommodation Service. The majority of clients will be 14 and older however there may be occasions where young people of the age of 10 that will reside at the SCA.

1 July 18 – 29 June 19


38
CLIENTS
REFERRED


682
NIGHTS
PROVIDED

Bail Support Service (BSS) - Hugh St

Funded by Dept. Of Child Safety, Youth and Women - expires October 2019

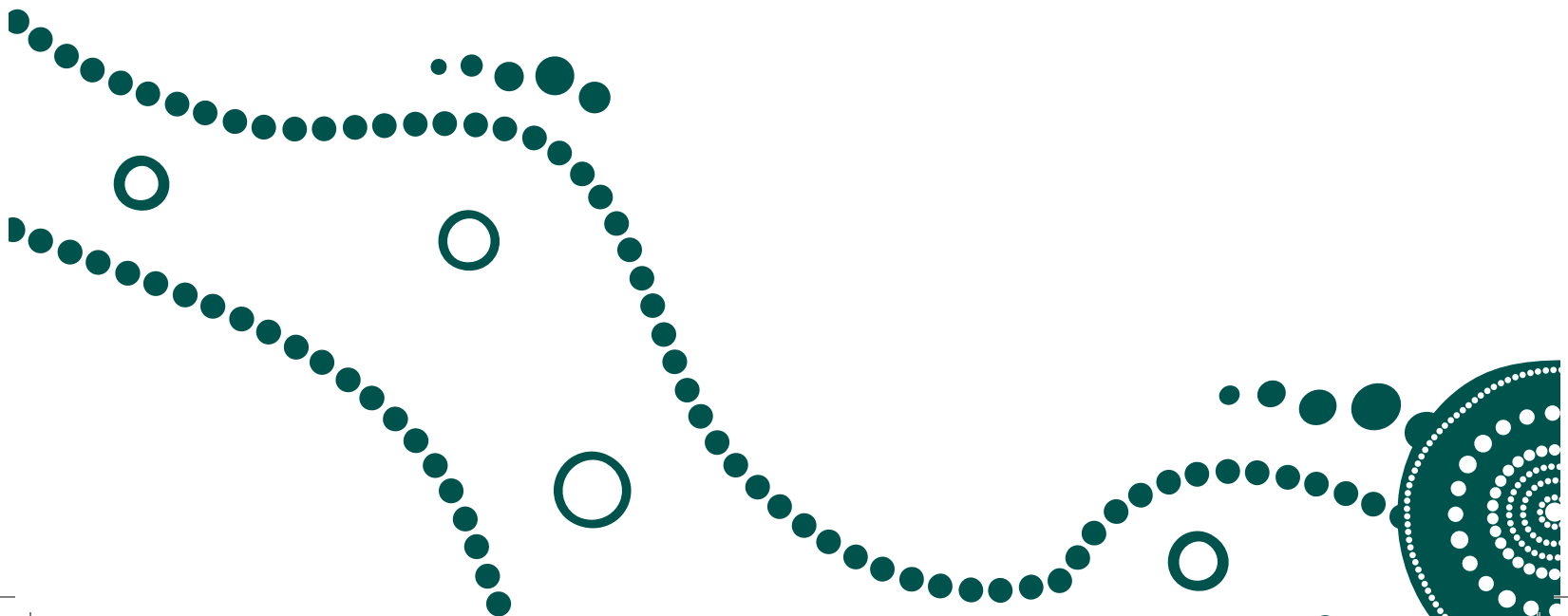
The bail support service provides a holistic response to addressing the risk factors that have contributed to a young person's involvement in the youth justice system.

1st December 2018– 29th June 2019


56
REFERRALS
RECEIVED


51
ACTIVE
CLIENTS
(30 TAIHS24MA)


51
FAMILIES
ENGAGED



Ferdy's Haven, Palm Island

Funded by Department of Prime Minister & Cabinet – expires June 2020

To promote individual and community wellbeing and reduce substance abuse through the provision of culturally appropriate AOD prevention, education, treatment, rehabilitation and aftercare services on Palm Island.



84

REFERRALS
RECEIVED



49

ACTIVE CLIENTS



817

OVERNIGHT STAYS

Youth Service – Palm Island

Funded by the Department of Child Safety, Youth & Women - Expires 30th June 2020

The TAIHS Youth Service on Palm Island is aimed to support Aboriginal and Torres Strait Islander males on Palm Island between the ages of 7 and 13 years of age to address the risk factors that have contributed to them coming to the attention of Police and Youth Justice.



7

REFERRALS
RECEIVED



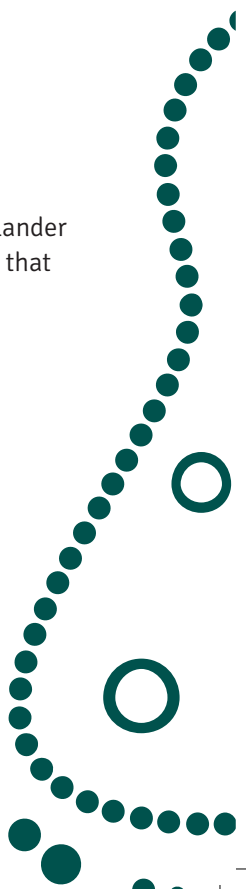
7

ACTIVE
CLIENTS



5

FAMILIES
ENGAGED



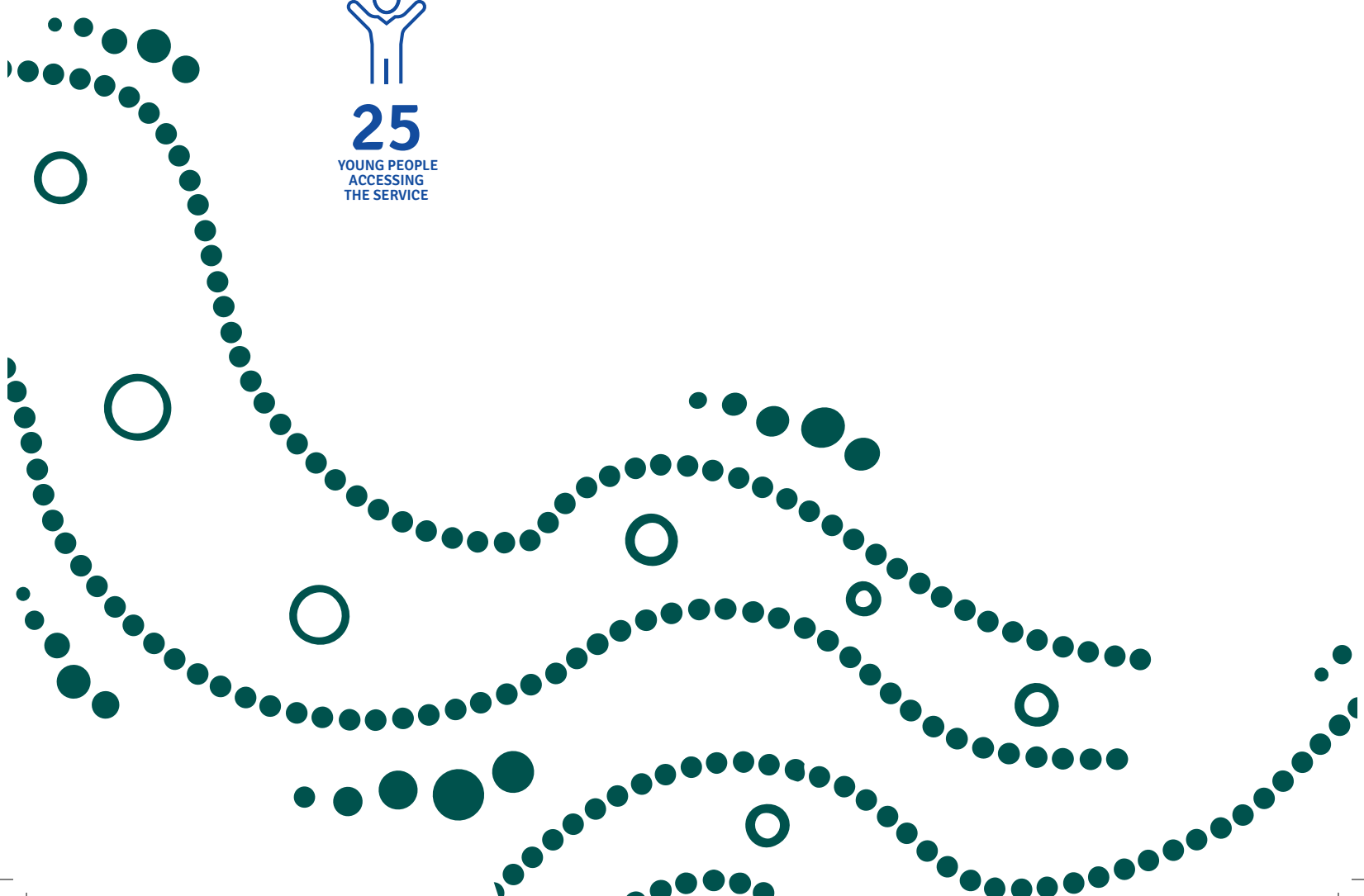
The Upper Ross Youth Hub

TAIHS has subcontracted Community Gro to provide a “drop in” centre, located in Upper Ross to increase diversionary options and to reduce young people held on remand in Watch houses or Detention.

The Centre opened on the 26th August 2019. The staff consists of a Coordinator and a male and female youth workers.

The centre will be operational 5 days a week - Thursday to Monday, 3 – 11 pm, and will grow 7 nights a week.

Engagement and Structured programs will be run each night.



Supported Accommodation Services (SHS)

Funded by Dept Housing and Public Works - expires June 2023

TAIHS Adult crisis Accommodation Service has seventeen self-contained units to reduce homelessness within our community. Staff assist all clients with health and wellbeing needs and work towards them becoming more self-determined and maintaining long term sustainable housing.

TAIHS Youth Shelter provides crisis accommodation for up to 6 for all young people aged between 16-21 years of age no matter their circumstances or background.

1 July 2018 to 29th June 2019


56
ADULT CLIENTS


62
YOUTH SHELTER
CLIENTS

New SHS Structure

- One manager over both Adult and Youth Accommodation Services
- New position of Practice Leader
- Case Workers – Day/Evening
- Night Worker – active shift at each Site



Children + Families

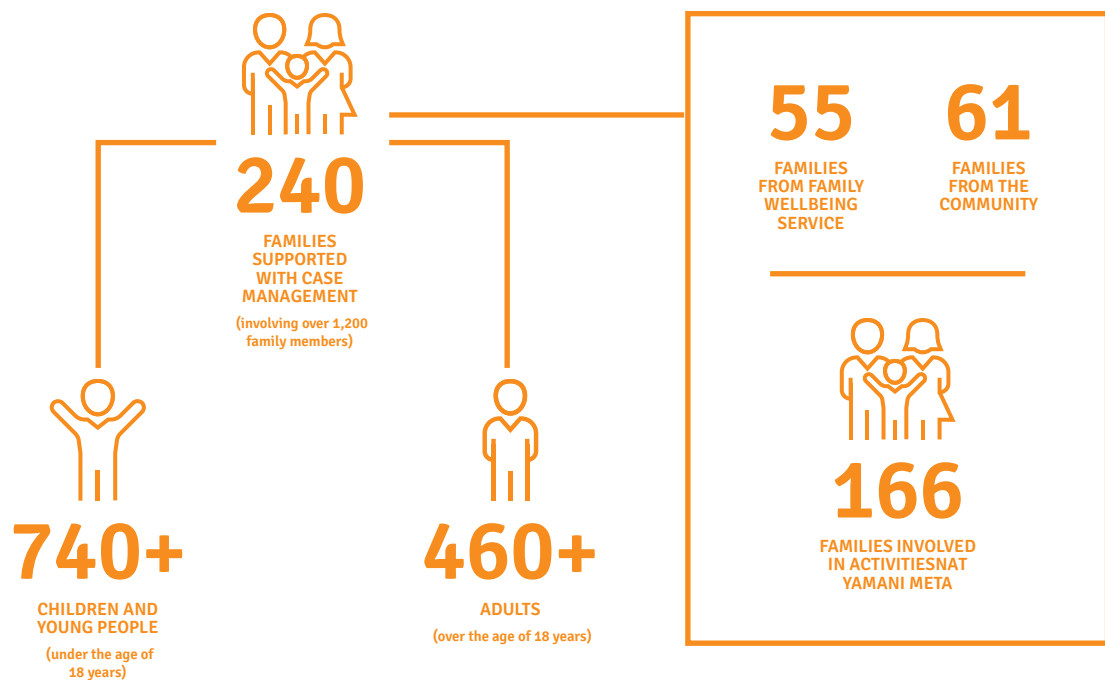
The Family Wellbeing Service

Our Family Wellbeing Service is now in its 3rd year of operation

Family Wellbeing House, Yamani Meta, has been open for over 1 year

It provides a child-centred and home-like environment for the Family Wellbeing Service to co-facilitate a range of programs in a culturally-safe space that promotes pride in culture.

1 July 2018 to 30th June 2019



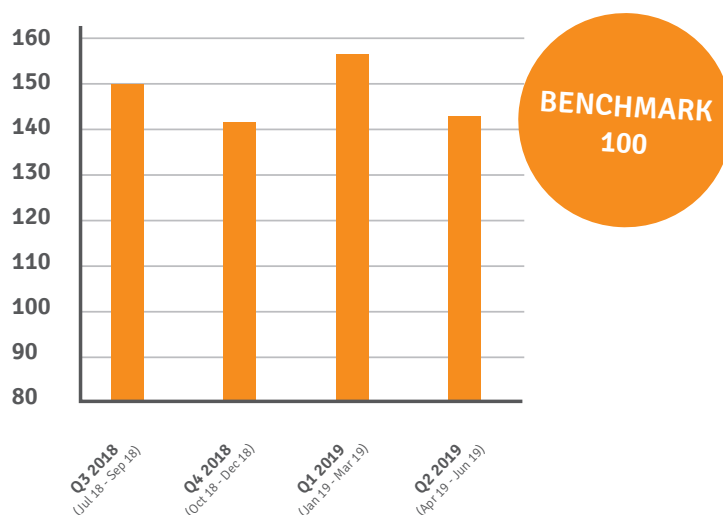
TAIHS Foster + Kinship Service

The TAIHS Foster & Kinship Care service is dedicated in ensuring Aboriginal and Torres Strait Islander children in out of home care remain within their own kinship networks or in a family placement with Aboriginal or Torres Strait Islander carers until it is safe to return to their parents home.

Through the hard work of the small but deadly team 7.5 FTE we are able to ensure that children remain connected to their families, community and culture and do not end up lost in the 'system' with non indigenous carers.

We are funded to provide 100 placements for children and young people 0-18 but due to the dedicated staff and our wonderful carers we have been able to support many children above this quota in the 18/19 financial year.

Number of children placed with TAIHS carers'.





The Family Participation Program

The TAIHS Family Participation Program (FPP) seeks to enable Aboriginal and Torres Strait Islander children, parents and families to lead significant decision making processes regarding child protection matters that affect them.

The FPP is a new service that has been taking Child Safety referrals and family self-referrals since 1 January 2019.

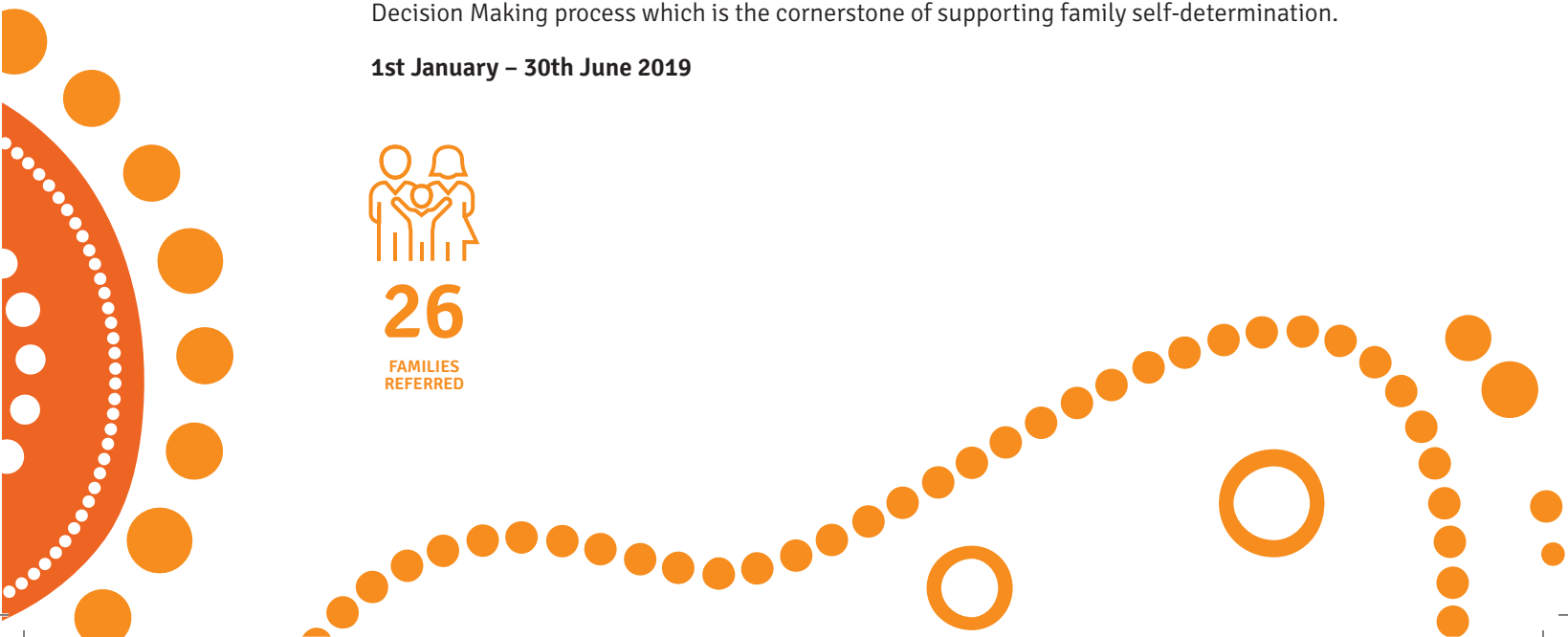
Since January 2019, FPP staff have undertaken extensive training in how to support Family-Led Decision Making process which is the cornerstone of supporting family self-determination.

1st January – 30th June 2019



26

FAMILIES
REFERRED





Corporate



Operating Expenses



TAIHS' estimated income for 2019/20 is \$26,575,902

83%

Our largest source of income continues to be grant funding, which accounts for approximately 83% of our income.

1.6%

Rental income and guest contributions account for approximately 1.6%

Other Income: Including GP registrar reimbursements – is also raised.

12%

Medicare and Practice Incentive Payments, generated by the health services, account for approximately 12%



Expansion Plans

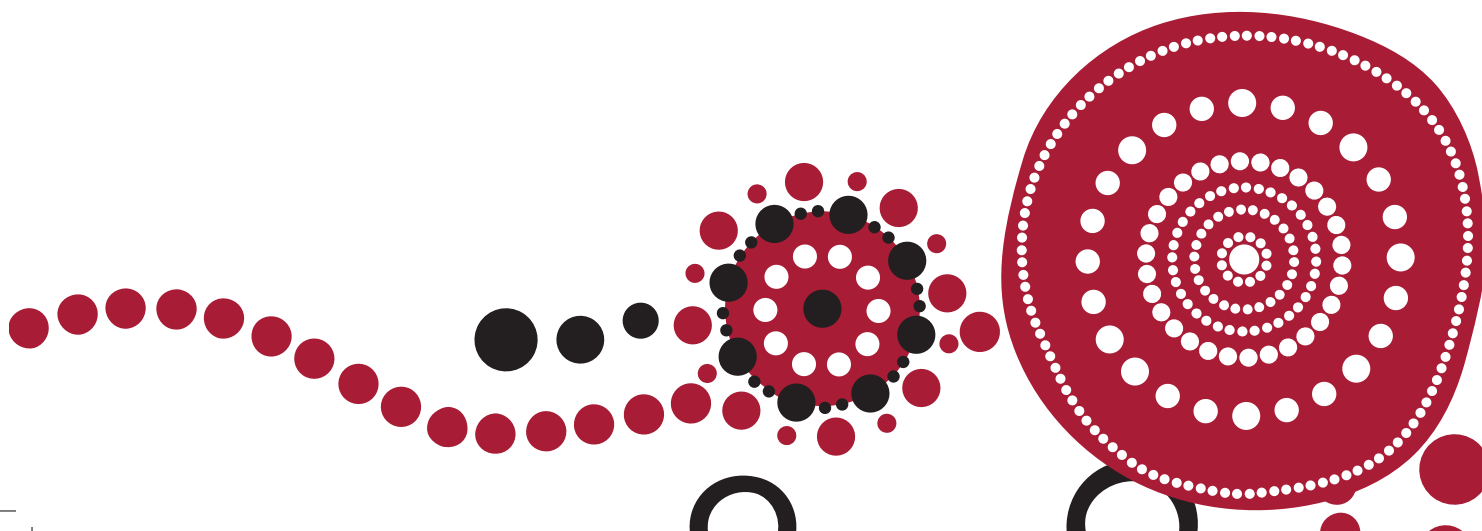
In August 2016 TAIHS purchased the property at 10 Peel Street for \$1.88 million, to support further development. The need for further development was identified in response to the continued growth of TAIHS workforce and services.

The property is adjacent to our Gordon Street Medical Centre in Garbutt, and under the proposed development these two properties will be amalgamated.

TAIHS was providing accommodation services from Peel Street until January 2019 – when these services relocated to Camp Street, Mundingburra.

We will commence building once we have received approval from Townsville City Council to commence building.

Once the development is completed, all TAIHS services – except residential services and satellite clinics – will be based at Garbutt.



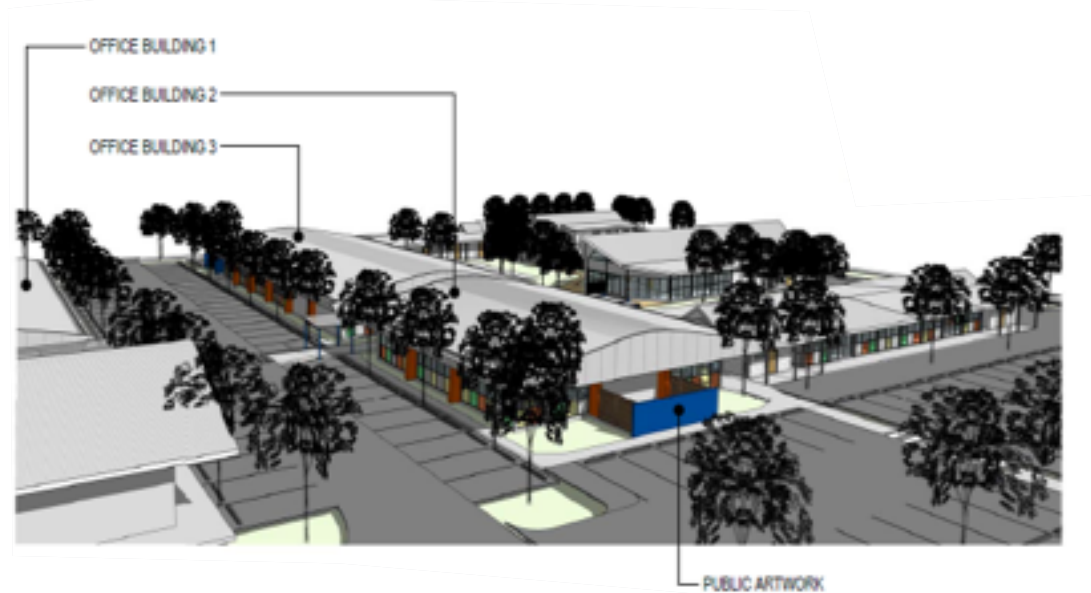
Aerial View North-West Corner



Aerial View South-West Corner



Aerial View South



Workforce

In 2019 TAIHS engaged the Institute for Urban Indigenous Health (IUIH) to undertake a health workforce review

In 2019 TAIHS also engaged the Queensland Aboriginal and Islander Health Council (QAIHC) to undertake an organisational review.

While the IUIH review looks specifically at health workforce and clinical processes – to identify any gaps / areas for improvement – the QAIHC review is organisation-wide, and follows on from the last organisational review in 2016.

The areas in scope for the QAIHC review included:

- Governance (Board)
- Financial
- Corporate Governance (Management)
- Human Resources
- Service Delivery

We will implementing the recommendations from these reviews by the end of 2019.

Where our staff work



CORPORATE
27/11%



**CHILDREN
& FAMILIES**
38/16%



**YOUTH &
ACCOMODATION**
82/35%



**PRIMARY
HEALTH**
88/38%



TAIHS Board of Directors

Chief Executive Officer

Primary Health

**Executive Manager
Primary Health
Care**

PHC CLINIC SERVICES

Transport
Reception & Admin
Health Workers
Nursing
Cadets & Trainees
Client Outreach Services
Diabetic Education
Allied Health
Chronic Disease Care
Ancillary Staff

Maternal & Child Health
New Directions

OUTREACH SERVICES

Heatley Clinic
Homehill Clinic
Ingham Clinic
Charters Towers Clinic
Abergowrie Clinic

Social & Emotional
Wellbeing Counselling
QIDDIP

PHC Organisational
Development Officer

**Senior Medical
Officer**

Medical Practitioners
Medical Registrars

Nurse Manager

Visiting Specialists

DENTAL SERVICES

(Contracted)
Garbutt Clinic Outreach
Locations

Cate's Chemist
QLD Health

Youth & Accommodation

**Executive Manager Youth &
Accommodation**

Youth Services
Health Promotion (Deadly Choices)
Youth Shelter
TAIHS Youth Support Service
Afterhours Youth Diversionary
Service

Supervised Community
Accommodation Service

Accommodation Services

Y&A Organisational
Development Officer

Ferdy's Haven
Alcohol Rehabilitation
Aboriginal Corporation

Families & Children

**Executive Manager Families &
Children**

Family Participation Program

Family Wellbeing Service
Prevention
Intervention
Early Childhood Wellbeing

Foster & Kinship Service

CS Organisational
Development Officer

Corporate Services

Chief Financial Officer

Finance - Budgets
Accounts
Payroll

Business Services
Asset Management
Information Technology
Communications & Data
Assistant Maintenance
Officer Trainee
Cleaning

Human Resources
Recruitment
Contracts
Staff Support

Training & Professional Development
Traineeships
Cadetships
School Based Training

Assistant to CEO





Financials



Townsville Aboriginal and Torres Strait Islander Corporation for Health Services

Trading As

**TOWNSVILLE ABORIGINAL & ISLANDER HEALTH SERVICE
ABN 66 010 113 603**

Annual Report - 30 June 2019

Director's report

30 June 2019

The directors present their report, together with the financial statements, on the corporation for the year ended 30 June 2019.

Directors

The following persons were directors of the corporation during the whole of the financial year and up to the date of this report, unless otherwise stated:

Michael Illin	(elected at AGM 13/02/2019)
Liela Murison	(elected at AGM 13/02/2019)
Leone Malamoo	(elected at AGM 13/02/2019)
Coralie Cassady	(elected at AGM 13/02/2019)
Esther Illin	(re-elected at AGM 13/02/2019)
Desmond Cowburn	
Eva Kennedy	
Morris Cloudy	(term ended at AGM 13/02/2019)
Randall Ross	(term ended at AGM 13/02/2019)
Sawere Reuben	(passed 08/04/2019)

Vision

TAIHS... More than a Health Service

We strive to provide a truly comprehensive model of care that responds to the physical, social, emotional, cultural and spiritual needs of our people.

Mission

Excellence in the delivery of culturally appropriate services to support Aboriginal and Torres Strait Islander people to achieve better health and wellbeing outcomes.

Values

TAIHS is committed to working in accordance with the following values to achieve our strategic vision:

- Working in partnership with our community to support empowerment and self-determination
- Adopting a culturally appropriate and holistic approach to addressing the health and wellbeing needs of our clients
- Providing high quality, evidence based care to achieve the best outcomes for our clients
- Striving for levels of excellence that meet and exceed community expectations
- Being accountable to our stakeholders by delivering on our commitments and maintaining the highest professional standards in service delivery and ethical practice
- Developing a learning organisation that supports the development of staff, teamwork and embraces positive change
- Upholding our organisational integrity- we value honesty, professionalism and respect in all that we do

Strategic Goals

1. To improve access to a comprehensive range of primary health care, wellbeing and community support services for Aboriginal and/or Torres Strait Islander people in Townsville and the surrounding region.
2. To establish strong and sustainable cross-sectoral partnerships to enhance health and wellbeing outcomes for Aboriginal and/or Torres Strait Islander people in Townsville and the surrounding region.
3. To support the development of a high quality, skilled and competent Aboriginal and Torres Strait Islander workforce within the health and community services sector.
4. To be a recognised and trusted voice on issues related to the health and wellbeing of Aboriginal and/or Torres Strait Islander families in Townsville and the surrounding region.
5. To consistently demonstrate strong leadership, effective and sustainable financial management and accountable governance practices.

Information on Directors

Name:	Michael Illin
Title:	Chairperson Elected at AGM 13/02/2019, appointed Chairperson 19/02/2019
Qualifications:	Diploma Primary Health Care Degree in Health Management (in progress)
Experience and expertise:	<p>Michael has worked within the Health sector in both Government and non-Government agencies over the last 15 years. He has a specific interest in assisting in the provision of positive Health outcomes, experiences for all Aboriginal and Torres Strait Islander consumers in Community Controlled and mainstream Health services.</p> <p>Michael also holds a passion for working with vulnerable and disadvantaged youths, providing guidance in their young childhood and teenage years. Previously he had worked with Residential Care Facilities Indigenous Youths for a period of over 10 years. Michael has always been an advocate for Aboriginal and Torres Strait Islanders affairs in Townsville and further to the North / North West Queensland region and has gained the greatest learning achievements from many of the knowledgeable and respected Elders past and present, who have taught and guided him from an early age.</p> <p>Michael is currently employed as the Team Leader of 14 Indigenous Liaison Officers within the Townsville Hospital Health Service and is a facilitator for the Cultural Practice Program that delivers to the wider workforce.</p>

Name:	Liela Murison
Title:	Deputy Chairperson Elected at AGM 13/02/2019, appointed Deputy Chairperson 19/02/2019
Qualifications:	Graduate Diploma Health Promotion Certificate IV in Primary Health Associate Diploma in Primary Health Enrolled Nurse
Experience and expertise:	Liela has over 40 years' experience in the health sector.

Name:	Leone Malamoo
Title:	Director Elected at AGM 13/02/2019
Qualifications:	Master of Public Health (Health Promotion), James Cook University. Master of Philosophy in Applied Epidemiology, Australian National University.
Experience and expertise:	Leone has worked in the health sector for 19 years, including as an Executive Assistant and Payroll Assistant at an Aboriginal Medical Service; Community Liaison for the SEARCH project at Sax Institute; Research work for Link-Up Queensland, Central Queensland University, James Cook University, and Thesis projects, Public Health Officer Queensland Health.
Special Responsibilities:	Director, Financial and Audit Risk Committee (FARC). Appointed 19/02/2019

Name:	Coralie Cassady
Title:	Director Elected at AGM 13/02/2019
Qualifications:	Graduate Diploma in Communications Diploma in radio-broadcasting Advanced Diploma in Primary Health Care
Experience and expertise:	Coralie is a published author, former mainstream newspaper columnist, carer and long-standing advocate for mental health issues.

Name:	Esther Illin
Title:	Director Elected at AGM 23/11/2016; re-elected at AGM 13/02/2019
Experience and expertise:	Esther worked for Queensland Health as an Indigenous Health Worker for 40 years. She was the first Indigenous Rehabilitation Officer in Townsville; she created that position from research and fulfilled the requirements and developed this position across 30 years. Esther has completed tertiary studies in community development, and studied disability services in Sydney. Esther has previously served as a Board Member on the TAIHS board.

Name:	Desmond Cowburn
Title:	Director Elected at AGM 17/11/2015, re-elected at AGM 22/11/2017
Qualifications:	Diploma in Primary Health Care Practice
Experience and expertise:	<p>Desmond has over 18 years' experience in the community health sector. He is currently working in Aboriginal and Torres Strait Islander Hearing Health at Townsville Community Health Service at Kirwan, and was formerly an Indigenous Liaison Officer at the Townsville Hospital.</p> <p>Prior to Townsville, Desmond lived in Gayndah and held board positions in Aged Care and Retirement Facilities. He achieved a Queensland Minister of Health appointment as acting chairperson for North Burnett Health Community Council and was elected to Gayndah Shire Council. He was previously a Board Member for Boran Aboriginal and Torres Strait Island Housing and Mundubbera.</p>
Special Responsibilities:	Financial and Audit Risk Committee (FARC) Appointed FARC Chairperson 10/01/2017

Name:	Eva Kennedy
Title:	Director Elected at AGM 17/11/2015, re-elected at AGM 22/11/2017
Experience and expertise:	<p>Bachelor of Arts majoring in Aboriginal Studies Diploma of Social Welfare Associate Diploma of Social Studies Certificate (Mental Health) International Training Course awarded through a fellowship by the Australia Government Department of Foreign Affairs</p>
Special responsibilities:	Eva is a co-founder of the Townsville Aboriginal & Islander Health Service and has been an active Board Member for over 30 years since the establishment of the organisation. Eva is currently employed by the Australian Red Cross as an Aboriginal & Torres Strait Islander Liaison Officer. She has been awarded the Order of Australia (OAM) and is also a Justice of the Peace.

Name:	Morris Cloudy
Title:	Director Elected at AGM 23/11/2016, appointed Chairperson 19/12/2017 Term ended at AGM 13/02/2019
Qualifications:	Bachelor of Arts (Applied Science and Community Development Management)
Experience and expertise:	<p>Morris has a Bachelor of Arts in applied science and community development management. This degree is a culmination of over 30 years of practical work in the community sector with various government departments in diverse sectors.</p> <p>Morris has previously served as a Board member of TAIHS.</p>

Name:	Randal Ross
Title:	Director Elected at AGM 23/11/2016 Term ended at AGM 13/02/2019
Experience and Expertise:	<p>Randal has three indigenous backgrounds, Aboriginal, Torres Strait Islander and South Sealslander. HewasborninTownsvilleasaBindal/JuruandKaanjundescendant, with links to Erub (Darnley Island) in the Torres Strait and Tanna, Ambryn and Santo Islands in the South Pacific.</p> <p>He originally started working in Juvenile Justice and Child Protectioninboth Queensland and New South Wales, and for the past 15 years he has been instrumental in the development of Indigenous Men's Leadership Programs in Canberra through FaCSIA (Department of Families, Community Services & Indigenous Affairs).</p> <p>Randal is committed to Indigenous Men's Health and healing for families, men, women and young people. As a co-founder of the Red Dust Healing, he has travelled nationally and internationally showcasing Red Dust Healing's works and programs.</p> <p>Randal has served on numerous boards, listed as follows:</p> <ul style="list-style-type: none"> • Board Member of Central Aboriginal Land Council Dubbo as Board Secretary • Board Member of Indigenous Men's Health Council Northern Territory • Board Member of Jezzine Barrack's Community Trust • Member of Ausco Modular Homes Reconciliation Action Plan Indigenous Steering Committee • Board Member on Townsville Aboriginal and Torres Strait Islander Corporation for Media (4K1G) • Board Member on Castle Hill PCYC • Indigenous Advisor for Townsville Australian Football League (AFL)

Name:	Sawere Reuben (passed 8 April 2019)
Title:	Deputy Chairperson Elected at AGM 22/11/2017, appointed Deputy Chairperson 19/12/2017
Qualifications:	Masters of Business Bachelor of Education Associate Degree in Community Management Diploma of Government Cert IV Trainer and Assessor Cert IV Indigenous Leadership
Experience and expertise:	Sam's family is a strong community contributor and he had accomplished a lot of community work within Townsville. His knowledge, experience and contribution to Townsville Aboriginal & Islander Health Service was appreciated by all.
Special Responsibilities:	Director, Financial and Audit Risk Committee (FARC). Appointed 19/12/2017. Director, Financial and Audit Risk Committee (FARC). Appointed 19/12/2017.

Meetings of directors

The number of meetings of the corporation's Board of Directors ('the Board') held during the year ended 30 June 2019, and the number of meetings attended by each director were:

		Position	Held	Attended
Michael Illin	(elected at AGM 13/02/2019)	Chairperson	9	8
Liela Murison	(elected at AGM 13/02/2019)	Deputy-Chairperson	9	9
Leone Malamoo	(elected at AGM 13/02/2019)	Director	9	7
Coralie Cassady	(elected at AGM 13/02/2019)	Director	9	7
Esther Illin	(re-elected at AGM 13/02/2019)	Director	18	18
Desmond Cowburn		Director	18	17
Eva Kennedy		Director	18	15
Morris Cloudy	(term ended at AGM 13/02/2019)	Director	9	9
Randall Ross	(term ended at AGM 13/02/2019)	Director	9	5
Sawere Reuben	(passed 08/04/2019)	Director	10	6

Contributions on winding up

The corporation is incorporated under the Corporations (Aboriginal and Torres Strait Islander) Act 2006 (CATSI Act). If the corporation is wound up, the rulebook states that each member is required to contribute a maximum of \$Nil each towards meeting any outstanding obligations of the entity. At 30 June 2019, the total amount that members of the corporation are liable to contribute if the corporation is wound up is \$Nil (2018: \$Nil).

Auditor's independence declaration

A copy of the auditor's independence declaration has been received and can be found on page 7. This report is made in accordance with a resolution of directors.

On behalf of the directors

Michael Illin

Director

11 September 2019
Townsville



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Townsville Aboriginal and Torres Strait Islander Corporation for Health Services

Auditor's Independence Declaration under Section 339B of the Corporations
(Aboriginal and Torres Strait Islander) Act 2006 to the Directors of Townsville
Aboriginal and Torres Strait Islander Corporation for Health Services

I declare that, to the best of my knowledge and belief, during the year ended 30
June 2019, there have been:

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

A handwritten signature in dark ink that reads 'Crowe'.

Crowe Audit Australia

A handwritten signature in dark ink, appearing to read 'Donna Sinanian'.

Donna Sinanian
Partner

Dated this
20th day of September 2019
Townsville



Contents

30 June 2019



Statement of profit or loss and other comprehensive income

For the year ended 30 June 2019

	Note	2019 (\$)	2018 (\$)
Revenues	3	23,370,927	20,509,426
Other revenue	3	3,781,565	3,557,960
Unexpired grants brought forward		919,773	503,185
Unexpired grants returned to funding bodies		-	(97,253)
Unexpired grants carried forward to next year		(987,346)	(963,406)
Expenses			
Employee benefits expense	4	(18,402,481)	(16,177,399)
Motor vehicle expense		(713,488)	(617,984)
Property expense		(1,248,716)	(1,213,300)
Administration expense		(1,459,183)	(1,411,868)
Meeting expense		(17,396)	(17,752)
Medical supplies expense		(149,358)	(131,999)
Client expense		(794,638)	(504,802)
Travel and training expense		(427,112)	(391,868)
Subcontractors		(1,978,183)	(1,494,666)
Depreciation expense	4	(522,355)	(501,599)
Returnunspent funds/transfer to buffer		41,144	119,851
Surplusbeforeincome tax expense		1,413,153	1,166,526
Income tax expense		-	-
Surplus after income tax expense for the year attributable to the members of Townsville Aboriginal And Torres Strait Islander Corporation For Health Services		1,413,153	1,166,526
Other comprehensive income for the year, gain/(loss) on revaluation of land and buildings		(40,635)	(53,534)
Total comprehensive income for the year attributable to the members of Townsville Aboriginal And Torres Strait Islander Corporation For Health Services		1,372,518	1,112,992

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

Statement of financial position

As at 30 June 2019

	Note	2019 (\$)	2018 (\$)
Assets			
Current assets			
Cash and cash equivalents	5	8,159,341	6,222,963
Trade and other receivables		429,700	555,216
Other	6	710,551	422,946
Total current assets		9,299,592	7,201,125
Non-current assets			
Property, plant and equipment	7	8,981,729	9,130,324
Total non-current assets		8,981,729	9,130,324
Total assets		18,281,321	16,331,449
Liabilities			
Current liabilities			
Trade and other payables	8	4,363,000	3,813,038
Short term provisions	9	863,070	760,903
Borrowings	10	178,044	204,200
Total current liabilities		5,404,114	4,778,141
Non-current liabilities			
Long term provisions		371,400	308,206
Borrowings	9	1,183,660	1,295,474
Total non-current liabilities	10	1,555,060	1,603,680
Total liabilities		6,959,174	6,381,821
Net assets		11,322,147	9,949,628
Equity			
Reserves		152,742	193,376
Retained surplus		11,169,405	9,756,252
Total equity		11,322,147	9,949,628

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

Statement of changes in equity

For the year ended 30 June 2019

	Retained Surplus (\$)	Reserves (\$)	Total Equity (\$)
Balance at 1 July 2017	8,589,726	246,911	8,836,636
Surplus after income tax expense for the year	1,166,526	-	1,166,526
Other comprehensive income for the year, gain on revaluation	-	(53,534)	(53,534)
Balance at 30 June 2018	9,756,252	193,376	9,949,628

	Retained Surplus (\$)	Reserves (\$)	Total Equity (\$)
Balance at 1 July 2018	9,756,252	193,376	9,949,628
Surplus after income tax expense for the year	1,413,153	-	1,413,153
Other comprehensive income for the year, loss on revaluation	-	(40,634)	(40,634)
Balance at 30 June 2019	11,169,405	152,742	11,322,147

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

Statement of cash flows

As at 30 June 2019

	Note	2019 (\$)	2018 (\$)
Cash flows from operating activities			
Payments to suppliers and employees (inclusive of goods and services tax)		27,247,484	26,034,417
Interest paid on borrowings		(24,710,435)	(24,037,729)
Interest received		(66,230)	(72,452)
Net cash inflow from operating activities		17,921	18,245
Net cash inflow from operating activities		2,488,741	1,942,481
Cash flows from investing activities			
Payment for property, plant and equipment		(414,393)	(682,580)
Net cash (outflow) from investing activities		(414,393)	(682,580)
Net cash provided by / (used in) financing activities			
Repayment of bank loans		(137,970)	(131,747)
Net cash inflow/(outflow) from financing activities		(137,970)	(131,747)
Net increase in cash and cash equivalents		1,936,378	1,128,154
Cash and cash equivalents at the beginning of the financial year		6,222,963	5,094,809
Cash and cash equivalents at the end of the financial year	5	8,159,341	6,222,963

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

Note 1.

Significant accounting policies

The principal accounting policies adopted in the preparation of the financial statements are set out below. These policies have been consistently applied to all the years presented, unless otherwise stated. The financial statements are for the entity Townsville Aboriginal and Torres Strait Islander Corporation for Health Services.

Basis of preparation

The Townsville Aboriginal & Torres Strait Islander Corporation for Health Services is a not-for-profit entity, incorporated under the Corporations (Aboriginal and Torres Strait Islander) Act 2006 (CATSI Act).

The financial statements are general purpose financial statements that have been prepared in accordance with Australian Accounting Standards - Reduced Disclosure Requirements of the Australian Accounting Standards Board (AASB) and the Corporations (Aboriginal and Torres Strait Islander) Act 2006 (CATSI Act). The corporation is a not-for-profit entity for financial reporting purposes under Australian Accounting Standards.

Australian Accounting Standards set out accounting policies that the AASB has concluded would result in financial statements containing relevant and reliable information about transactions, events and conditions. Material accounting policies adopted in the preparation of these financial statements are presented below and have been consistently applied unless stated otherwise.

New or amended Accounting Standards and Interpretations adopted

The corporation has applied the following standards and amendments for the first time in their annual reporting period commencing 1 July 2018:

AASB 9 Financial Instruments

The application of AASB 9 required a change in accounting policies, however, the adoption of new and amended standards did not have any impact on the current period or any prior period and is not likely to affect future periods.

New Standards and Interpretations not yet adopted

Certain new accounting standards and interpretations have been published that are not mandatory for 30 June 2019 reporting periods and have not been early adopted by the Corporation. The Corporation's assessment of the impact of these new standards and interpretations is set out below.

AASB 15 Revenue from Contracts with Customers, AASB 1058 Income for Not-for-Profit Entities and AASB 2016-8 Amendments to Australian Accounting Standards – Australian Implementation Guidance for Not-for-Profit Entities

AASB 15 will replace AASB 118 Revenue, AASB 111 Construction Contracts and a number of Interpretations. AASB 2016-8 provides Australian requirements and guidance for not-for-profit entities in applying AASB 9 and AASB 15, and AASB 1058 will replace AASB 1004 Contributions. Together they contain a comprehensive and robust framework for recognition, measurement and disclosure of income including revenue from contracts with customers.

The Corporation is reviewing the way that income is measured and recognised to identify whether there will be any material impact arising from these standards. In the future, grants will be individually assessed to determine the effects of this standard.

The mandatory application date of the standard is for financial years commencing on or after 1 January 2019. The Corporation intends using the partial retrospective approach in AASB 15 and AASB 1058. Under this transitional approach, the Corporation will not need to restate comparative figures in their 2019-20 financial statements. Instead the Corporation will recognise the cumulative effect of applying this standard as an adjustment to opening accumulated surplus at 1 July 2019.

AASB 16 Leases

The Corporation has leases that are not currently in the statement of financial position. These leases will be included when this standard comes into effect. A lease liability will initially be measured at the present value of the lease payments to be made over the lease term. A corresponding right-of-use asset will also be recognised over the lease term.

Lessor accounting under AASB 16 remains largely unchanged from AASB 117. For finance leases, the lessor recognises a receivable equal to the net investment in the lease. Lease receipts from operating leases are recognised as income either on a straight-line basis or another systematic basis where appropriate.

At this stage the Corporation has not yet fully assessed the potential impact of the new rules on the Corporation's financial statements. Note 11 discloses \$1,165,175 of non-cancellable operating leases that will need to be assessed in accordance with AASB 16. Some of the commitments may need to be covered by the exception for short-term and low value leases and some commitments may relate to arrangements that will not qualify as leases under AASB 16.

The mandatory application date of the standard is for financial years commencing on 1 July 2019. AASB 16 allows a 'cumulative approach' rather than a full retrospective application to recognising existing operating leases. The Corporation anticipates that it will apply the 'cumulative approach' and will not need to restate comparative information. Instead, the cumulative effect of applying the standard is recognised as an adjustment to the opening balance of accumulated surplus (or other component of equity as appropriate) at the date of initial application.

There are no other standards that are not yet effective and that would be expected to have a material impact on the entity in the current or future reporting years and on foreseeable future transactions.

Income tax

No provision for income tax has been raised as the entity is exempt from income tax under Div 50 of the Income Tax Assessment Act 1997.

Current and non-current classification

Assets and liabilities are presented in the statement of financial position based on current and non-current classification.

An asset is classified as current when: it is either expected to be realised or intended to be sold or consumed in normal operating cycle; it is held primarily for the purpose of trading; it is expected to be realised within 12 months after the reporting period; or the asset is cash or cash equivalent unless restricted from being exchanged or used to settle a liability for at least 12 months after the reporting period. All other assets are classified as non-current.

A liability is classified as current when: it is either expected to be settled in normal operating cycle; it is held primarily for the purpose of trading; it is due to be settled within 12 months after the reporting period; or there is no unconditional right to defer the settlement of the liability for at least 12 months after the reporting period. All other liabilities are classified as non-current.

Cash and cash equivalents

Cash and cash equivalents includes cash on hand, deposits held at call with banks, and other short-term, highly liquid investments with original maturities of three months or less.

Trade and other receivables

The Corporation applies the AASB 9 simplified approach to measuring expected credit losses which uses a lifetime expected loss allowance for all trade receivables. To measure the expected credit losses, trade receivables have been grouped based on shared credit risk characteristics and the days past due. The expected loss rates are based on the payment profiles of sales over a period of 12 months before 30 June 2019 and the corresponding historical credit losses experienced within this period. The historical loss rates are adjusted to reflect current and forward-looking information on macroeconomic factors affecting the ability of the customers to settle the receivables. The expected loss rates based on the nature of the organisations trade receivables is determined to be nil.

Property, plant and equipment

Each class of property, plant and equipment is carried at cost or fair value as indicated, less, where applicable, accumulated depreciation and any impairment losses.

Freehold property

Freehold land and buildings are shown at their fair value based on periodic, but at least triennial, valuations by external independent valuers, less subsequent depreciation for buildings.

In periods when the freehold land and buildings are not subject to an independent valuation, the directors conduct directors' valuations to ensure the carrying amount for the land and buildings is not materially different to the fair value.

Increases in the carrying amount arising on revaluation of land and buildings are recognised in other comprehensive income and accumulated in the revaluation surplus in equity. Revaluation decreases that offset previous increases of the same class of assets shall be recognised in other comprehensive income under the heading of revaluation surplus. All other decreases are recognised in profit or loss.

Any accumulated depreciation at the date of the revaluation is eliminated against the gross carrying amount of the asset and the net amount is restated to the revalued amount of the asset.

Freehold land and buildings that have been contributed at no cost, or for nominal cost are valued and recognised at the fair value of the asset at the date it is acquired.

Plant and equipment

Plant and equipment are measured on the cost basis and are therefore carried at cost less accumulated depreciation and any accumulated impairment losses. In the event the carrying amount of plant and equipment is greater than its estimated recoverable amount, the carrying amount is written down immediately to its estimated recoverable amount and impairment losses are recognised in profit or loss. A formal assessment of recoverable amount is made when impairment indicators are present (refer to Note 1(e) for details of impairment).

Plant and equipment that have been contributed at no cost, or for nominal cost are recognised at the fair value of the asset at the date it is acquired.

Depreciation

The depreciable amount of all fixed assets including buildings and capitalised lease assets, but excluding freehold land, is depreciated on a diminishing value or straight line basis over the asset's useful life to the entity commencing from the time the asset is held.

The depreciation rates used for each class of depreciable asset are:

Buildings	2.50%
Plant and equipment	10% - 67%

The residual values, useful lives and depreciation methods are reviewed, and adjusted if appropriate, at each reporting date.

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 the carrying amount and the disposal proceeds are taken to profit or loss. When revalued assets are sold, amounts are included in the revaluation surplus.

Impairment of non-financial assets

Non-financial assets are reviewed for impairment whenever events or changes in circumstances indicate that the carrying amount may not be recoverable. An impairment loss is recognised for the amount by which the asset's carrying amount exceeds its recoverable amount.

Recoverable amount is the higher of an asset's fair value less costs of disposal and value-in-use. The value-in-use is the present value of the estimated future cash flows relating to the asset using a pre-tax discount rate specific to the

asset or cash-generating unit to which the asset belongs. Assets that do not have independent cash flows are grouped together to form a cash-generating unit.

Trade and other payables

These amounts represent liabilities for goods and services provided to the corporation prior to the end of the financial year and which are unpaid. Due to their short-term nature they are measured at amortised cost and are not discounted. The amounts are unsecured and are usually paid within 30 days of recognition.

Employee benefits

Short-term employee benefits

Liabilities for wages and salaries, including non-monetary benefits, annual leave and long service leave expected to be settled within 12 months of the reporting date are measured at the amounts expected to be paid when the liabilities are settled.

Other long-term employee benefits

The liability for long service leave not expected to be settled within 12 months of the reporting date is measured as the present value of expected future payments to be made in respect of services provided by employees up to the reporting date. Consideration is given to expected future wage and salary levels, experience of employee departures and periods of service. Expected future payments are discounted using market yields at the reporting date on national government bonds with terms to maturity and currency that match, as closely as possible, the estimated future cash outflows.

Fair value measurement

The corporation measures some of its assets at fair value on a recurring basis, based on the requirements of the applicable Accounting Standard.

"Fair value" is the price the corporation would receive to sell an asset in an orderly (i.e. unforced) transaction between independent, knowledgeable and willing market participants at the measurement date.

As fair value is a market-based measure, the closest equivalent observable market pricing information is used to determine fair value. Adjustments to market values may be made having regard to the characteristics of the specific asset. The fair values of assets that are not traded in an active market are determined using one or more valuation techniques. These valuation techniques maximise, to the extent possible, the use of observable market data.

To the extent possible, market information is extracted from the principal market for the asset or liability (i.e. the market with the greatest volume and level of activity for the asset or liability). In the absence of such a market, market information is extracted from the most advantageous market available to the entity at the end of the reporting period (i.e. the market that maximises the receipts from the sale of the asset or minimises the payments made to transfer the liability, after taking into account transaction costs and transport costs).

For non-financial assets, the fair value measurement also takes into account a market participant's ability to use the asset in its highest and best use or to sell it to another market participant that would use the asset in its highest and best use.

Goods and Services Tax ('GST') and other similar taxes

Revenues, expenses and assets are recognised net of the amount of associated GST, unless the GST incurred is not recoverable from the tax authority. In this case it is recognised as part of the cost of the acquisition of the asset or as part of the expense.

Receivables and payables are stated inclusive of the amount of GST receivable or payable. The net amount of GST recoverable from, or payable to, the tax authority is included in other receivables or other payables in the statement of financial position.

Cash flows are presented on a gross basis. The GST components of cash flows arising from investing or financing activities which are recoverable from, or payable to the tax authority, are presented as operating cash flows.

Commitments and contingencies are disclosed net of the amount of GST recoverable from, or payable to, the tax authority.

Unexpended grants

The entity receives grant monies to fund projects either for contracted periods of time or for specific projects irrespective of the period of time required to complete those projects. It is the policy of the entity to treat grants monies as unexpended grants in the statement of financial position where the entity is contractually obliged to provide the services in a subsequent financial period to when the grant is received or in the case of specific project grants where the project has not been completed.

Note 2.

Critical accounting judgements, estimates and assumptions

The preparation of the financial statements requires management to make judgements, estimates and assumptions that affect the reported amounts in the financial statements. Management continually evaluates its judgements and estimates in relation to assets, liabilities, contingent liabilities, revenue and expenses. Management bases its judgements, estimates and assumptions on historical experience and on other various factors, including expectations of future events, management believes to be reasonable under the circumstances. The resulting accounting judgements and estimates will seldom equal the related actual results. The judgements, estimates and assumptions that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities (refer to the respective notes) within the next financial year are discussed below.

Estimation of useful lives of assets

The corporation determines the estimated useful lives and related depreciation and amortisation charges for its property, plant and equipment and finite life intangible assets. The useful lives could change significantly as a result of technical innovations or some other event. The depreciation and amortisation charge will increase where the useful lives are less than previously estimated lives, or technically obsolete or non-strategic assets that have been abandoned or sold will be written off or written down.

Impairment of non-financial assets

The corporation assesses impairment of non-financial assets at each reporting date by evaluating conditions specific to the corporation and to the particular asset that may lead to impairment. If an impairment trigger exists, the recoverable amount of the asset is determined. This involves fair value less costs of disposal or value-in-use calculations, which incorporate a number of key estimates and assumptions.

Employee benefits provision

As discussed in note 1, the liability for employee benefits expected to be settled more than 12 months from the reporting date are recognised and measured at the present value of the estimated future cash flows to be made in respect of all employees at the reporting date. In determining the present value of the liability, estimates of attrition rates and pay increases through promotion and inflation have been taken into account.

Note 3.

Revenue

	2019 (\$)	2018 (\$)
Revenue from (non-reciprocal) Government Grants and Other Grants:		
Commonwealth Government Grants		
Department of Health	6,201,866	5,587,605
Department of the Prime Minister and Cabinet	1,934,979	2,010,998
Department of Housing and Public Works	1,461,045	1,395,229
State Government Grants		
Department of Child Safety, Youth and Women	8,785,077	8,009,340
Queensland Health	2,021,302	1,918,325
Department of Education and Training	217,659	110,000
Other Grants		
Northern Queensland Primary Health Network	1,347,614	685,763
Institute for Indigenous Health	607,815	113,333
Northern Aboriginal and Torres Strait Islander Health Alliance	283,002	342,996
CheckUP	220,452	218,281
Sundry Grants	175,851	86,624
Queensland Aboriginal and Islander Health Council	90,000	-
Department of Social Services	6,344	12,688
Other Revenue	17,921	18,244
Interest income	23,370,927	20,509,426
Other Revenue	2,579,963	2,268,469
Project generated Medicare receipts	575,996	511,188
Practice incentive payments	625,606	778,303
Other revenue	3,781,565	3,557,960
Revenue	27,152,492	24,067,386

Note 4.

Profit for the year

	2019 (\$)	2018 (\$)
a) Expenses:		
Depreciation and amortisation		
Land and buildings	111,262	110,240
Leasehold buildings	92,665	91,333
Motor vehicles	26,977	21,872
Plant and equipment	291,451	287,154
Total depreciation and amortisation	522,355	501,599
Employee benefits expense	18,402,481	16,177,399
Audit or review services	32,500	31,500
Rental expense on operating leases	577,895	478,390

Note 5.

Current assets - cash and cash equivalents

	2019 (\$)	2018 (\$)
Cash on hand	6,510	4,831
Cash at bank	8,152,831	6,218,132
	8,159,341	6,222,963

Cash at bank is a "restricted asset" in that amounts representing unexpended grants may only be applied for the purpose specified in the Program Funding Agreement. Of the cash and cash equivalents, \$987,346 has been released by fundingbodies, but remains unexpended at 30 June 2019.

Note 6.

Current assets - other

	2019 (\$)	2018 (\$)
Prepayments	248,609	194,250
Goods and services tax paid	250,668	195,614
Security deposit - electricity	583	583
Loan establishment fees	732	6,779
Deferred income	209,959	20,720
Funds held in trust	-	5,000
	710,551	422,946

Note 7.

Non-current assets - property, plant and equipment

	2019 (\$)	2018 (\$)
Buildings		
Freehold land at fair value:		
Independent valuation June 2018	3,353,500	3,428,500
Total land	3,353,500	3,428,500
Buildings at fair value	4,406,198	4,234,280
Independent valuation June 2018	4,406,198	4,234,280
Total buildings		
Leasehold buildings at cost		
Improvements at cost	463,323	463,323
Less: Accumulated depreciation	(206,562)	(113,897)
	256,761	349,426
Total land and buildings	8,016,459	8,012,206
Plant and equipment		
At cost	3,276,093	2,993,372
Less accumulated depreciation	(2,444,301)	(2,152,850)
Total plant and equipment	831,792	840,522
Motor vehicles	238,281	181,194
At cost	(161,306)	(134,329)
Less accumulated depreciation	76,975	46,865
Total motor vehicles	908,767	887,387
Total plant and equipment		
Capital Works In Progress		
Capital expenditure projects	26,630	110,153
Plant and equipment purchases	29,873	120,579
Total capital works in progress	56,503	230,732
Total property, plant and equipment	8,981,729	9,130,324

Note 7. Non-current assets - property, plant and equipment (cont.)

Asset Revaluations

The freehold land and buildings were independently valued at 30 June 2019 by Herron Todd White. The valuation has resulted in a decrement to freehold land of \$75,000 and an increment to freehold buildings of \$34,365, resulting in a net decrement of \$40,635 being recognised in the revaluation surplus for the year ended 30 June 2019.

Reconciliations

Reconciliations of the written down values at the beginning and end of the current financial year are set out below:

	Land	Buildings (\$)	Leasehold Buildings (\$)	Motor Vehicles (\$)	Plant + Equipment (\$)	Total (\$)
Balance at 1 July 2018	3,428,500	4,344,433	349,426	105,484	902,483	9,130,326
Additions	-	-	-	57,086	162,142	219,228
Improvements	-	138,662	-	-	-	138,662
Works in progress	-	26,630	-	-	29,873	56,503
Revaluation increment/ decrement	(75,000)	34,365	-	-	-	(40,635)
Depreciation expense	-	(111,262)	(92,665)	(26,977)	(291,451)	(522,355)
Balance at 30 June 2019	3,353,500	4,432,828	256,761	135,593	803,047	8,981,729

Note 8a. Current liabilities - trade and other payables

	Note	2019 (\$)	2018 (\$)
Trade payables		372,935	211,387
Prepaid income		1,136,188	660,397
Unexpired grants current year	8(b)	987,346	963,406
Goods and services tax collected		746,131	664,638
Accrued expenses		710,944	579,320
Payroll liabilities		208,726	176,602
Buffers held		110,231	323,866
Capital commitments		56,503	230,732
Other liabilities		32,236	-
Credit card		1,760	2,690
		4,363,000	3,813,038

Note 8b. Schedule of unexpended grants

	2019 (\$)	2018 (\$)
Government Grants		
Department of Health		
New Directions Palm Island	1,208	40,012
Sexual Health	293,352	-
Total Department of Health	294,560	40,012
Department of Child Safety, Youth and Women		
Family Participation Program	181,344	-
Family Wellbeing Services	63,143	79,952
Family Wellbeing Packages	76,686	34,768
Youth Support Services	1,101	-
Recognised Entity	-	79,052
Foster and Kinship Service	-	10,862
Supervised Community Accommodation Service	58,025	187,884
Supervised Community Accommodation Service - Capital	-	29,089
Bail Support Service	46,569	-
After Hours Diversion Service	13,343	12,603
Youth Justice Palm Island	756	6,136
Total Department of Child Safety, Youth and Women	440,967	440,346
Department of Prime Minister and Cabinet		
Stronger Families - Smart Healthy Kids	2,960	8,659
Stronger Families - Strong Healthy Families	19,581	1,163
Ferdy's Haven	-	673
Total Department of Prime Minister and Cabinet	22,541	10,495
Northern Queensland Primary Health Network		
AOD Clinical Youth Service	102,201	36,245
Youth Mental Health Services	47,196	77,431
Maternal Child Health Service Development	35,160	10,415
AOD Palm Island	6,351	37,896
AOD Townsville	2,415	4,549
Active Healthy Northern Queensland - Palm Island	952	4,755
Integrated Team Care	349	-
ATSI Primary Mental Health and Complex Care	-	30,635
Total Northern Queensland Primary Health Network	194,624	201,926
Queensland Health		
Outreach and Youth	-	161,087
Enhanced Maternal Child Health	2,595	-
Illicit Drug Diversion Initiative	2,191	1,944
Total Queensland Health	4,786	163,031
Other Grants		
Queensland Aboriginal & Islander Health Council - Sexual Health	24,869	-
Northern Aboriginal and Torres Strait Islander Health Alliance - Integrated Team Care	4,350	4,404
CheckUp - Tucka Time	-	587
Institute for Indigenous Health - Deadly Choices	-	577
Department of Education & Training - Pathways To Early Learning Development	649	102,028
Total Other Grants	29,868	107,596
Total unexpended grants	987,346	963,406

Note 9.

Provisions - employee benefits

	2019 (\$)	2018 (\$)
Current		
Provision for employee benefits: annual leave	728,573	601,637
Provision for employee benefits: long service leave	134,497	159,266
	863,070	760,903
Non-Current		
Provision for employee benefits: long service leave	371,400	308,206
Total provisions for employee benefits	1,234,470	1,069,109

Note 10.

Borrowings

Borrowings consist of the following:

	2019 (\$)	2018 (\$)
Current		
Bank Loan - Peel Street	150,579	164,790
Bank Loan - Fulham Road	27,465	39,410
	178,044	204,200
Non-Current		
Bank Loan - Peel Street	850,849	951,931
Bank Loan - Fulham Road	332,811	343,543
	1,183,660	1,295,474
Total Borrowings	1,361,704	1,499,674

Note 11.

Capital and leasing commitments

Non-cancellable operating leases contracted for but not recognised in the financial statements:

	2019 (\$)	2018 (\$)
Payable - minimum lease payments		
- not later than 12 months	666,762	782,901
- between 12 months and 5 years	498,413	755,822
	1,165,175	1,538,723

At reporting date, the following obligations under non-cancellable operating leases were in place: (a) lease of photocopiers, commenced in December 2015 and is a five year agreement; (b) lease of motor vehicles (fleet of 57 vehicles), commenced in 2014/2015 and is a five year agreement; (c) lease of commercial premise, commenced in July 2016 and is a three year agreement; (d) lease of telephone system, commenced in July 2016 and is a five year agreement; and (e) lease of solar panel system, commenced in August 2016 and is a five year agreement.

Note 12.

Key management personnel disclosures

Compensation

Any person(s) having authority and responsibility for planning, directing and controlling the activities of the corporation, directly or indirectly, including any director (whether executive or otherwise) is considered key management personnel.

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

	2019 (\$)	2018 (\$)
Aggregate compensation	923,671	934,805

Note 13.

Fair value measurements

The corporation has the following assets, as set out in the table below, that are measured at fair value on a recurring basis after their initial recognition. The corporation does not subsequently measure any liabilities at fair value on a recurring basis and has no assets or liabilities that are measured at fair value on a non-recurring basis.

	2019 (\$)	2018 (\$)
Recurring fair value measurements		
Property, plant and equipment:		
Freehold land	3,353,500	3,428,500
Freehold buildings	4,406,198	4,234,280
	7,759,698	7,662,780

For freehold land and buildings, the fair values are based on an external independent valuation performed in the 2019 year, which had used comparable market data for similar purposes.

Note 14.

Contingent liabilities

The Corporation has no contingent liabilities at 30 June 2019.

Note 15.

Events after the reporting period

No matter or circumstance has arisen since 30 June 2019 that has significantly affected, or may significantly affect the corporation's operations, the results of those operations, or the corporation's state of affairs in future financial years.

Directors' declaration

30 June 2019

In accordance with a resolution of the directors of The Townsville Aboriginal and Torres Strait Islander Corporation for Health Services, the directors of the corporation declare that:

1. The financial statements and notes, as set out on pages 9 to 23, are in accordance with the Corporations (Aboriginal and Torres Strait Islander) Act 2006; and
 - (a) comply with Australian Accounting Standards - Reduced Disclosure Requirements; and
 - (b) give a true and fair view of the financial position of the corporation as at 30 June 2019 and of its performance for the year ended on that date.
2. In the directors' opinion there are reasonable grounds to believe that the entity will be able to pay its debts as and when they become due and payable.

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

On behalf of the directors

A handwritten signature in blue ink, appearing to read 'M. A. Illin', is written over a horizontal line.

Michael Illin

Chairperson

17 September 2019
Townsville



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Independent Auditor's Report to the Members of Townsville Aboriginal & Torres Strait Islander Corporation for Health Services

Opinion

We have audited the financial report of Townsville Aboriginal & Torres Strait Islander Corporation for Health Services (the Corporation), which comprises the statement of financial position as at 30 June 2019, the statement of profit or loss and other comprehensive income, the statement of changes in equity and the 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,

- a) the financial report of Townsville Aboriginal & Torres Strait Islander Corporation for Health Services Limited is in accordance with 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 2019 and of its performance for the period ended on that date; and
 - ii. complying with Australian Accounting Standards and the Corporations (Aboriginal and Torres Strait Islander) Regulations 2007; and
- b) The Registrar has not imposed any additional/increased reporting requirements which the Corporation is required to comply with;
- c) We have been provided all the information, explanations and assistance necessary to conduct the audit;
- d) The Corporation has kept sufficient financial records to enable the financial report to be prepared and audited; and
- e) The Corporation has kept all other records and registers as required by the Corporations (Aboriginal and Torres Strait Islander) Act 2006.

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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 Company in accordance with the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 Code of Ethics for Professional Accountants (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

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

Responsibilities of the Directors 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 and the Corporations (Aboriginal and Torres Strait Islander) Act 2006, and 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 ability of the Corporation 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

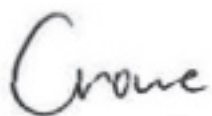
Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but it is not a guarantee that 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.

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

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



Crowe Audit Australia



Donna Sinanian

Partner

Dated this

20th day of September 2019

Townsville

Townsville Aboriginal and Torres Strait Islander Corporation for Health Services

Queensland Health

**Illicit Drug Diversion Initiative
2019 Financial Report**

Statement of financial position

As at 30 June 2019

QLD Illicit Drug Diversion Initiative	Budget (\$)	Actual (\$)	Variance (\$)
Income			
Grant funds	97,228	104,126	6,898
Interest and sundry income		55	55
Total income	97,228	104,181	6,953
Expenditure - Salaries and Wages			
Salaries and wages (including on-costs and recruitment)	80,231	81,477	(1,246)
WorkCover	802	802	
Total salaries and wages	81,033	82,279	(1,246)
Expenditure - Operational			
Administration fee	15,556	16,660	(1,104)
Client program expense	639	3,051	(2,412)
Total operating costs	16,195	19,711	(3,516)
Total expenditure	97,228	101,990	(4,762)
Net Surplus/(Deficit)		2,191	2,191

Notes to and forming part of the Operating Statement

Note 1. Basis of Preparation

The Statement has been prepared for distribution to the grantor, Queensland Health and the grantee, Townsville Aboriginal and Torres Strait Islander Corporation for Health Services under the financial reporting provisions of the contract made between the two parties.

(a) Revenues & Expenses

The Operating Statement has been prepared in accordance with the accrual basis of accounting and the financial records of the grantee, Townsville Aboriginal and Torres Strait Islander Corporation for Health Services.

All revenue and expenses are stated net of the amount of goods and service tax (GST).

**Townsville Aboriginal and Torres Strait Islander Corporation
for Health Services**

Queensland Health

Illicit Drug Diversion Initiative

Management Certificate

I certify that all funding received in respect of the Illicit Drug Diversion Initiative program from Queensland Health, has been expended for the purpose of the project and in accordance with the contract between Townsville Aboriginal and Torres Strait Islander Corporation for Health Services and Queensland Health for the period 1 July 2018 to 30 June 2019.

Townsville Aboriginal and Torres Strait Islander Corporation for Health Service

Name: Kathy Andrew

Position: CEO

At Townsville
Dated 25/09/2019

Name: Jodi Davison

Position: CFO

At Townsville
Dated 25/09/2019



TAIHS
Townsville Aboriginal &
Islander Health Service



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Townsville Aboriginal and Torres Strait Islander Corporation for Health Services

Independent Auditor's Report for Queensland Health

Opinion

We have audited the accompanying financial report, being a special purpose financial report, of Townsville Aboriginal and Torres Strait Islander Corporation for Health Services for the delivery of the Illicit Drug Diversion Program. This report comprises the 2019 Financial Report for the period 1 July 2018 to 30 June 2019, and the Management Certificate. The financial report has been prepared by the management of Townsville Aboriginal and Torres Strait Islander Corporation for Health Services in accordance with the funding agreement standard terms and conditions.

In our opinion, and in accordance with the Funding Agreement Standard Terms and Conditions, the 2019 Financial Report attached for the period 1 July 2018 to 30 June 2019 has been drawn up to represent accurately the financial transactions relevant to the Illicit Drug Diversion Program.

Basis of Accounting and Restriction on Distribution and Use

Without modifying our opinion, we draw attention to Note 1 of the 2019 Financial Report, which describes the basis of accounting. The financial report is prepared to assist Townsville Aboriginal and Torres Strait Islander Corporation for Health Services, to comply with the financial reporting provisions of the contract referred to above. As a result, the financial report may not be suitable for another purpose. Our report is intended solely for the Townsville Aboriginal and Torres Strait Islander Corporation for Health Services and should not be distributed to or used by parties other than those for which it is intended.

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 Association in accordance with the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 Code of Ethics for Professional Accountants (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

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

Findex (Aust) Pty Ltd, trading as Crowe Australasia is a member of Crowe Global, a Swiss Verein. Each member firm of Crowe Global is a separate and independent legal entity. Findex (Aust) Pty Ltd and its affiliates are not responsible or liable for any acts or omissions of Crowe Global or any other member of Crowe Global. Crowe Global does not render any professional services and does not have an ownership or partnership interest in Findex (Aust) Pty Ltd. Services are provided by Crowe Audit Australia, an affiliate of Findex (Aust) Pty Ltd. Liability limited by a scheme approved under Professional Standards Legislation. Liability limited other than for acts or omissions of financial services licensees.



Independence

In conducting our audit, we have complied with the independence requirements of Australian professional ethical pronouncements.

Management's Responsibility for the Financial Report

Management is responsible for the preparation and fair presentation of the financial report in accordance with the basis of preparation described in the funding agreement terms and conditions, and for such internal control as management determines is necessary to enable the preparation of the financial report that is free from material misstatement, whether due to fraud or error.

Auditor's Responsibilities for the Audit of the Financial Report

Our responsibility is to express an opinion on the 2019 Financial Report based on the audit. The audit was conducted in accordance with the Australian Auditing Standards. These auditing standards require compliance with relevant ethical requirements relating to audit engagements and that the audit is planned and performed to obtain reasonable assurance about whether the financial statement is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statement. The procedures selected depend on the auditor's judgement, including the assessment of risks of material misstatement in the financial report, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial report 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 entity's internal control. An audit also includes evaluating the application of accounting policies and the reasonableness of accounting estimates made by the management, as well as evaluating the overall presentation of the financial report.

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

A stylized, handwritten signature of the word "Crowe" in dark blue ink.

Crowe Audit Australia

A handwritten signature in dark blue ink, appearing to read "Donna Sinanian".

Donna Sinanian

Partner
26/09/2019

Townsville Aboriginal and Torres Strait Islander Corporation for Health Services

Queensland Health

**Outreach Services and
Youth Health Promotions**

2019 Financial Report

Statement of financial position

As at 30 June 2019

QLD Illicit Drug Diversion Initiative	Budget (\$)	Actual (\$)	Variance (\$)
Income			
Grant funds	1,751,403	1,796,149	44,746
Medicare and Check-up income	292,244	335,521	43,277
Interest and sundry income	40,000	39,243	(757)
Total income	2,083,647	2,170,913	87,266
Expenditure - Salaries and Wages			
Salaries and wages (including on-costs and recruitment)	1,403,783	1,265,088	138,695
WorkCover	14,038	14,038	
Total salaries and wages	1,417,821	1,279,126	138,695
Expenditure - Operational			
Advertising and community engagement activities	20,000	6,263	13,737
Cleaning, rubbish, gardening expense	1,000	2,481	(1,481)
Client costs	2,000	15,446	(13,446)
IT software and support	5,000	3,844	1,156
Low cost equipment	5,000	18,256	(13,256)
Medical supplies	25,000	31,318	(6,318)
Motor vehicles:			
Fuel	30,000	26,499	3,501
Leasing charges	55,284	60,127	(4,843)
Registration and insurance	5,000	5,214	(214)
Repairs and maintenance	5,000	9,817	(4,817)
Office supplies	2,000	2,397	(397)
Organisational fee	280,224	287,384	(7,160)
Printing expense	3,500	3,275	225
Rent expense	108,130	73,388	34,742
Repairs and maintenance	5,000	5,540	(540)
Staff amenities	1,500	3,072	(1,572)
Staff development	17,514	7,098	10,416
Sundry expense	78,174	9,509	68,664
Telephone and internet	6,500	7,160	(660)
Total operating costs	655,826	578,088	77,737
Expenditure - Capital (to be capitalised at year end)			
Plant and equipment	5,000	8,488	(3,488)
Medical equipment	5,000	39,013	(34,013)
Total capital expenditure	10,000	47,501	(37,501)
Total expenditure	2,083,647	1,904,715	178,931
Net Surplus/(Deficit)		266,198	266,198
Less Non Grant Income	(332,244)	(374,764)	(42,520)
Net Surplus/(Deficit) Program Funds	(332,244)	(108,566)	(223,678)

Notes to and forming part of the Operating Statement

Note 1. Basis of Preparation

The Statement has been prepared for distribution to the grantor, Queensland Health and the grantee, Townsville Aboriginal and Torres Strait Islander Corporation for Health Services under the financial reporting provisions of the contract made between the two parties.

(a) Revenues & Expenses

The Operating Statement has been prepared in accordance with the accrual basis of accounting and the financial records of the grantee, Townsville Aboriginal and Torres Strait Islander Corporation for Health Services.

All revenue and expenses are stated net of the amount of goods and service tax (GST).

**Townsville Aboriginal and Torres Strait Islander Corporation
for Health Services**

Queensland Health

Outreach Services and Youth Health Promotions

Management Certificate

I certify that all funding received in respect of the Outreach Services and Youth Health Promotions program from Queensland Health, has been expended for the purpose of the project and in accordance with the contract between Townsville Aboriginal and Torres Strait Islander Corporation for Health Services and Queensland Health for the period 1 July 2018 to 30 June 2019.

Townsville Aboriginal and Torres Strait Islander Corporation for Health Service

Name: Kathy Andrew

Position: CEO

At Townsville
Dated 25/09/2019

Name: Jodi Davison

Position: CFO

At Townsville
Dated 25/09/2019



TAIHS
Townsville Aboriginal &
Islander Health Service



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Townsville Aboriginal and Torres Strait Islander Corporation for Health Services

Independent Auditor's Report for Queensland Health

Opinion

We have audited the accompanying financial report, being a special purpose financial report, of Townsville Aboriginal and Torres Strait Islander Corporation for Health Services for the delivery of the Outreach Services and Youth Health Promotion Program. This report comprises the 2019 Financial Report for the period 1 July 2018 to 30 June 2019, and the Management Certificate. The financial report has been prepared by the management of Townsville Aboriginal and Torres Strait Islander Corporation for Health Services in accordance with the funding agreement standard terms and conditions.

In our opinion, and in accordance with the Funding Agreement Standard Terms and Conditions, the 2019 Financial Report attached for the period 1 July 2018 to 30 June 2019 has been drawn up to represent accurately the financial transactions relevant to the Outreach Services and Youth Health Promotion Program.

Basis of Accounting and Restriction on Distribution and Use

Without modifying our opinion, we draw attention to Note 1 of the 2019 Financial Report, which describes the basis of accounting. The financial report is prepared to assist Townsville Aboriginal and Torres Strait Islander Corporation for Health Services, to comply with the financial reporting provisions of the contract referred to above. As a result, the financial report may not be suitable for another purpose. Our report is intended solely for the Townsville Aboriginal and Torres Strait Islander Corporation for Health Services and should not be distributed to or used by parties other than those for which it is intended.

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 Association in accordance with the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 Code of Ethics for Professional Accountants (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

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

Independence

Findex (Aust) Pty Ltd, trading as Crowe Australasia is a member of Crowe Global, a Swiss Verein. Each member firm of Crowe Global is a separate and independent legal entity. Findex (Aust) Pty Ltd and its affiliates are not responsible or liable for any acts or omissions of Crowe Global or any other member of Crowe Global. Crowe Global does not render any professional services and does not have an ownership or partnership interest in Findex (Aust) Pty Ltd. Services are provided by Crowe Audit Australia, an affiliate of Findex (Aust) Pty Ltd. Liability limited by a scheme approved under Professional Standards Legislation. Liability limited other than for acts or omissions of financial services licensees.



In conducting our audit, we have complied with the independence requirements of Australian professional ethical pronouncements.

Management's Responsibility for the Financial Report

Management is responsible for the preparation and fair presentation of the financial report in accordance with the basis of preparation described in the funding agreement terms and conditions, and for such internal control as management determines is necessary to enable the preparation of the financial report that is free from material misstatement, whether due to fraud or error.

Auditor's Responsibilities for the Audit of the Financial Report

Our responsibility is to express an opinion on the 2019 Financial Report based on the audit. The audit was conducted in accordance with the Australian Auditing Standards. These auditing standards require compliance with relevant ethical requirements relating to audit engagements and that the audit is planned and performed to obtain reasonable assurance about whether the financial statement is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statement. The procedures selected depend on the auditor's judgement, including the assessment of risks of material misstatement in the financial report, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial report 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 entity's internal control. An audit also includes evaluating the application of accounting policies and the reasonableness of accounting estimates made by the management, as well as evaluating the overall presentation of the financial report.

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

A stylized, handwritten signature of the word "Crowe" in dark blue ink.

Crowe Audit Australia

A handwritten signature in dark blue ink, appearing to read "Donna Sinanian".

Donna Sinanian

Partner

26/09/2019

Townsville Aboriginal and Torres Strait Islander Corporation for Health Services

Queensland Health

Enhanced Maternal and Child Health
2019 Financial Report

Statement of financial position

As at 30 June 2019

QLD Illicit Drug Diversion Initiative	Budget (\$)	Actual (\$)	Variance (\$)
Income			
Grant funds	118,013	121,028	3,015
Interest and sundry income		66	66
Total income	118,013	121,094	3,081
Expenditure - Salaries and Wages			
Salaries and wages (including on-costs and recruitment)	98,149	98,154	(5)
WorkCover	981	981	
Total salaries and wages	99,130	99,135	(5)
Expenditure - Operational			
Administration fee	18,883	19,364	(481)
Total operating costs	18,883	19,364	(481)
Total expenditure	118,013	118,499	(486)
Net Surplus/(Deficit)		2,595	2,595

Notes to and forming part of the Operating Statement

Note 1. Basis of Preparation

The Statement has been prepared for distribution to the granter, Queensland Health and the grantee, Townsville Aboriginal and Torres Strait Islander Corporation for Health Services under the financial reporting provisions of the contract made between the two parties.

(a) Revenues & Expenses

The Operating Statement has been prepared in accordance with the accrual basis of accounting and the financial records of the grantee, Townsville Aboriginal and Torres Strait Islander Corporation for Health Services.

All revenue and expenses are stated net of the amount of goods and service tax (GST).

**Townsville Aboriginal and Torres Strait Islander Corporation
for Health Services**

Queensland Health

Enhanced Maternal + Child Health

Management Certificate

I certify that all funding received in respect of the Enhanced Maternal and Child Health program from Queensland Health, has been expended for the purpose of the project and in accordance with the contract between Townsville Aboriginal and Torres Strait Islander Corporation for Health Services and Queensland Health for the period 1 July 2018 to 30 June 2019.

Townsville Aboriginal and Torres Strait Islander Corporation for Health Service



TAIHS
Townsville Aboriginal &
Islander Health Service

Name: Kathy Andrew

Position: CEO

At Townsville
Dated 25/09/2019

Name: Jodi Davison

Position: CFO

At Townsville
Dated 25/09/2019



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Townsville Aboriginal and Torres Strait Islander Corporation for Health Services

Independent Auditor's Report for Queensland Health

Opinion

We have audited the accompanying financial report, being a special purpose financial report, of Townsville Aboriginal and Torres Strait Islander Corporation for Health Services for the delivery of the Enhanced Maternal Child Health Program. This report comprises the 2019 Financial Report for the period 1 July 2019 to 30 June 2019, and the Management Certificate. The financial report has been prepared by the management of Townsville Aboriginal and Torres Strait Islander Corporation for Health Services in accordance with the funding agreement standard terms and conditions.

In our opinion, and in accordance with the Funding Agreement Standard Terms and Conditions, the 2019 Financial Report attached for the period 1 July 2018 to 30 June 2019 has been drawn up to represent accurately the financial transactions relevant to the Enhanced Maternal Child Health Program.

Basis of Accounting and Restriction on Distribution and Use

Without modifying our opinion, we draw attention to Note 1 of the 2019 Financial Report, which describes the basis of accounting. The financial report is prepared to assist Townsville Aboriginal and Torres Strait Islander Corporation for Health Services, to comply with the financial reporting provisions of the contract referred to above. As a result, the financial report may not be suitable for another purpose. Our report is intended solely for the Townsville Aboriginal and Torres Strait Islander Corporation for Health Services and should not be distributed to or used by parties other than those for which it is intended.

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 Association in accordance with the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 Code of Ethics for Professional Accountants (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

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

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In conducting our audit, we have complied with the independence requirements of Australian professional ethical pronouncements.

Management's Responsibility for the Financial Report

Management is responsible for the preparation and fair presentation of the financial report in accordance with the basis of preparation described in the funding agreement terms and conditions, and for such internal control as management determines is necessary to enable the preparation of the financial report that is free from material misstatement, whether due to fraud or error.

Auditor's Responsibilities for the Audit of the Financial Report

Our responsibility is to express an opinion on the 2019 Financial Report based on the audit. The audit was conducted in accordance with the Australian Auditing Standards. These auditing standards require compliance with relevant ethical requirements relating to audit engagements and that the audit is planned and performed to obtain reasonable assurance about whether the financial statement is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statement. The procedures selected depend on the auditor's judgement, including the assessment of risks of material misstatement in the financial report, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial report 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 entity's internal control. An audit also includes evaluating the application of accounting policies and the reasonableness of accounting estimates made by the management, as well as evaluating the overall presentation of the financial report.

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

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Crowe Audit Australia

A handwritten signature in dark ink, appearing to read "Donna Sinanian".

Donna Sinanian

Partner

26/09/2019



TAIHS

Townsville Aboriginal &
Islander Health Service

Townsville Aboriginal & Islander Health Service

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