

ABORIGINAL MEDICAL SERVICE COOPERATIVE

# Annual Report



# 2014 – 2015



The Aboriginal Medical Service (Redfern) was established in 1971 and was the first Aboriginal Community Controlled Health Service in Australia.

The AMS is a founding member of the National Aboriginal Community Controlled Health Organisation formally NAIHO 1974) and of the NSW Aboriginal Health Resource Committee 1984 (now known as the Aboriginal Health and Medical Research Council of NSW). NACCHO and the AHMRC are the national and state umbrella bodies respectively for Aboriginal Community Controlled Health Services.

We strive to improve the quality and range of our services through community interaction and evaluation.

We recognise that the unacceptable state of Aboriginal health will never improve substantially while Aboriginal people are denied human rights and recognition of ownership of land.

We see health as:

"Not just the physical well being of the individual but the social, emotional and cultural well being of the whole community, this is a whole-of-life view and also includes the cyclical concept of life-death-life"

(National Aboriginal Health Strategy 1989)

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## Message from the Board

### Sol Bellear, Chair



The 2014/15 financial year was another big year for the Aboriginal Medical Service Cooperative Limited (AMS).

This year saw the realisation of the AMS' determination to reduce and sustain waiting times, ensuring financial sustainability, reinforcing good governance processes and delivering programs and services to meet our community's needs.

In 2014/15 financial year the AMS turned an operating surplus of \$312,446.00, a significant turnaround from last year operating loss.

The organisation has achieved several significant achievements this year, to highlight a few:

- Medical Clinic Accreditation – The AMS Medical Clinics received full accreditation against the Australian General Practice Accreditation Limited (AGPAL) standards until 2017.

- Achieving a sustainable financial position: through reinforced good governance processes and implementing reforms across the organisation

- The reintroduction of General Practitioner Registrar training, The AMS entered into a partnership with WentWest as our nominated regional training provider. This partnership saw the training and development of 2 GP registrars in the 2014/15 financial year. One of the registrars enjoying her experience and learning here has requested an additional placement with the AMS.

- Creating and supporting our workforce: The AMS now has implemented an all Aboriginal Senior executive team and department /unit coordinators. The AMS has a strong workforce focus on developing the skills and abilities of staff and providing career pathways, through health worker training program and supporting staff through tertiary education.

**Sol Bellear, Chair**  
**Aboriginal Medical Service, Redfern**



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## **Independent Auditor's Report To the Members of Aboriginal Medical Service Co-Operative Limited**

We have audited the accompanying financial report of Aboriginal Medical Service Co-Operative Limited (the "Entity"), which comprises the statement of financial position as at 30 June 2015, the statement of profit or loss and other comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, notes comprising a summary of significant accounting policies and other explanatory information and the Responsible Entities' Declaration of the Entity.

### **Responsible Entities' responsibility for the financial report**

The Responsible Entities of the Entity 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 Australian Charities and Not-for-profits Commission Act 2012, and the Co-operatives National Law (NSW). The Responsible Entities' responsibility also includes such internal control as they 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.

### **Auditor's responsibility**

Our responsibility is to express an opinion on the financial report based on our audit. We conducted our audit in accordance with Australian Auditing Standards. Those standards require us to comply with relevant ethical requirements relating to audit engagements and plan and perform the audit to obtain reasonable assurance whether the financial report is free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial report. The procedures selected depend on the auditor's judgement, including the assessment of the risks of material misstatement of the financial report, whether due to fraud or error.

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In making those risk assessments, the auditor considers internal control relevant to the Entity's preparation of the financial report that gives a true and fair view 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 appropriateness of accounting policies used and the reasonableness of accounting estimates made by the Responsible Entities, as well as evaluating the overall presentation of the financial report.

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

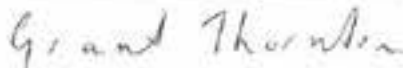
#### **Independence**

In conducting our audit, we have complied with the independence requirements of the Accounting Professional and Ethical Standards Board and the Australian Charities and Not-for-profits Commission Act 2012.

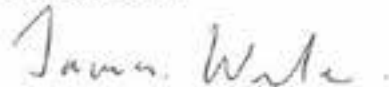
#### **Auditor's opinion**

In our opinion:

1. the financial report of Aboriginal Medical Service Co-Operative Limited is in accordance with the Australian Charities and Not-for-profits Commission Act 2012, including:
  - a. giving a true and fair view of the Entity's financial position as at 30 June 2015 and of its performance for the year ended on that date; and
  - b. complying with Australian Accounting Standards- Reduced Disclosure Requirements and the Australian Charities and Not-for-profits Commission Regulation 2013; and
2. The financial statements and notes of the Co-operative for the year ended 30 June 2015 are in accordance with the requirements of the Co-operatives National Law (NSW).



GRANT THORNTON AUDIT PTY LTD  
Chartered Accountants



James Winter  
Partner - Audit & Assurance

Sydney, 30 September 2015

# Statement of Profit or Loss

For the year ended 30 June 2015

	2015 \$	2014 \$
<b>Income</b>		
Grants & subsidies	9,401,149	9,084,722
Other income	572,775	227,180
<b>Total Income</b>	<b>9,973,924</b>	<b>9,311,902</b>
<b>Expenditure</b>	<b>2015 \$</b>	<b>2014 \$</b>
Labour costs	6,867,116	7,729,185
Non-labour costs	2,794,362	2,372,076
<b>Total Expenditure</b>	<b>9,661,478</b>	<b>10,101,261</b>
<b>Total Income/(Loss) for the year</b>	<b>312,446</b>	<b>(789,359)</b>

# Statement of Financial Position

As at 30 June 2015

<b>Assets</b>	<b>2015</b>	<b>2014</b>
<b>Current Assets</b>	<b>\$</b>	<b>\$</b>
Cash and cash equivalents	3,009,393	4,639,765
Other current assets	374,994	52,590
<b>Total Current Assets</b>	<b>3,384,387</b>	<b>4,692,355</b>
<b>Fixed Assets</b>	<b>5,058,784</b>	<b>3,853,824</b>
<b>Other Assets</b>	<b>2,422</b>	<b>2,361</b>
<b>Total Assets</b>	<b>8,445,593</b>	<b>8,548,540</b>
<b>Liabilities</b>		
<b>Current Liabilities</b>		
Trade and other payables	502,666	290,173
Other current liabilities	801,318	1,220,800
<b>Total Current Liabilities</b>	<b>1,303,984</b>	<b>1,510,973</b>
<b>Long Term Liabilities</b>	<b>55,175</b>	<b>263,579</b>
<b>Total Liabilities</b>	<b>1,359,159</b>	<b>1,774,552</b>
<b>Net Assets</b>	<b>7,086,434</b>	<b>6,773,988</b>
<b>Total Funds</b>	<b>7,086,434</b>	<b>6,773,988</b>





## Performance Report

### LaVerne Belleair, Acting CEO

#### Key objectives

In the 2013/14 report the AMS outlined several goals that we have worked towards and have outlined those key goals below;

#### Medical Clinic

##### *Reintroducing booked appointments for workers*

During the year AMS reintroduced a booking system for our patients. This enables our patients, particularly those with school aged children or working families, to book their medical appointment and GP in advance to ensure other commitments can be met.

##### *Opening the Nurse Assessment room*

The introduction of the Nurse Assessment room and triaging of our clients decreases the time patients spend with the GP collecting routine observations, clinical indicators and other relevant information the GP will require when seeing patients. This practice has assisted in reducing our wait time.

#### Chronic Care

##### *Launch geriatrician service*

Earlier this year the AMS launched our geriatrician service, in partnership with Sydney Local Health District (SLHD), this service enable our elders to see an aged care specialist within the comfort of their trusted medical service. This service going into the future will also assist our elders to live longer with the appropriate aged care support interventions and services.

##### *Launch Endocrinology service*

Similarly with the Geriatrician service, the AMS has launched an Endocrinology service, in partnership with Sydney Local Health District. This service deals with the diagnosis and treatment of diseases related to hormones. A significant proportion of AMS patients suffer from endocrine related disease, specifically diabetes. This service provides specialist advice and services for conditions related to diabetes management, in conjunction with our diabetes educator.

#### Drug and Alcohol

##### *Relocate to central health campus to increase efficiency*

The Drug and Alcohol unit was located on 132 Redfern Street. During this year the AMS relocated the service onto the main campus site. This move enabled improved access to services by providing an appropriate access to community members who may be immobile or mothers with prams.

##### *Review opioid treatment program to ensure best practice*

The AMS reviewed the opioid treatment program to align with NSW health guidelines and adhere to the pharmaceuticals act. New processes, revised policies and procedures, ensure that patients' are receiving evidence based best practice drug and alcohol support and service.

## Mental Health

### *Explore merging with Drug and Alcohol service*

During the year following the relocation of the Drug and Alcohol service to the main campus, the AMS merged drug and alcohol unit with Mental Health services to deliver a robust holistic service to our clients with substance misuse issues or mental health concerns.

### *Review of mental health services for members of the Stolen Generation*

The AMS undertook a review of mental health service, with a specific aim of reviewing services for members of the stolen generation. The report highlighted several improvement areas, these include data recording, staff development and training and trauma counselling education. The AMS are implementing several recommendations over the next coming year.

## Dental

### *Improve booking system*

The AMS have reviewed our dental patient administration (booking) system throughout the year. The review highlighted gaps in our current procedures a new dental patient administration (booking) system called titanium, will be rolled out in the coming months.

### *Reduce wait list for dental appointments*

It is anticipated the new software will assist with reduced wait list for appointments.

## Public Health

### *Increase community relations focus*

AMS has relaunched our social media pages, to engage community members in AMS events and services.

AMS are represented on several community interagency meetings that share information, service knowledge and experience with our peers to ensure a robust holistic health and wellbeing service to our patients.

### *Improve patient access to transport*

Throughout the year the AMS has been reviewing and refining our transport policy. Access to health care services is a major concern and health barrier for our patients. Reviewing the transport policy ensure the most vulnerable patients are attending appointment on time.

## Administration

### *Improve career pathways for Aboriginal Staff*

The AMS has a commitment to developing our staff and future Aboriginal health leaders. This year we have provided the opportunity for several staff to complete certificates in Aboriginal Health Worker Certificates 2 and 3, Business administration certificates 2, 3, 4 and diploma level. We also provide routine training and development to staff including manual handling, fire safety; lateral violence and cultural awareness just to name a few.

### *Increase Aboriginal staffing numbers*

AMS recruitment initiatives have ensured we have a skilled and experienced Aboriginal workforce. To date the AMS has 63% of staff identifying as Aboriginal and/or Torres Strait Islander. This includes staff in all disciplines, Aboriginal Health workers, nursing staff, administration staff and management.

## Partnerships

The AMS has resigned partnerships with the Sydney Metropolitan Local Aboriginal Health Partnership. The partnership members have expanded to include the Sydney Children's Hospital (Randwick) and St Vincent Health Care (Sydney).

LaVerne Belleair, Acting CEO  
Aboriginal Medical Service, Redfern

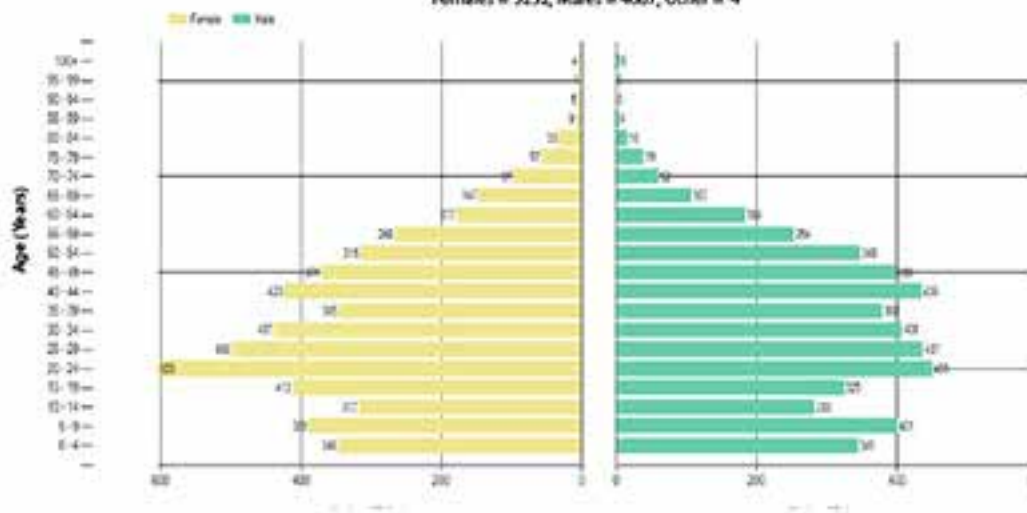


# Our patient profile

## Total registered clients

Demographic Breakdown by Age [population = 10143]

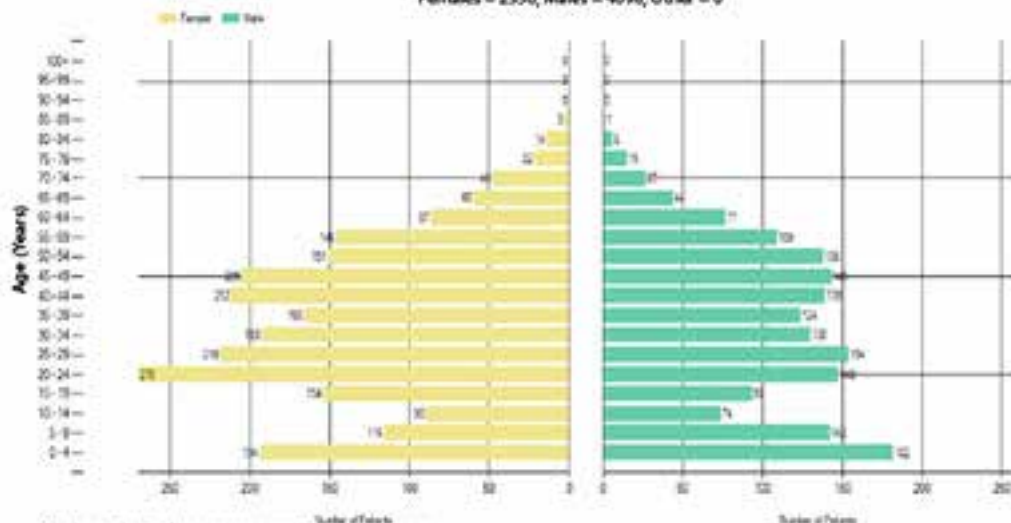
Females = 5252, Males = 4887, Other = 4



## Total active\* clients

Demographic Breakdown by Age [population = 4096]

Females = 2350, Males = 4096, Other = 0



\* Active patients; three or more presentations in 2 years

# Performance data

## CS-1 Episodes of Care

The number of episodes of care provided to clients in the last 12 months.  
Excludes residential care, groups, administration and transport-only contacts.

Gender	Male	Female	Not Recorded	Total
Indigenous Status				
Aboriginal and Torres Strait Islander	27723	36895	0	64618
Non-Aboriginal and Torres Strait Islander	370	490	0	860
Indigenous status unknown	139	132	0	271
TOTAL	28232	37517	0	65749

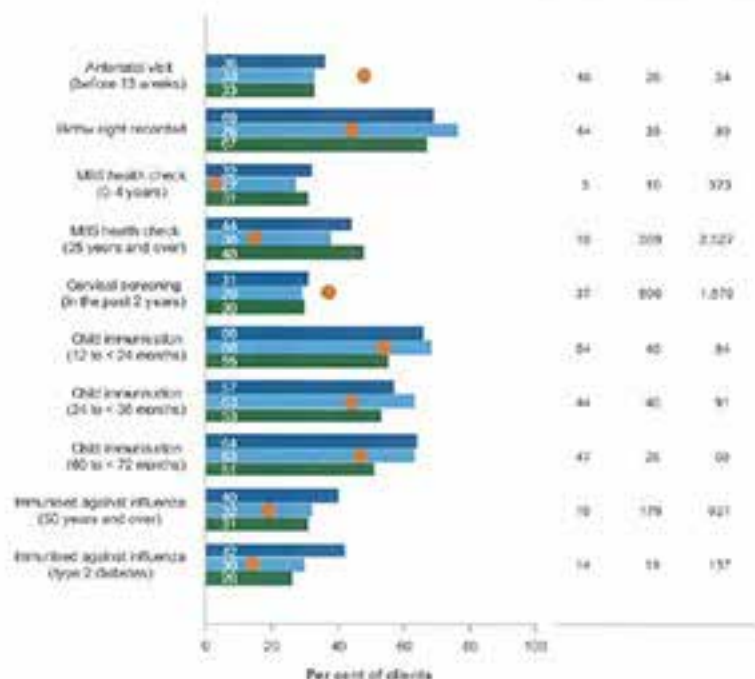
## New Patients 2014–2015



- National %
- NSW & ACT %
- Major CMA %
- Your service %
- Your service % (denominator less than 20, therefore percentage more variable)

#### Process measures

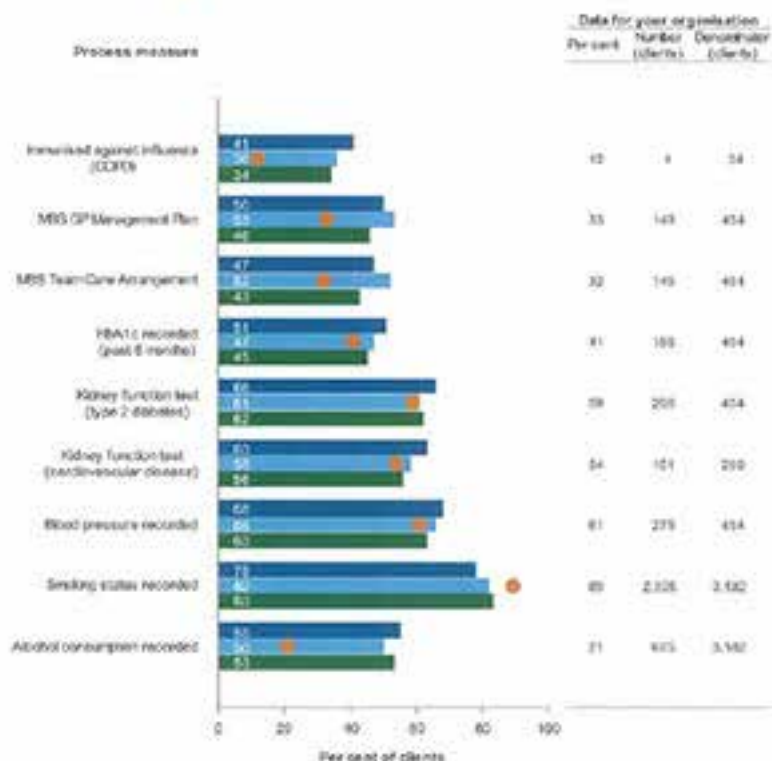
Data for your organisation  
(Per cent) Number (clients) Denominator (clients)





## Performance data, continued

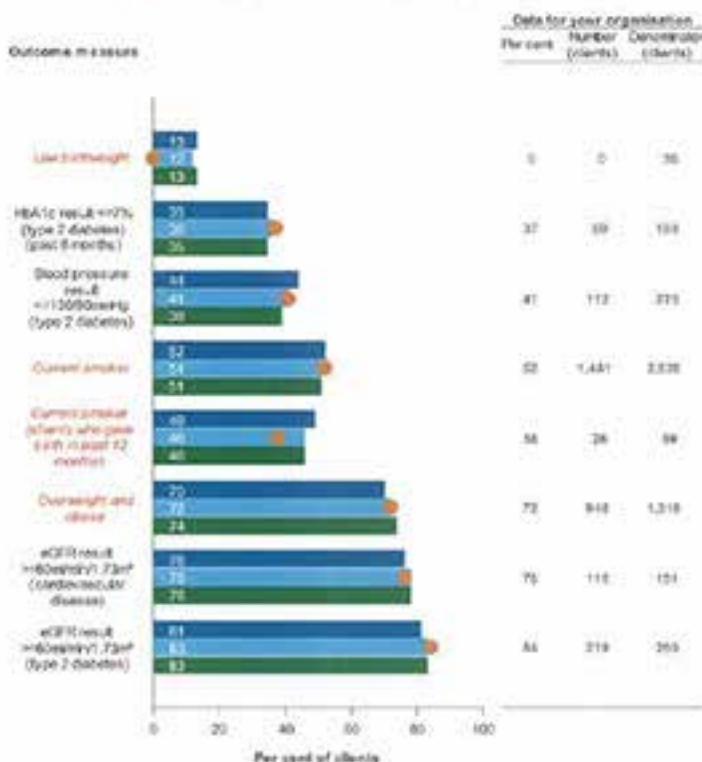
- National %
- NSW & ACT %
- Murrumbidgee %
- Your service %
- Your service % (denominator less than 20; therefore percentage more variable)



National Key Performance Indicators (nKPIs) –  
May 2015



- National %
- NQIP & AOT %
- Major Cities %
- Your service %
- Your service % (denominator less than 20, therefore percentage more variable)



\*A low proportion is the preferred outcome for measures with not defined goals.

#### National Key Performance Indicators (nKPIs) – May 2015



Sol Belleair



Dulcie Flower



Shareen Malamoo



Rick Lyons



Barb McGuinness



Craig Madden



Edie Coe



## CEO



Naomi Mayers CEO

## MANAGERS / EXECUTIVES



LaVerne Belleair  
Acting CEO



Karen Silva  
Practice Manager



Josh Roxburgh, Community  
Relations & Public Health Manager

## AMS ON DUTY STAFF PHOTO



## COORDINATORS



**Laurel Robinson**  
Public Health



**Brad Freeburn**  
Drug & Alcohol,  
Mental Health



**Barbara Kennedy**  
Aboriginal Health  
Worker



**Tracey Duroux**  
Community  
Relations



**Mona Pali**  
Administration



**Toni Madden**  
Transport



**Kim Mafi**  
Dental



**Maree Tohi**  
Medical



The social determinants of health are the conditions in which people are born, grow, live, work and age. These circumstances are shaped by the distribution of power and resources at the global, national and local levels. Much research has demonstrated a close association between an individual's social and economic status and their health status.

For Aboriginal and Torres Strait Islander Australians, access to the social determinants of health has been mediated by the history of colonisation and dispossession, the denial of recognition of (and rights) to self-determination, the denial and disruption of prior ownership of and ties to the land, and racism have exacerbated the poverty, and social and political exclusion that have resulted in poor health and very high rates of premature death. In 2015 mainstream society still manifests poor understanding of Aboriginal and Torres Strait Islander cultures, knowledge and experiences, and their central role in health and wellbeing.

Social determinants can have an effect on the risk of disease, injury and hence health status, and their access and interactions with health and other services. There are very significant and very well documented health inequities in the health of Indigenous and non-Indigenous Australians, outlined in the Close the Gap literature and the recent report. The gap includes shorter life expectancy and poorer health status and worse outcomes across the life span. The inequities are associated with higher behavioral risks to health and include poorer access to primary, secondary and tertiary health services. It is estimated that differences in access to the social determinants of health between Aboriginal and non-Aboriginal people explain between a third to a half of the mortality gap. Effective actions that can be taken by the health sector to improve Aboriginal people's and Torres Strait Islanders' access to the social determinants of health have been identified and include: holistic responses that actively involve Aboriginal communities,



## Social Determinants of Health Forum

February, 2015



*Reaching out to different communities by  
Aunty Kaylene Slater*

employing Aboriginal staff and valuing Indigenous cultures; collaborating with agencies outside the health sector; having clear program leadership and governance; having committed, culturally aware staff; having an adequate and sustainable resource commitment; being linked to a research and evidence base and ensuring access to high quality primary health care. The Sydney Metropolitan Aboriginal Health Partnership held a Forum on the 19th February,

2015 to identify actions to be taken by the health sector (community controlled and state government) to increase Aboriginal and Torres Strait Islander communities' access to and use of the social determinants of health.

The one day Forum was attended by well over 100 participants, who each participated in two of the eight workshops to discuss and recommend actions. Eight social determinants of health were selected by the Sydney Metropolitan Local Health Partnership for in-depth review and discussion at a one-day Forum held in February 2015.

### The selected social determinants of health for Aboriginal people included:

- Connectedness to family, culture, identity, country and land
- Access to early childhood services and education
- Freedom from racism and racial discrimination
- Appropriate, adequate housing – reducing overcrowding, homelessness, and providing secure housing tenure
- Access to transport
- Access to, participation, and levels of attainment, in primary, secondary, tertiary and vocational education/ training
- Reduced incarceration and culturally-determined decisions and actions by the criminal justice system
- Access to employment and participation in the labour force
- Freedom from addiction.

(Moffatt 2005, Carson 2007, Stewart 2008)

# WentWest Partnership Signed

The Aboriginal Medical Service Cooperative partnered with WentWest primary health care, an organisation that specialises in General Practitioner Registrar training.

The partnership was formed in late 2014 following a review of the AMS GP Registrar training program.

WentWest provided two GP registrars to AMS under the supervision of Dr Kath Keenan (Senior General Practitioner). The GP rotation includes a placement in regional and rural communities throughout

NSW. This partnership provides GPs with greater exposure to Aboriginal Health, and in return benefits our patients and community by providing a well-trained and culturally appropriate GP.



## Aboriginal Tobacco Control Project awarded at the 2014 NSW Aboriginal Health Awards.

The Aboriginal Medical Service in partnership with Tharawal Aboriginal Corporation, Babana Men's Group, Sydney Local Health District and South Western Sydney Local Health District was recognised for its partnership program "The Aboriginal Tobacco Control Project" with two awards at the 2014 NSW Aboriginal Health Awards.

The Aboriginal Tobacco Control Project, "I Quit Because", commenced in 2010, and conducted its final round of evaluation late November 2014. The project was officially launched by the former Governor of NSW Marie Bashir, in October 2011, coinciding with the first advertising phase.

The project, known in the community as the "I Quit Because" project, was awarded the *Building Trust Through Partnerships Award* as well as receiving "The Minister of Health Award". Addressing the smoking rates of Aboriginal and Torres Strait Islanders is identified as a priority in the NSW 2021 Plan and NSW Tobacco Strategy 2012-2017. In response to high smoking rates, a partnership project was established to develop a culturally appropriate tobacco control project for the Aboriginal and Torres Strait Islander community in Sydney.

**The project included:** Social marketing including three advertising phases including Billboards, Bus Shelters, Print Ads and Radio Ads production of resources including hats, T-shirts, scarves, lanyards, fridge magnets, temporary tattoos and bags Website [www.iquitbecause.org.au](http://www.iquitbecause.org.au) and a Facebook page at [www.facebook.com/iquitbecause](http://www.facebook.com/iquitbecause) Promotion at community events including Yabun, NAIDOC, World AIDS Day, Close the Gap and World No Tobacco Day Introduction of a Community grants program Quit group programs and support NRT information and distribution Training and supporting staff to implement tobacco cessation brief advice.





# Community Events 2014 – 2015

AMS promotes healthy lifestyles through community events



*NAIDOC event at the Aboriginal Medical Service Cooperative in July 2015*



*World AIDS Day event at the Aboriginal Medical Service Cooperative in December 2014*



*Women's Cancer Promotion event on the Tribal Warrior in Sydney Harbour March 2015*



*Biggest Morning Tea event at the Aboriginal Medical Service Cooperative May 2015*



*Men's Cancer Promotion event on the Tribal Warrior and Goat Island in Sydney Harbour March 2015*



# Improving Geriatric Care in Partnership

June, 2015



In June 2015 the Aboriginal Medical Service and Sydney Local Health District joined forces to open new clinics focusing on aged health and endocrinology. Two new clinics have opened at the Aboriginal Medical Service, Redfern, with some assistance from clinicians from Sydney Local Health District.

The aged health and endocrinology clinics are the result of a highly collaborative planning and consultation process. These clinics offer a multidisciplinary team of geriatricians, endocrinologists, and metabolic experts, and will link in with specialist clinics at Royal Prince Alfred Hospital. The diabetes and general endocrinology clinic will fill gaps in the spectrum of service provision for diabetes, providing prevention, treatment, monitoring, surveillance for complications, management of complications and co-morbidities.

Delegates from the Aboriginal Medical Service, Chief Executive of Sydney Local Health District, Dr Teresa Anderson, delegates from SLHD and other special guest came together at the AMS in Redfern for the launch of these essential new clinics. We still have a long journey ahead if we want

*"The aged health & endocrinology services provided here will go a long way in addressing the chronic disease that is recognised as a major priority for Aboriginal health"*

to close the life expectancy gap between Aboriginal and non-Aboriginal Australians, even though we have had a some slight improvement in recent years. "The aged health and endocrinology services provided here will go a long way in addressing the chronic disease that is recognised as a major priority for Aboriginal health," Dr Anderson said.

Sydney Local Health District's director Aged Care, Rehabilitation and Chronic Care, Dr John Cullen, said the aged health clinic would provide the specialist expertise of a geriatrician in the management of multi-

morbidity, cognitive difficulties and functional limitations. "There was a real need for an aged care health service in this community. Through the expertise of a geriatrician, we aim to improve access to other district services.

Already, the service has been well received by those involved, and the community has really welcomed it," Dr Cullen said. Professor Ian Caterson from the University of Sydney said "I'm very pleased to be able to be a part of the Aboriginal Medical Service and to bring our expertise to develop a very unique service to this community."

# AMS Promoting Cancer Awareness

April, 2015

On Friday the 10th and Friday the 17th of April the AMS held Mens and Women's Cancer Awareness Cruises. The purpose of the cruises were to increase cancer awareness within the community and to prompt men and women to attend screening and tackle the shame/reluctance and fear associated with screening.

Both the Men's and Women's events started at the AMS where most participants met to catch the AMS bus to set sail on the Tribal Warrior.

During the Men's cruise they sailed to Goat Island and had an information session provided by Dr Daniel Macgee and also had participants share their personal cancer journeys/stories.

During the Women's cruise they travelled around Sydney Harbour and enjoyed, morning tea, lunch and afternoon tea, between those the ladies listened to presentations by Melanie Ireland



(BreastScreen NSW) from BreastScreen talk about breast screening, Annette Sinclair (from the AMS) talking about cancer awareness and Dr Rochelle Venturi (AMS) and RN & Clinic Coordinator Maree Tohi (AMS) talking about Bowel Cancer Screening / kits and info also Cervical Cancer and pap smears/ screening/treatment.

The day was a roaring success, with four participants separately letting staff know they have a bowel cancer screening kit at home that they received in the mail that they were going to finally use. Other women were also prompted to attend AMS for other screening.

During the day all the ladies seem to really enjoy themselves and we received heaps of positive feedback.

We even had a steady flow of ladies enjoying a dance on the top deck, even during the rain. Many participants asked if this could be an ongoing event as they enjoyed the day so much.

**Feedback:** "It was an excellent presentation on cancer awareness. Perhaps AMS can conduct smaller workshops with the organisations present today" "Very relaxing and fun and awesome" "AMS does an excellent job. Thankyou" "Having people qualified to discuss the issues regarding cancer was necessary and appreciated by me and I learnt some very important facts regarding cancer awareness" "Love everything about today - It was run like a well oiled machine" "It was good to meet all the new staff at the AMS Redfern. Very good initiative" "I thought it was great and informative a relaxed event" "Thankyou for everything" "Fantastic day and a very timely event as I am behind in both breast and pap screening, which I will get onto" "A huge thank you to Tracey & her team for a fantastic day that was appreciated by one & all"



# Canadian & United States Visitors to AMS

The Aboriginal Medical Service Redfern hosted delegates from Canada and the United States on Monday 27 April. **Canadian delegates:** Jack McCarthy, Executive Director Somerset West Community Health Centre (Ottawa, Ontario). Jack is also former Chair of the Canadian Assoc of Community Health Centres. Lynne Raskin, CEO South Riverdale Community Health Centre (Toronto, Ontario). Lynne is also a current Board Member of Canadian Assoc of Community Health Centres. Simone Thibault, Executive Director Centretown Community Health Centre (Ottawa, Ontario) Simone is a current Board Member of Canadian Assoc of Community Health Centres. Bill Davidson, Executive Director Langs

Community Health, Wellness (Cambridge, Ontario) **Hersh Sehdev**, Executive Director Kingston Community Health Centres (Kingston, Ontario). **Bruce Gray**, CEO Northwest Regional Primary Health Care Association (NWRPCA) (Seattle, Washington). **Anita Monahan**, CEO Yakima Neighbourhood Services (Yakima, Washington). Anita is current chair of NWRPCA and former President of US National Association of Community Health Centers. The visit took place in the afternoon and the AMS put together an introduction to the service, programs and service delivery models unique to AMS Redfern. Informed delegates about the local community needs, challenges, and provided a site tour.



## Aboriginal Medical Service New Donations Page

The ability to make a donation to the Aboriginal Medical Service became a lot easier in 2015 with the introduction of the AMS Just Giving page.

Anyone who would like to donate to the AMS can do so by simply going to <https://www.justgiving.com/amsredfern/> and follow the links.

# JustGiving™

## Aboriginal Medical Service is going Social

The Aboriginal Medical Service now has Facebook and currently have over twelve hundred page likes.

The Facebook page is updated regularly with event flyers, health days, photos from Aboriginal Medical Service events and links to other important information.



Facebook has proven to be a useful tool in keeping the community informed on the social media platform.

# Eora Dharawal Elders Olympics 2015

Marrickville, March 2015 Elders came together 20th of March 2015 to take part in the Eora/Dharawal Elders' Olympics at Marrickville PCYC. The Aboriginal Medical Service HACC team and Health Workers came together and registered patients to attend the first ever Eora/Dharawal Elders Olympics.

Over 12 Elders from the AMS registered to participate and came up against teams from Wyanga, Allena, Guriwal and Kurranulla.

The AMS Elders team named themselves the "Redfern Rebels" and all turned out on the day sporting their team colours. The event aimed to improve the physical health of our Elders and to increase social activity and social and emotional wellbeing of participants. Elders teams competed in a variety of sporting activities, including tunnel ball, relays, quoits and traditional games such as "gorri". All participants had a fantastic time and are looking forwards to next years event that will be held on the 1st of April 2016.



## New Sexual Health Clinic Up and Running at the AMS

This year the AMS has initiated a new Sexual Health Clinic held every Wednesday and Thursday. The clinic team is Dr Lawrence Loh & Luke Bell Aboriginal Health Worker, the clinic works on a drop in basis and promotes improving sexual health and screening including;

- Health Checks • Men's Health Assessments
- Health Education • Follow Ups • Yarn about Health Issues • Screening & Treatments and invite clients to drop in for a yarn.



## World AIDS Day Success

The AMS annual World AIDS event was again on in December 2014. AMS staff ran another great event for World AIDS Day.

The AMS, HIV/AIDS and Related Programs (HARP) Health Promotion Sexual Health Service, and ACON all distributed Sexual Health info and community came and enjoyed another great feed provided by the AMS team!





## Aboriginal Men's Fitness Group Continues to Grow

Male Health Workers at the AMS facilitate a Men's Health Group twice a week and numbers are continuing to grow.

As many as 19 patients/participants attend this ongoing group that aims to improve the physical, emotional and well being health in all men.



## Elders Water Aerobics Program in its 10th year

Female Health Workers at the Aboriginal Medical Service are continuing to facilitate the Water Aerobics program for our aged and chronic care patients of the AMS.

The group now in it's 10th year continue to provide ongoing physical activities for some of our most in need clients, Health Workers provide transport, support and a healthy lunch to participants including follow up and assistance where ever else needed.

## Aboriginal Women's Weaving Group

Aboriginal Health Workers at the AMS have continued to facilitate a Women's Weaving Group. The group is open to any female patients of the Aboriginal Medical Service and provides support and promotes social and emotional well being to participants.

A number of the participants have gone into self enterprise and run their own workshops within the community.



## Mum's and Bub's Group Provides Support for Families

The AMS Mum's and Bub's group continued this year. The group aims to provide support and information to mothers of all ages.

This year the group had a number of useful information sessions, outings including a visit to Sydney Wildlife Park and a Christmas party together at one of our local parks.

The group is inclusive to all mothers with babies and toddlers and provides a play area for children and a healthy lunch for participants.

**PINK RIBBON MORNING TEA**  
BREAST CANCER FUNDRAISER

Come along on Thursday the 26th of October to our Pink Ribbon Morning Tea & wear something pink on the day. Enjoy some yummy cakes and savouries and help support National Breast Cancer Awareness Month.

Where: Aboriginal Medical Service  
36 Turner St, Redfern

When: Thursday, 26th October  
Time: 9.30am

**BY GOLD COIN DONATION**

It's a lovely tradition to help support the fund at National Breast Cancer Awareness Month. Every dollar raised goes to the Breast Cancer Research Fund. We're looking for people to help support the fund. Please bring your gold coins to the event. Gold coins are available from the bank. Please bring them to the event.





**BBQ & INFORMATION DAY**  
ABORIGINAL MEDICAL SERVICE

Come along to the AMS for a World AIDS Day event  
29th November  
10.30AM – 2.00PM  
36 Turner Street, Redfern

**WORLD AIDS DAY**

For more information please call 02 9219 3029





**ARE YOU AGED BETWEEN 40 AND 74?**  
**WOULD YOU LIKE A DAY OF PAMPERING?**  
**WOULD YOU LIKE TO ATTEND A SPECIAL HIGH TEA?**

**ALL female patients of the AMS who attended the Breast Screening Bus are invited to the AMS Redfern for a special Aboriginal Women's Pamper Day and High Tea Wednesday 12<sup>th</sup> March 10<sup>am</sup> - 2<sup>pm</sup>**

(Bookings are essential, to come to AMS to the AMS)

For more information and for bookings contact Laurel, Tracey, or Phillip at the AMS on 02 9219 3029






**KOORI WOMEN'S CANCER AWARENESS DAY**

The cancer prevention and screening event will focus on a woman's role in affecting Aboriginal health.

When: Friday 10th April 2015  
Where: 36 Turner St, Redfern  
Time: 10am - 2pm

For more information please call 02 9219 3029

**KOORI MEN'S CANCER AWARENESS DAY**

The cancer prevention and screening event will focus on a man's role in affecting Aboriginal health.

When: Friday 10th April 2015  
Where: 36 Turner St, Redfern  
Time: 10am - 2pm

For more information please call 02 9219 3029




**WORLD NO TOBACCO DAY**

**BBQ & INFORMATION DAY THURSDAY 28<sup>th</sup> MAY 2015**  
12.30pm-2pm

**WOULD YOU LIKE TO QUIT SMOOKING?**

Come along and have a feed & find out about ways to help you quit.

For more information please call 02 9219 3029




**EORA/DHARAWAL ELDERS' OLYMPICS**

**DO YOU HAVE A CLIENT THAT MAY BE INTERESTED IN JOINING THE AMS ELDERS OLYMPICS TEAM?**

**PARTICIPANTS MUST BE HACC ELIGIBLE (50 & OVER)**

OLYMPIC EVENTS INCLUDE  
GORRI, QUODITS, TUNNEL BALL, RELAY,  
FOX TAIL BEAN BAG THROWING

**WHEN: FRIDAY 20TH MARCH 2015**  
**WHERE: MARRICKVILLE PCYC, MARRICKVILLE**

**FOR MORE INFO & TO SIGN UP**  
CONTACT LAUREL ext 223 OR TRACEY ext 262



**AUSTRALIA'S BIGGEST MORNING TEA**

Come along enjoy morning tea & help the AMS raise money for cancer

**AMS REDFERN**  
36 Turner St, Redfern

Thursday 28th May 2015  
10am-12.30pm

FOR MORE INFO CONTACT  
Tracey at 02 9219 3029




**NAIDOC**

**9<sup>th</sup> July 2015 @ the AMS REDFERN 10am - 2pm**

**BBQ FACE PAINTING ELDERS TENT**  
**ACTIVITIES FOR THE KIDS ENTERTAINMENT**  
**MUSIC BALLOONS STALLS & MUCH MORE**

**IN THE AMS CARPARK 36 TURNER ST, REDFERN**

FOR MORE INFO OR TO HAVE A STALL CALL TRACEY OR PHILLIP 02 9219 3029






# NOTES



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