

Contents

Who We Are Vision and Mission	3
Our Primary Activities How We are Structured and What We Do	4
Funding Appreciation List	5
How We are Funded	6
Organisational Chart	7
Acknowledgement of Long Serving Employees Chairpersons Report	8
CEO Report	10
Feature Story 1: Peeneeyt Maar - 'Strong Men' Project	16
Gunditjmara Divisional Program Reports Gunditjmara Health Service Division GP Services	
South West Aboriginal Health Partnership (SWAHP)	22
Gunditjmara Aboriginal Dental Clinic Aboriginal Health Workers / Aboriginal Health Practitioner	26
Social and Emotional Wellbeing Program Aboriginal Health Promotions and Chronic Care (AHPACC) Program	27
Alcohol and Other Drugs (AOD) Program Care Coordination and Supplementary Services (CCSS) Program	28
Koori Maternity Services (KMS) Program Healthy Lifestyle – Tobacco Action (HL/TA) Program Koori Pre-School Assistant Program	29
Koorramook Playgroup and Parent Education Program (Possum Playgroup)	30
Feature Story 2: My Journey to becoming an Aboriginal Health Practitioner	32
Gunditjmara Aged Care and Disabilities Services Division Home and Community Care (HACC) Program	34
Community Aged Care Package and Linkages (CACPs) Program Gunditjmara Child, Youth and Family Services Division Housing and Property Program	35
Indigenous Tenancies at Risk (ITAR) Program Koori Youth Justice (KYJ) Program Leaving Care Program	36
Regional Indigenous Family Violence Program	37
Feature Story 3: Elder Abuse Brochure Launch	38
Financial Statements for the year ended 30 June 2014.	40

Who We Are:

Gunditimara, based in Warrnambool Victoria, Australia, is an independent, community based not for profit organisation.

Founded in 1979 by a group of dedicated volunteers from the local Aboriginal Community and officially incorporated in 1982 under the Victorian State Cooperatives Act, we have grown from a small group of dedicated volunteers to an organisation with 313 members and directly employ 45 staff members comprising of 40 Full time employees and 5 part time employees

Gunditimara is, a locally owned culturally appropriate Aboriginal Community Controlled Health and Social Welfare organisation that operates under the philosophy of Aboriginal Community Control in all that we do.

'Aboriginal Community control means the empowering of a Community through the adoption of appropriate organisational structures which enable all Aboriginal people in the local Community the opportunity to be represented as members and to be involved in the decision making process and, therefore, the right to participate and contribute to the goals, structure and operations of its services.

The process of Aboriginal Community control in the area of health means that an Aboriginal Health Service is independent and autonomous and is controlled by the local Aboriginal Community it serves in order to provide culturally appropriate health care to meet its health needs as defined by that Community.

Aboriginal Community control is central to achieving and maintaining cultural well-being and is therefore essential to the philosophy and operations of Aboriginal Health Care services. Aboriginal Community control is also about responsibility and accountability to the Community having regard for local cultural perceptions and imperatives.

The essence of Aboriginal Community control, in this context, distinguishes it from all other methods of control by the coming together of minds and experiences, harnessing talent and diverse abilities from within the local Aboriginal Community towards regaining and maintaining its well-being.'

(Extract from the AH&MRC Constitution. See also the National Aboriginal Community Control Health Organisation's (NACCHO) definition.)

Vision and Mission:

The Vision of Gunditjmara is: 'Healthy people and a Community empowered to succeed' whilst our Mission is 'To provide culturally sensitive support for the local community through programs and services in education, health, housing, aged care, childcare and employment and training'

Our Primary Activities:

The primary activities of the Cooperative are to provide, and/or facilitate the provision of

- 1. Health and related services;
- 2. Cultural and educational activities;
- 3. Housing and accommodation;
- 4. Aged and Child care;
- 5. Employment, training and education; and
- 6. A Juvenile Justice Program.

To the Aboriginal community of Warrnambool and the Western District of Victoria

How We are Structured and What We Do:

The organisation is structured via a three-tiered system comprising of the following:

- 1) **MEMBERS:** whom have a direct democratic voice and voting rights over the Strategic direction/mission of the organisation.
- 2) **BOARD OF DIRECTORS:** that comprise of seven volunteer members who are voted on by the general Membership via an open election process at an Annual General Meeting. Board Members typically serve three year tenures and conduct business inline with the organisations own Model Rules/Constitution and the overarching Cooperatives Act.

Board of Directors			
Number of Meetings Held	7		
Director	Eligible	Attended	
Joseph Chatfield	7	6	
Bernice Clarke	7	7	
Caleb Clarke	7	2	
Jarrod Clarke	7	7	
Joshua Edwards	7	5	
Allan Miller	7	7	
Louise Wackett / Chatfield	7	5	

The following members sat as Directors during 2013-14:

- Allan Miller (Chairperson)
- Joseph Chatfield (Vice Chairperson)
- Josh Edwards (Secretary)
- Jarrod Clarke (Treasurer)
- Bernice Clarke
- Caleb Clarke and
- Louise Wackett/Chatfield

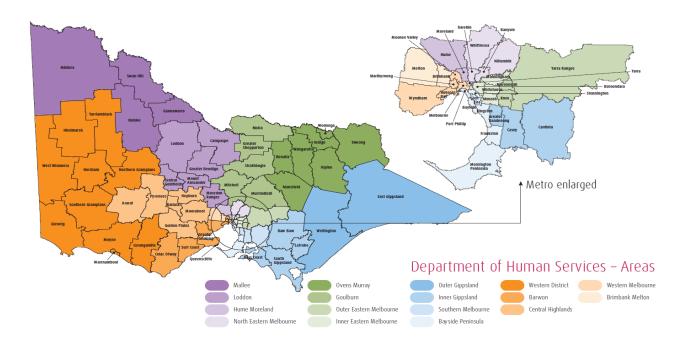
A critical role of the Board, in a nutshell, is

- I. To determine, review and maintain the vision, purpose and values of Gunditimara, and approve short and long-term strategies,
- II. Approve annual budgets and expenditure over pre-specified limits,
- III. Appointment, performance evaluation of the CEO,
- IV. Risk oversight,
- V. Provide a check on the integrity of external financial and non-financial reports and support effective engagement with key stakeholders.

and four Managers who's primary mandate it is to manage the four distinct Divisional areas within Gunditjmara operations. The four divisional areas comprise of Corporate Services Division, Aged Care & Disabilities Services Division, Health Services Division and Child Youth and Family Services Division. The Team Leader also ensures that each Divisional area and program is focused on achieving Funding Service Agreement targets, supporting each staff member in their job role, ensuring staff are supporting and empowering clients and also ensuring that programs that are offered to members and clients are, at all times, aligned to the Mission of Gunditjmara and continually aiming for innovation and best practice.

Gunditjmara has an annual operating budget of approximately \$3.0 million and we deliver our services presently across two separate locations (soon to be three as we are presently repairing and reinstating our former Head office that was destroyed by fire). Our current Head office is located at 135 Kepler Street Warrnambool and accommodates our Aged Care and Disabilities, Child Youth and Family Services and Corporate Services Divisional teams as well as two programs from the Health Divisional area. Our second site situated at 3 Banyan Street Warrnambool accommodates our Health Divisional team.

Gunditjmara's programs are wide-ranging and are designed to respond to the needs of Aboriginal people in the wider Warrnambool region including the Shire of Moyne, Framlingham, parts of Corangamite Shire, as well as parts of Southern Grampians and Glenelg Shires.



Funding Appreciation List:

The ongoing and much needed funding support from our various government and non-government partners enables Gunditjmara, making it all the much easier to;

- improve and update facilities resources and equipment,
- introduce new services and programs as well as build on existing service offerings.

These actions have a tangible flow on effect to meeting the needs of our community and members.

We would like to extend a word of thanks and acknowledge the funding contributions during the year from the following government organisations.

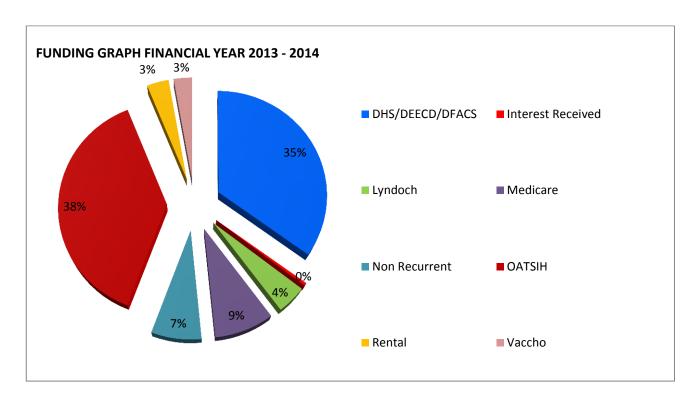
Department of Human Services (DHS)

- Department of Health (DOH)
- Office of Aboriginal and Torres Strait Islander Health (OATSIH)
- Department of Education and Early Childhood Development (DEECD)
- Department of Education, Employment and Workplace Relations (DEEWR)
- Department of Families, Housing, Community Services and Indigenous Affairs (FaCHSIA)
- Lyndoch Living Warrnambool

How We Are Funded:

The pie chart below depicts the funding revenue received from all funding sources During the 2013---14 financial year.

(Note: This pie chart should be read in Conjunction with the 2013---14 Gunditjmara's Audited Financial Statements at Page 40



Administration Supervisor Annette Ludeman Trainee Keceptionist Natasha Douglas Administration Team Leader Narcus Clarke Corporate Services 135 Kepler Street Accounts Officers Mangaret Kevell January Amold Finance, Assets & Vehir Team Leader Tim Pekin Media & Marketing Sub Committee Personal Assistant Annette Ludeman Board Assistant January Arnold Home and Community Care, Program HACO Workers Finances Cornelises Jonathon Hogge Breat Clarke Notal burrows Community Aged Care Package Program CACPs Illanager Eliza Carty Aged Care & Disabilities Services 135 Kepler Street Organisational Chart Strategic Planning Sub Committee Community Members Child, Youth & Adult Support Services 135 Kepler Street Indigenous Tenancies at Risk Program II.AK Worker Kaelene Kenneally Indigenous Family Violence Program Vacant Housing and Property Program Housing Officer Jarrod Clarke Koori Youth Justice Program KTJ Worker Bobby Cunningham Leaving Care Program Leaving Care Support Worker Brett Clarke Child, Youth & Adult Su Quality Assurance & Submission Writing Sub Committee SWAHP Coordinator Annie Bertram Aboriginal Health Promotion and Chronic Care Program AHPACC Nurse Carry Alxean Social & Emotional Wellbeing Program SEMB Worker Brady Jones Aboriginal Health Workers Aboriginal Health Practitioner Georgina Taylor Aborigmal Health Worker Rosilyn Britton Medical Administration Medical Receptionist Jenny Sack Medical Transport Bev Harnson Healthy Lifestyle Tobacco Action Worker Ken Brown General Practitioners Surjudge Singh Jonathon Duffy Sarah (())(())() Practice Nurse Gaye Mornssey Health Nurse Gabrielle Stevenson Gundigman, Health Service 5 Banyan Street Health Services Team Leader No Connotty Occupational Health & Safety (OH&S) Sub Committee Koori II atemity Services Program KIIS Workers Community Ilinkine Raye Nettectory Koori II atemity Health Worker Simone Bamblett Koori Pre School Program Koori Pre-School Assistant (KPSA) Sherry Johnstone

Acknowledgement of Long Serving Employees			
Name	Title	Commencement Date	Years of Service
Glenda Thompson	Aged Care and Disabilities Manager	01/04/1997	17
Bobby Cunningham	Koori Youth Justice Worker	24/02/1999	15
Beverley Harrison	Medical Transport Driver	28/05/2001	13
Georgina Taylor	Aboriginal Health Practitioner	01/07/2001	12
Annette Ludeman	PA to CEO / Administration Supervisor	05/07/2004	9
Frances Cornelissen	:Home and Community Care Team Leader	09/11/2004	9
Roma Gaye Morrissey	Practice Nurse	27/05/2005	9

Chairperson's Report:

Dear Members

On behalf of the Board of Gunditjmara Aboriginal Cooperative Ltd (*Gunditjmara*), I have much pleasure in presenting the 2013/14 Annual report to the membership of Gunditjmara.

This report provides a brief snapshot of the activities and achievements as well as the financial performance of our organisation over the 13/14 financial year. My report specifically focuses on the activities and achievements at the strategic domain of the organisation, which encompasses the tasks performed at board level whilst the CEO's report will focus specifically on the activities and achievements of the operational domain of the organisation, which is the day to day functions of Gunditjmara.

It is appropriate that I acknowledge the sad passing of respected Elders Uncle Bill Edwards and Auntie Maisie Rose Clarke during the year. Uncle Bill and Auntie Maisie were both Life members of Gunditjmara and had an active involvement with the cooperative over many many years. Additional to the life membership honour, Uncle Bill was also a Founding Member and First Director of the cooperative also. both of them will be sorely missed.

The 13/14 reporting period marked an exciting and significant milestone in the history of our organisation's 32nd year existence with the acquisition of 135 Kepler Street, officially reaching settlement of the property on the 3rd April 2014. Within our CEO's report, found at Page 10, you will find the finer details behind the acquisition of Kepler Street.

135 Kepler Street is an important community asset and it's a place that we all can feel extremely proud of. It is from this new home that now serves as our Head Office site, that we have the increased flexibility and potential to expand and/or diversify our programs and services to our community based purely on the fact that the building provides plenty of space to work with.

On the Governance front the Board has again directed considerable effort around continuing education on a range of strategic level topics with the view to enhancing our governance understanding and capacity. Sinclair Wilson Accountants and Business Advisors delivered a comprehensive finance session to the Board that covered the essential finance related topics that the board should be cognizant of. The Board also continued to update and refine the Gunditjmara governance risk register via stand-alone Risk Management sessions. The Gunditjmara governance risk register is essentially a central repository viewed as a living document that the Board utilizes as a reporting tool to record identified risks that presents at the governance level, both internally and externally to the organisation, categorizes their severity and outlines a proposed mitigation and treatment plan for each risk identified to bring that risk item under an appropriate level of control.

In keeping with our commitment of continually pursuing efficiency and effectiveness throughout the organisation the Board, during the reporting period, self-commissioned a review conducted by RSM Bird Cameron of our operating environment with the view of strengthening and testing our overall internal control environment. Effective systems of internal controls provide a level of assurance and checks and balances that we are effective, transparent and efficient in our organisational systems, processes and practices. Given that a core function of Gunditjmara is to expend public monies it is crucial that our internal control environment, systems, processes and practices are watertight to ensure the long-term viability of our organisation. The review outlined and recommended a number of practical proposals be undertaken that will result in strengthening our internal controls.

July 2013 marked the completion of our 2010/13 three year Strategic Plan. In late October of the same year, two facilitated member and staff workshops were organised to work on developing a brand new five year strategic plan. The facilitated workshops enabled our members and staff to hear about the achievements made against the goals of the 2010/13 Strategic Plan, identify actions from the 2010/13 Strategic Plan that were yet to be completed and identify whether those uncompleted actions should be rolled into the new five year plan and further identify new aspirations and initiatives for insertion into the new five year plan. The workshops were productive and well attended and provided opportunities for members of the community and the staff to be involved in each step of the process. From the discussions held a first draft of the five year strategic plan document was developed. A further member and staff consultation was organised to assess if the draft document had captured the aspirations and proposed initiatives, and generally, determine if the document had in fact hit the mark. I am pleased to announce that the first draft document was ticked off as hitting the mark and subsequently endorsed as final by the Board of Directors. Excitedly our new five year strategic plan will be unveiled at todays Annual General Meeting. We aim to provide an update to our members via annual progress reports at each upcoming AGM over the next five years.

All in all the financial year has been productive with many achievements made on numerous fronts. I take this opportunity to formally thank our members and service users for their active involvement with our programs and services throughout the year.

Special thanks also to our CEO, Marcus Clarke, the Management Team and Staff members for their hard work, dedication and commitment throughout the year.

Thanks also to our many funding partners, we could not do what we do without your continued support.

In closing I would like to thank my fellow Directors for their support, and acknowledge the considerable voluntary time and effort they have applied to the role over the year.

Allan Miller

Gunditimara Chairperson

CEO REPORT

Reflecting on the 32nd year of Gunditjmara Operations I am proud of what we have achieved for our service users and members. It really has been a demanding and productive period for Gunditjmara with many key achievements made across many areas.

PURCHASE OF 135 KEPLER STREET



Without a doubt the biggest achievement for the year was the purchase of 135 Kepler Street. Settlement of the property occurred on the 3rd of April 2014, never before has Gunditjmara purchased property of this magnitude and the acquisition can be recorded as a landmark occasion in the history of Gunditjmara's 32nd year existence. An enormous amount of work was undertaken to reach the point of settlement. A large amount of this work related to the securing of a \$900,000 grant which, prior to settlement, was an in principle grant disbursement from the Office of Aboriginal Affairs Victoria (OAAV). In securing the much needed grant, OAAV set forth a

number of conditions with the expectation that each condition be met before disbursement of the \$900,000 could occur.

These conditions were:

- Removing and replacing the asbestos Roof from 135 Kepler Street
- Completing an essential safety measures audit on 135 Kepler Street and address all items identified from the audit
- Selling the property of 35 Mountain Ash Drive
- Demolition and Repair Works to the Harris Street site, undertaken as priority, making good the fire damage of the premises.
- Written Agreement from NAB bank for a bank loan

All conditions were met which paved the way for approval being granted for the disbursement of the \$900,000 grant. The remaining dollars required to make up final payment for Kepler Street came from our own cash reserves, sale of 35 Mountain Ash Drive (Sold 15 November 2013), sale of 265 Koroit Street (Sold 24 May 2013) and the rest made up via the bank loan from our Banking partners NAB.

Reaching the stage of final settlement on the Kepler Street Property was a momentous occasion and can really be looked upon as a significant achievement for our organisation.

Kepler Street provides many advantages over our former site at Harris Street such as, a prime central business position with street frontage offering a more visible presence for Gunditjmara, more accessible for our service users and members and closer to public transport.

In a dynamic and growing organisation like Gunditjmara, it is essential that we operate from a strong base, one that provides ample space to sufficiently cater for our future needs and growth, which is Kepler Street to a tee.

HARRIS STREET RESERVE



Making good the fire damage sustained to our site at Harris Street Reserve was another task undertaken during the reporting period. As written in the longstanding lease agreement with the Warrnambool City Council for the Harris Street Reserve site, Gunditjmara are required to make good any damage sustained to the premises. On 16 September 2013 our planning permit was officially lodged with the Warrnambool City Council. On 26 November 2013 we had received one objection to our planning application.

Specifically that objection related to a concern about possible after hour use of the property. Our application stated that "It is envisaged that the space will be available to hire out to other community organisations and "for profit" organisations as a meeting space." The thought process behind this statement was to offer out the premises, at commission, for other community groups to utilize, which may be on weekends, but wouldn't include parties etc. Subsequently our clarification to the objection was tabled and accepted with the objection being answered satisfactorily. We are hoping for an expedited turn around to our planning application so that tenders for site works can get underway.

CLINICAL SUPERVISION PROJECT

Another completed activity during the period was The Clinical Supervision Project. In 2009 General Practice Victoria (GPV) and the Victorian Aboriginal Community Controlled Health Organisation (VACCHO), in partnership with Bendigo and District Aboriginal Cooperative (BDAC) and Central Victoria General Practice Network received funding through the Better Skills Best Care (BSBC) Workforce Innovation Grant Program (WIGP) for the Aboriginal Health Worker Clinical Supervision (AHWCS) pilot project. The project sought to implement structured processes to enable supervision of AHWs by senior clinicians such as General Practitioners (GPs) and Practice Nurses (PNs).

The project was devised in response to the observation that AHWs were not undertaking the full range of clinical services they had been trained for, in part, due to a lack of understanding of their scope of practice by employers and other health professionals and limited systematic support for the AHW clinical role. This has impacted on ACCHSs' ability to fully utilise the Medicare items to support services.

The pilot involved two AHWs and was conducted over a six-week period in late 2009. The pilot was extended for a further ten weeks to support the AHWs to perform additional health checks and receive training in motivational interviewing. In summary the project found that ensuring a structured supervision approach enabled the AHW to develop the skills and confidence to undertake health assessments and identified a number of benefits for the clinical team, the practice and clients. The final report proposed a number of recommendations, which drew on the learning's of the project and sought to address some of the limitations that resulted from the short timeframe and small size of the original pilot.

The structure of the original project involved a GP, Nurse, Practice Manager and two Aboriginal Health Workers. The layout for the six week intense sessions were for the AHWs to rotate fortnightly fulfilling three sessions each, the plan was for the AHWs to complete three health assessments (1hour each) per session (3.5hours) leaving time to discuss the cases and progress with the GP at the end (0.5hours).

The department had funded the expansion of this project including the selection and awarding of an additional two project sites through an expression of interest process held between July and August 2011, Gunditjmara Aboriginal Cooperative Ltd and the Victorian Aboriginal Health Service (VAHS).

In April 2012 VAHS advised the department that, due to a change in their organisation's focus and circumstances, a decision had been taken to withdraw from the AHWCS project which left BDAC and Gunditjmara as the joint project partners.

The aims and objectives of the project that were applicable to both sites included:

- Increasing the confidence and capacity of the AHW workforce to complete health checks, increasing their ability to practice independently as part a multi-disciplinary team, increasing the uptake of AHW item numbers and increasing the confidence of clinical team members and clients in the AHW role.
- The development of a snap shot business case at the commencement and the conclusion of the pilots to measure trends and provide an insight into whether the proposed model is self sustainable (i.e. through increased capacity of ACCHOs to access Medicare rebates).
- The development of a documented model and guidance for ACCHS seeking to implement a similar model.
- Shared best practice and improved service delivery through the use of specifically developed evaluation processes and outcomes to measure success.

The project, officially completed in April 2014, was independently evaluated and the following findings/achievements were achieved:

The benefits achieved for our Aboriginal Health Workers (AHW) Included:

Increased confidence in their competence of their learnt skills

- Increased confidence in engaging clients
- Increased confidence in triage processes and clinical judgements
- Increased confidence in gathering complete health histories of the patient
- Increased confidence in their own abilities
- There is a strengthened relationship between the GP and AHW and Nurse and AHW
- A better understanding of their role and their boundaries as a AHW

The benefits achieved for our General Practitioners (GP's) Included:

- A better understanding of the role of an AHW and their boundaries
- A strengthened relationship between the GP and AHW
- More comprehensive care to the client, via referrals to the AHWs for follow up allied health care
- Greater GP time with patients, as the AHW assist the nurse with the triage process
- Ability to utilise the AHWs as support workers for the clients to follow up external investigations and advocate on the clients behalf as required

The benefits achieved for our Clinic Nurses Included:

- Enhanced understanding of the role of an AHW and their boundaries
- Strengthened the relationship between the nurse and AHW
- Assisted the nurse with follow up care of clients
- Assisted in the pre-screening and triage processes
- An Ability for the AHWs to complete health assessments of clients, therefore free up time for the nurse to complete other duties
- Participation of AHWs in the Team Care Arrangement Planning
- Better Cultural Awareness and safety practices implemented by working alongside an AHW

The benefits achieved for our Health Service Included:

- Strengthened the relationship between the GP and AHW and Nurse and AHW
- A better understanding of the AHW role and their boundaries
- Stronger health team
- Better utilisation of the AHW skills gained in training
- Better comprehensive care for our clients
- Better follow up of team care arrangements
- Better utilisation of the Medicare Item Numbers
- Better support network within the health unit

The benefits achieved for our Community and Clients Included:

- Trusted and reliable AHWs to complete health assessments
- A better understanding of the AHW role
- Stronger health team
- Better comprehensive care for our clients
- Access to a strong support network to advocate on their behalf
- Access to home visits with the health workers if unable to access the clinic
- Better follow up care
- Career progression for the AHWs
- Contracts for Doctors adjusted to include the supervision and inclusion of AHWs in the care of our clients

Overall, as can be seen from the results above the project *hit the mark* on numerous fronts and had many positives and learning's we took away from the process. We also have a range of practical resources that were created during the project life that we will use in our continuous improvement activities within the clinic.

All in all, I congratulate the staff members involved in the Clinical Supervision Project who have worked hard to bring this project to fruition.

GUNDITJMARA AND COMMUNITY GOLF CLASSIC - FUNDRAISING EVENT



The Gunditimara and Community Golf Classic was another highlight event held during the period.

The intention of the fundraising event and how it came to being was a cooperatively developed idea between a number of agencies who joined forces to support and contribute financially towards the Peters Project Initiative as well as raise awareness of the impacts on Cancer upon the Aboriginal Community.

The Peters Project Initiative aimed to raise \$5 million dollars toward the building of an Integrated Cancer Care Centre in Warrnambool. The Cancer Centre will offer patients in our region, radiotherapy and vital treatment whilst

diminishing the need to travel lengthy distances. This allows patients in our region to be given the best possible cancer treatment available whilst remaining close to their home, family and support network. The agencies included Gunditjmara Aboriginal Cooperative, South West Healthcare, Victoria Police and Aboriginal Housing Victoria Ltd who formed the Gunditjmara and Community Golf Classic committee The event teed off on 13 December 2013, in near perfect conditions at Warrnambool Golf Club. The structure of the gameplay was two ball best ball and there were approximately 30 players in attendance.

All in all the day was a huge success raising \$3,209.87 toward the cancer care Centre initiative.



ACKNOWLEDGEMENTS AND THANKS

As Chief Executive, I am proud of the passion of our staff, who keep up with the pace of demands and who provide quality service to our valued clients as it is greatly appreciated.

I would also like to offer my sincere thanks to our board for their input, support and whom throughout the year, willingly volunteer their time and energy in advancing the mission of Gunditimara.

We can only undertake our work because of the much-needed and welcomed support we receive from both State and Federal funding partners of which whom have confidence in the work we do and in what we stand for.

I express my deep appreciation and thanks for the solid support and advocacy provided by our Peak Agency, VACCHO who work with us on many fronts.

I also say thanks to our many partner agencies throughout the region (A List of Partner agencies can be found on Page XXXX)

THE YEAR AHEAD

I anticipate the year ahead will see another busy and active period for Gunditimara with the following larger priorities front of mind.

- Gearing up and preparing for a number of crucial accreditation Frameworks, those being -Health service Accreditation, CSO reregistration, QIP Full organisational accreditation and Housing Accreditation
- Gaining approval on our Planning Permit for Harris Street Reserve and commencing the tender process to engage commercial builders to undertake the full scope of works.
- Commencing implementation of our new five year Strategic Plan.
- Continuing Implementation of the RSM Bird Cameron report Recommendations

I am very much eager to tackle the challenges and rewards of the coming year and I look forward to working with you all toward our continued growth and development in the coming year.

Regards

Marcus Clarke

Chief Executive Officer

Feature Story 1: Peeneeyt Maar - 'Strong Men' Project

The Peeneeyt Maar or Strong Men's project arose from an awareness of the issues surrounding the health of Aboriginal men in Warrnambool and surrounding districts. A successful submission to the Department of Human Services, by Gunditjmara and South West Healthcare resulted in the development and implementation of a series of health promotion programs targeted at Aboriginal Men.

If Aboriginal men are to improve their life expectancy and fulfill their potential and help bring about the well-being of their communities, they must be empowered through regaining their dignity, determination, respect and state of well-being. The Peeneeyt Maar Strong Men's project acknowledged the impact of poor health outcomes on the community and devised a series of programs aimed at improving the grass roots of Aboriginal health by introducing a range of positive behavioral change projects that will lead to improved outcomes in health status. Projects included:

- Healthy Food Options
- Men's Scuba diving course
- The 'Didge' Camp
- The Mibbinbah 2 day Workshop
 - The Mad Bastards Program
 - Improving Prostate cancer information

Project Goals and Objectives

The goals and objectives of the projects are as follows:

- Develop supportive environments and provide enablers for Aboriginal men in the target group to participate in social and health opportunities.
- Improve collaboration and coordination of services within the region through partnership development and capacity building of organisations involved with the target group.
- Identify baseline data on knowledge, behaviours and health parameters of participants which will assist identifying aboriginal health issues
- Identify and define specific health needs of Aboriginal men within the target population.
- Improve Men's Health within the target population by making health and community services more accessible and appropriate to Aboriginal men through a series of relevant and behavioural change programs.

Healthy Food Options:

These sessions presented nutritional health information/education and skills which included:

- males learning basic cooking skills
- what a good affordable healthy meal is
- how to prepare a healthy meal in minutes
- safe food handling
- food before sport, food after sport and fluid intake
- healthy beverages
- healthy breakfast meals
- home economic skills

The results from the surveys undertaken at each session included:

- 63.6% stated they cooked at home for themselves or others
- 100% stated the cooking session assisted with skill development to prepare meals at home
- 100% stated they would prepare the meals cooked at the session at home for themselves or others.
- All participants received a recipe book to take home (and the recipes were taken from this)
 - Australian Governments "Healthy Food Fast"

Community Health Dietician Synopsis

"The cooking session prior to the information session is a great opportunity to develop rapport with the participants and thus enhance the delivery and optimise reception of the healthy eating messages. Moving from work station to work station giving guidance with cooking facilities, engagement and on moving onto the education session, a dialogue between health professional and audience has already commenced. Using sports nutrition as a framework to deliver healthy eating messages also enhanced engagement with this group of young men. The session began with a discussion about the importance of recovery from physical activity and its role in optimal training and performance in sport. The discussion of recovery included the use of appropriate foods and covered utilization of high quality carbohydrate and protein foods for recovery. There was also discussion about the use of vegetables and fruit as sources of micro nutrients and antioxidants to optimize physical performance and recovery. Engagement with the audience facilitated questions about the use of energy drinks prior to sport and the effects of alcohol on sports recovery and performance which were discussed at length. There was also a question about the best approach to weight management."

Marian Cornett – SWH Community Health Dietitian



The "Didge" Camp:

The camp took place over a two day period and included cultural awareness and reflected on knowledge learnt from previous sessions with guest speakers, healthy eating and cultural, social and emotional wellbeing.

- It reflected individual's personal goals and why or why not they were achieved.
- Participants had a roster system to cook meals and use healthy recipes learnt from cooking sessions.
- Camp recorded outcomes via participant's consent of filming or pictorial story.

QUOTES

Brought us together as a group
Talked lots throughout the night
Brought our culture back
We opened up as men which is not something we do a lot
Felt almost spiritual
Peaceful and relaxed
Great relationship developer
Enabled us to feel supported by each other
We learnt that a lot of the things that worry us are not just our own problems



QUOTES

Meant a lot to bring my son along
It was a good moment for me and my kid
He's learnt from the experience
It made us super close
We've never done this much stuff together with our culture
Made us walk taller as aboriginal men
Learnt new skills that related to our culture
Encouraged new skills and learning
Great group collaboration

The Mibbinbah workshop - The Mad Bastards Program

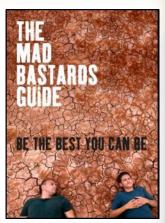
Mibbinbah Limited is a National health promotion charity supporting Indigenous males to gain their rightful place in society through spirit healing, empowerment, celebration, education, training, networking and advocacy. Over the years, we have been able to gain insight into what enables men to tell their stories and to rebuild their lives and communities'. We call Mibbinbah Proper Way". We celebrate our ability to work together in the present to achieve common goals that bring good to our communities. We remember the past with both its triumphs and tis traumas and we recognize the wide diversity of back-grounds that the men come from. We also share a vision of the future where strong leadership provides and an elimination of lateral violence.

(Source Jack Bulman (CEO) Mibbinbah)









QUOTES

Fantastic discussion and learning
A safe environment for people to express the real feelings and opinion
Encouraged lots of discussions
Empowering

Respected other people's ideas
Great facilitation

Encouraged members to open up and talk about real issues
Worked through some real issues and problems
Helped hugely

Approx. 10 attended
About 6 hour session

Discussed themes within the movie

Aboriginal men taking their rightful place and go on to create strong aboriginal families

Aboriginal men take a leading role and lead by example

Learn the right habits and pass them on

Really worthwhile program

Really worthwhile program

Helped me a lot

Big confidence support.

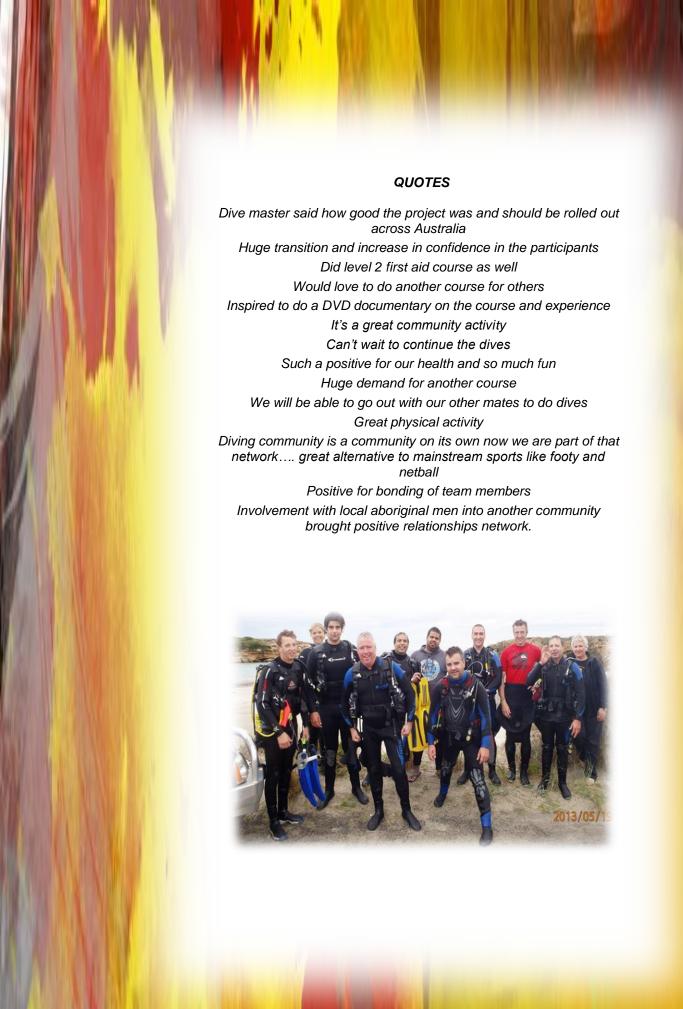
How to change the way I do things

Scuba Diving Course:

The Scuba Diving course project was locally managed through Daktari Diving, rather than establishing a specific steering or reference committee for the project.

An Indigenous program manager, and the existing local service provider led the project. This enabled a sense of support and improved confidence by the participants. With Victoria Police active participants the course also promoted the development of networking and relationships.

The participants also gained a certificate as a recognised Open Water Diver and Level 2 First Aid, this provided a formal qualification and acknowledgment as well as increasing their confidence in doing challenging exercises.



Gunditjmara Divisional Program Reports

Gunditimara Health Services Division:

GP Services:

Operating out of 3 Banyan Street in Warrnambool, our Health Clinic offers fully bulked billed General Practitioner and minor medical procedural services to both the aboriginal and non-Aboriginal community members. We employ three General Practitioners who, in total, provide 20 General Practitioner sessions per week (1 session = 3.5 working hours).

Our medical reception team is the primary point of contact for patients/clients that present to our Health Clinic. Providing a warm and welcoming face, our reception team is ever so helpful and acts as the crucial link between patients and our medical staff.

Key achievements in 2013/14 through the Gunditjmara Health Clinic include:

- Registered 130 new Abor
- iginal patients.
- Provided approximately 502 GP sessions.
- Provided 15581 episodes of care across all health programs, an increase of 1545 episodes of care from last financial year.
- Improved and streamlined electronic recording which is focused on patient biographics and health indicators.
- Commencing in September we trialed an after-hours night clinic which ran from 5:30pm till 9pm each Wednesday throughout the summer / festive period.

South West Aboriginal Health Partnership (SWAHP)

The SWAHP is a Regional based partnership formed to between Gunditjmara, and four other Aboriginal Community Controlled Organisations in South West Victoria being Kirrae Health Services, Winda Mara Aboriginal Corporation and Dhauwurd-Wurrung Elderly & Community Health Service Inc. The CEO's from each agency work together, in good faith, for the development, delivery, operation, administration and management of the South West Aboriginal Health Partnership. Gunditjmara Auspices the total allocation of funding of the SWAHP dollars and directly employs the Regional Coordinator. The role of the Co-ordinator is to essentially ensure that all organisations within the partnership are working towards achieving these National Health Key Performance Indicators (nKPI's) as set forth by government.

The nKPI's are as follows:

- Number and proportion of regular client who are ATSI who had an MBS 715 within the previous 12 months 0-4 years or 25 years or over.
- Number and proportion of ATSI babies born within the previous 12 months whose birth weights were recorded.
- Number and proportion of regular clients with Type II Diabetes who are ATSI and have had a HbA1c measurement recorded in the previous 12 months.

- Number and proportion of regular clients with Type II Diabetes who are ATSI and have had a
 HbA1c measurement recorded in the previous six and 12 months AND whose last HbA1c was
 within specified ranges.
- Number and proportion of regular clients with Type II Diabetes who are ATSI who have had a BP recorded in the previous six months.
- Number and proportion of regular clients with Type II Diabetes who are ATSI who have had a BP recorded that was less than or equal to 130/80mmHg within the previous six months.
- Number and proportion of regular clients with Type II Diabetes who are ATSI and have had a team Care Arrangement (MBS item 723)
- Number and proportion of regular clients who are ATSI with a known Smoking status.
- Number and proportion of regular clients who are ATSI and have had a BMI recorded overweight or obese.
- Number and proportion of regular clients who are ATSI and have their alcohol consumption recorded within the previous two years.
- Number and proportion of ATSI babies born within the previous 12 months with a recorded birth weight of either low, normal or high.
- Number and proportion of ATSI children who are fully immunised at one, two and five yearsof-age.
- Number and proportion of ATSI female regular clients aged between 20-69 who are recorded as having a pap test within the previous two, three and five years.
- Number and proportion of ATSI regular clients aged <50 and are recoded as being fully immunised with influenza and pneumococcal vaccine.
- Number and proportion of ATSI regular clients with Type II Diabetes or COPD who are immunised.
- Number and proportion of ATSI regular clients with a Chronic Illness who are recorded as having an eGFR and urinary ACR or other urinary micro albumin test result within the previous 12 months.
- Number and proportion of ATSI regular clients who have a smoking status of ex-smoker, current smoker, never smoked or not recorded.
- Number and proportion of ATSI regular clients who gave birth to a baby in the previous 12 months and who had an antenatal visit during that time and who smoked at that time.
- Number and proportion of ATSI regular clients who have been recorded as risk of long-term harm from alcohol.
- Number and proportion of ATSI regular clients who have a chronic disease and who are recorded as having a eGFR test result within the previous 12 months with a result within specified levels.
- Number and proportion of ATSI regular clients who have not had a diagnosis of cardiovascular disease and who have had an absolute risk assessment recorded.
- Number and proportion of ATSI regular clients who have not had a diagnosis of cardiovascular disease and who have had an absolute risk assessment with results within specified levels.

The Regional Coordinator works with each organisation to ensure the data and that the work being carried out actually reflects what the departments and funding bodies require. The role of the Regional Coordinator is to assist the CEOs, managers and workers on the ground to get this information, and carry out these tasks. As all four organisations are very different organisations with differing Community needs and staff capacity, the Regional Coordinators's role is different in each organisation.

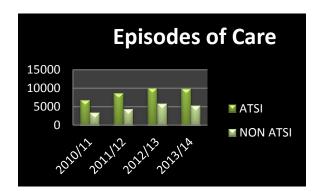
Due to the nature of this role being somewhat flexible, the Regional Coordinator is also able to assist the CEOs/Managers in other operational aspects of their organisation: including planning, development, reporting to, and for, other funding bodies and whatever else is required in conjunction with the data, support and reporting aspects of the position.

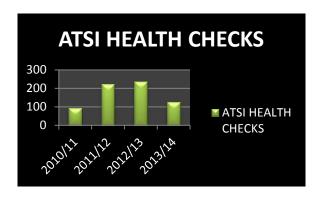
Key achievements in 2013-2014 through the SWAHP Program include.

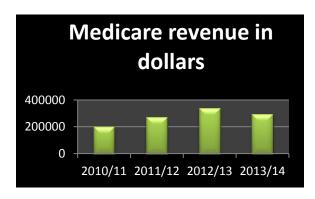
 A new Logo Developed for utilization by the SWAHP Partnership. The logo was developed and designed by Chrissy Pearce from the Portland community. The Logo represents all four orgs coming together and working together for a common good. Also represented are the communities and family groups of each org, in conjunction with the ocean and the land.



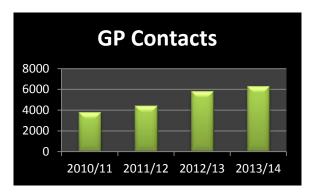
- The SWAHP Coordinator assisted and ensured that all partner organisations submitted all required program data on time to required deadlines.
- Assist partner organisations with different accreditation frameworks including health practice accreditation
- Assist and ensure partner organisations data is accurate and regulary audit the data for accuracy and relevance.







Amount of Medicare revenue Gunditimara Health Service has generated during the



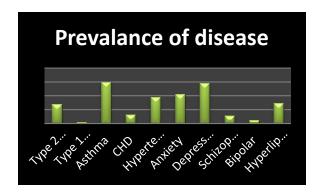
Number of client contacts made by the GP's during the 2013/14 timeframe



Based on Regular ATSI clients who have accessed the organisation 3 times in the previous 2 years



Information in regards to smoking status of regular ATSI clients who access services provided by the organisation.



Prevalence of disease for ATSI clients who are regular clients of the service.



Individual clients who accessed the services provided by the organisation during the 13/14 time period.

Gunditimara Aboriginal Dental Clinic:

The Gunditimara Aboriginal Dental Clinic, in partnership with South West Healthcare Dental Services continues to operate out of our Health Clinic and provide a critical dental service to our members and community. The Dental Clinic remains an extremely busy and valued service and continues to go from strength to strength.

The Gunditimara Dental Clinic, utilising the South West Healthcare dental team, comprising of a dentist and 2 dental nurses, provides free weekly dental services to all Aboriginal Health Care Card and Pension Concession Card holders. Services include oral health checkups, preventative care, extractions, fillings, cleaning, fisher seals, bridges and dentures.

We continue to be extremely proud of our excellent working relationship with the dental staff of South West Healthcare. Without their ongoing support this vital service to the Aboriginal community would not be possible. Aboriginal community members who are not eligible for service at the Gunditjmara Dental Clinic continue to access service through the Victoria Aboriginal Health Service Dental Clinic in Fitzroy, Melbourne.

Key achievements in 2013/14 through the Gunditjmara Dental Clinic include:

- Provided dental services to 394 patients, an increase of 64 patients compared to last financial year.
- Continues to attract patients from all around the region (Portland, Hamilton, Heywood and even Mount Gambier).
- Maintained a 95%+ appointment attendance rate.

Aboriginal Health Workers / Aboriginal Health Practitioner:

Gunditjmara Aboriginal Health Workers (AHW) and practitioner (AHP) provide a vital link between Aboriginal communities and health care services. As well as offering emergency care, Our Aboriginal Health staff are trained to use their knowledge of Aboriginal culture and communities to promote good health practices within individual community groups. AHW's have diverse roles that include providing treatment for disease and injuries, maintenance of health records, cultural education to people outside communities, counselling and referral for crisis problems, input, planning, development and monitoring of health programs in their community, and also assist and encourage Aboriginal people to take a strong role in controlling and managing their health.

Key achievements in 2013/14 through our AHW's and AHP include:

- During this period our AHW's and AHP had significant clinical exposure by assisting with minor medical procedure in the treatment room.
- 122 Health checks completed.
- Facilitated and assisted with allied health visits by dieticians, diabetic educators, psychiatrists and regional eye and ear program.
- Provided many health promotion programs throughout this reporting period eg: diabetes LIFE program, carpet bowels with the elders group and information sessions at playgroup.
- Great South West Medicare Local partnership, this partnership was further consolidated when our AHP commenced working from the mainstream service on a fortnightly basis. This significantly increased her skills base and knowledge of GSCML and their services.

Social Emotional Wellbeing (SEWB) Program:

Our Aboriginal Social and Emotional Wellbeing Officer supports the provision of mental health assessment, treatment, monitoring and evaluation of the social and emotional needs of Aboriginal clients. Improving links between the Gunditjmara community, other health professionals and clinical service providers through increased awareness and understanding of cultural, emotional, spiritual and social issues face by our Community is an important aspect of the SEWB role.

Key achievements in 2013/14 through our SEWB include:

- Completed Cert III in Aboriginal Primary Health Care with VACCHO.
- Completed Red Dust Healing Course Red dust healing is a cultural healing program that was
 developed for Indigenous men and their families. The goal of the program is to heal and
 rehabilitate Indigenous offenders and those at risk of offending. The program is designed to
 examine the intergenerational effects of colonisation on the mental, physical, and spiritual
 wellbeing of Indigenous families. It also encourages individuals to confront and deal with the
 problems, hurt, and anger in their lives.
- National Close the Gap Day committee member and Gunditjmara Health stall holder at the event.
 This event was well attended by well over 300 members of both the Aboriginal and broader
 communities, health education information and packages were delivered promoting Gunditjmara
 Health Clinic's services.
- Committee member for South West Healthcare's "Families Where A Parent Has A Mental Illness"
 (FAPMI) Program. FaPMI facilitates partnerships and enables workers to improve services for
 families where a parent has a mental illness.
- Provided Advocacy & Support and/or Healthcare for 254 individual clients (for a total of 634 separate contacts)

Aboriginal Health Promotions and Chronic Care (AHPACC) Program

The AHPACC Program supports Aboriginal community controlled, and mainstream primary health services to work in partnership with the Department of Health in developing and delivering local services and programs that prevent, and manage, the high prevalence of chronic disease within Aboriginal communities.

The aim of the AHPACC Program is to acknowledge chronic illness and promote healthy lifestyles. This is achieved by acknowledging contributing factors to poor health, and addresses the following areas by way of referral, transport/support, advice and education and assistance, health assessments and care plans.

Key achievements in 2013/14 through the AHPACC program include:

- Improved Community's knowledge and understanding of the health care system, chronic disease management and healthy lifestyles.
- Self-care and medication management education and home visits have helped to reduce hospital admissions for AHPACC chronic clients.
- Continuation of internal partnerships; assisting with the care planning of Home and Community Care (HACC) and Community Aged Care Packages (CACPs) clients in conjunction with relevant managers.
- Increased skills base and knowledge by back filling the Practice Nurse position when required.

Alcohol and Other Drugs (AOD) Program

The Drug and Alcohol Program aims to increase awareness of the adverse effects of substance abuse on individuals, and their families, in order to reduce their levels of dependence and the likelihood of becoming involved in the judicial system. The AOD Program achieves this through consultation with Department of Corrections, and the Aboriginal Community, by offering specific programs and diversionary methods that enhance people's social and emotional wellbeing.

Key achievements in 2013/14 through the AOD program include:

- Consolidated Gunditjmara's partnership with Department of Corrections, enabling community members whom are required to complete community work to do so within a culturally appropriate location.
- Continued raising revenue for AOD services delivered.
- Increase in client contacts for this reporting period
- Alcohol still remains the largest presenting drug of concern, closely followed by cannabis.
- AOD worker completed a Diploma in Mental Health.

The Drug and Alcohol Program aims to increase awareness of the adverse effects of substance abuse on individuals, and their families, in order to reduce their levels of dependence and the likelihood of becoming involved in the judicial system. The AOD Program achieves this through consultation with Department of Corrections, and the Aboriginal Community, by offering specific programs and diversionary methods that enhance people's social and emotional wellbeing.

Care Coordination and Supplementary Services (CCSS) Program:

The CCSS Program is a federal government initiative and is a relatively new program to Gunditjmara, entering into its 4th year, and is auspiced by Great South Coast Medicare Local. The aim of the CCSS program is to ensure improved health outcomes for patients with chronic diseases which fall within five specific categories including diabetes, respiratory, cancer, renal and cardiovascular conditions. Coordination of care is delivered to clients through an ongoing relationship with GP's, nurses, aboriginal health workers allied health professionals and specialists. The aim of the program is to prevent any unnecessary hospital admissions as a result of poor management of chronic disease/s, and to improve health outcomes for the client.

Key achievements in 2013/14 through the CCSS Program include:

- Assisted clients to experience better health outcomes by accessing specialists services and programs such as (but not limited to) regular appointments with physiotherapist, podiatry and diabetes educators.
- Providing necessary aids which enable clients to adhere to the treatment regime outlined in their GP Management Plans. This also helps to keep our ageing community members in their homes as opposed to an aged care facility.
- 32 clients have utilised the program during the 2013/14 financial year.
- 24 patients assisted with supplementary services.

Koori Maternity Service (KMS) Program

The Koori Maternity Service (KMS) Program aims at providing professional, supportive and culturally sensitive antenatal and postnatal care, as well as labour ward support to women and their families across the South West Region. The KMS team provide care and support to women, and their families, from diagnoses of pregnancy (or before, if information is required) until six to eight weeks postnatal.

Key achievements in 2013/14 through the KMS Program include:

- 14 babies born to mothers engaged with our KMS 2 of these births were attended by our KMS midwife.
- An increase in regional clients accessing our KMS. This has led to increased communications and relationships with both the Portland and Hamilton hospital Maternity programs.
- 5 pervious KMS clients re-engaged with our KMS team to receive culturally appropriate maternal care.

Consolidation of partnerships has led to more referrals and direct contact with local Obstetricians and the Woman's Health Clinic at South West Healthcare regularly seeking KMS input.

Healthy Lifestyle / Tobacco Action (HL/TA) Program

The HL/TA program is Gunditjmara's newest program. Put in place in late January 2014, the HL/TA program raises awareness within the local Aboriginal Community about the health risks associated with smoking and promoting positive healthy lifestyle changes. The program achieves this by tailoring smoking prevention and cessation marketing material, delivering support programs, organising annual community events to develop networks and build community support for the promotion of healthy lifestyles and smoking prevention.

Key achievements in 2013/14 through the HL/TA Program include:

- During this reporting period, a considerable amount of time was spent setting up the HL/TA program and establishing it within our organisation.
- Health promotion clinic featuring Geelong Football Club AFL players Travis Varcoe, Hamish
 McIntosh, Joel Hamling and Brad Hartman. All four players shared their stories of aspiring to play
 at AFL's top level from a young age and how their goal left no place for poor diet or smoking.
- Health Promotion booth held at the Framingham 150th Anniversary, Lake Bolac Eel Festival and National Close the Gap day events.
- Hosted a Warrnambool World No Tobacco Day event.

Koori Pre-School Assistant Program

The Gunditjmara Koori Pre-School Assistant works with kindergarten programs to:

- Enhance the access and participation of Koori children in kindergarten programs.
- Promote and assist in the delivery of Koori inclusive programs.
- Provides information and support to Koori families and communities.
- Supports the attendance of Koori children in kindergarten programs.
- Encourages the involvement and participation of Koori parents, families and carers in the development of kindergarten programs, and assists in the development of kindergarten programs that embrace Koori culture.

The KPSA also provides information and support to Koori families while supporting the attendance of Koori children attending kindergarten.

The Koori Pre-School Assistant visits nine kindergartens, eight of them being four-year-old kindergartens, and one being a three-year-old kindergarten.

These Kindergartens are:

- Panarama Avenue Three-Year-Old Kindergarten
- Beamish Street Kindergarten
- Central Kindergarten
- City Kindergarten
- Florence Collins Children's Services Complex
- Dennington Pre-School Centre
- East Warrnambool Kindergarten
- Lions Hopkins Kindergarten
- Koroit and District Pre-School Centre Association
- Merri Kindergarten and
- South Warrnambool Kindergarten.

The KPSA visits eight to eleven different kindergartens per week for approximately an hour each; planning, preparing and presenting a different culturally relevant activity (whilst working and liaising with the kindergarten teachers about activities in advance). The KPSA also assists families with kindergarten and school enrolments - ensuring school readiness whilst assisting with, and ensuring, a smooth transition into school.

Koorramook Playgroup and Parent Education Program: (Possum playgroup).

In partnership with OzChild (Non for profit agency) the Koorramook Playgroup provides a welcoming and culturally appropriate 'playgroup' environment which targets children aged under 5 and their families and grandparents. The core focus of the playgroup is to build positive parent – child relationships, promote parenting skills and confidence and to stimulate all areas of the child's development.

The activities of the playgroup are designed to be creative, age and developmentally appropriate with a large focus on incorporating local aboriginal culture and language within the activities. Activities include music and dance, indoor and outdoor play and excursions, storytelling and a variety of activity areas for dramatic and creative play as well as increasing cognition and fine motor development skills.

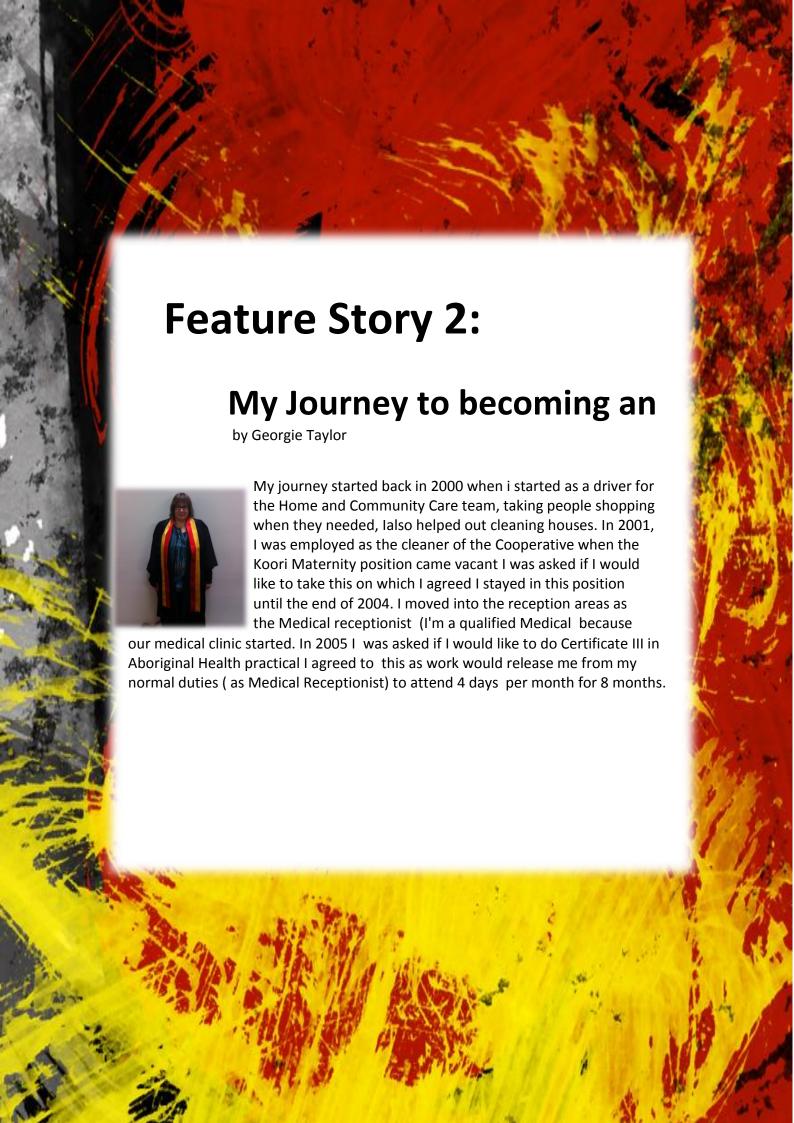
The playgroup empowers families by assisting them to identify and develop their own strengths and resources; the children develop a positive sense of identity through knowledge and understanding of their family and culture whilst parents and carers are provided with an environment where they can develop and maintain pride in their family and cultural identity.

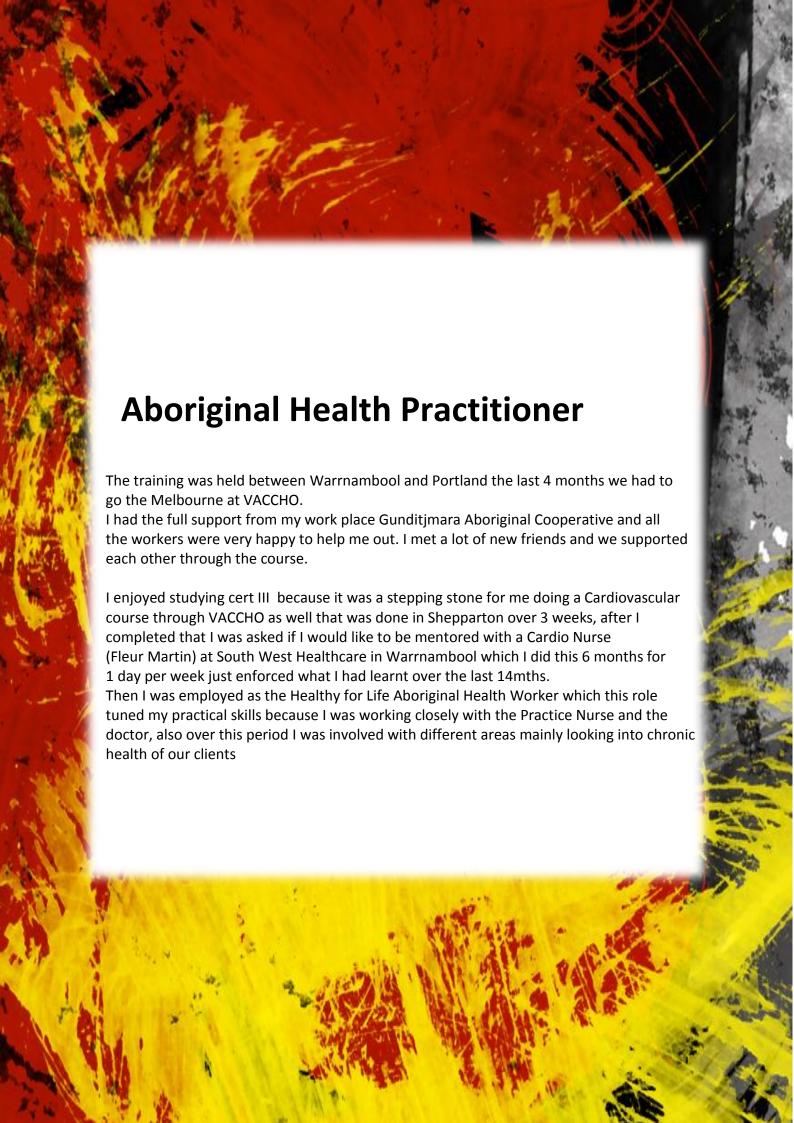
Visiting health professionals also attend the playgroup sessions such as Speech Therapists and Koori Maternity staff. This enables the health professionals to engage directly with the families and children in their own community settling and environment.

Parents are assisted in the development of *learning progress diaries* for each of their children with the view to document and rate their child's developmental journey. Parents are encouraged to write a few sentences which detail the progress of their child's development and achievements which link directly to the State Government Early Years framework.

Key achievements in 2013/14 through the Koorramook Playgroup and Parent Education Program include:

- 4 children identified as having either a hearing or speech delay and referred on accordingly. This
 was a huge outcome for the program and is attributed to our partnerships with visiting health
 professionals. As a result there has also been an increase in attendance rates for appointments
 made with the visiting services.
- An average of 15 18 children who attend the playgroup with their parents and grandparents each week.
- A comprehensive survey was distributed to each family who attends the playgroup inviting feedback and comments for the following results:
 - A 100% "excellent" satisfaction rate, how often do you attend playgroup? 30% regularly and 70% weekly, has playgroup helped your child's development? Social kills 100% replied yes, Concentration 70% replied yes, Language 70% replied yes and play skills 90% replied yes.





Gunditimara Aged Care and Disabilities Services Division

Home and Community Care (HACC) Program

Gunditimara Aboriginal Cooperative Home and Community Care (HACC) program provides a culturally appropriate service to assist Indigenous people to remain living safely at home for as long as possible, and who would, otherwise, be at risk of premature, or inappropriate, admission to long-term residential care.

HACC is also directed to the families or carers of service users by providing them with an opportunity to take a break/respite through the provision of Home Care and/or Adult Day Activity and Support Services.

These services are for frail, older Aboriginal people (yet, may include younger people with disabilities) and their carers who are experiencing difficulties managing activities of daily living.

The HACC Program targets its services to those who have the greatest need and/or those who have the greatest capacity to benefit from them.

Services include:

- **Domestic Assistance** Includes household jobs like cleaning, clothes washing and ironing
- Personal Care Providing help with bathing or showering, dressing, hair care and going to the toilet
- **Property Maintenance** Property maintenance services provide advice and assistance with home and garden maintenance to help people maintain a safe, habitable and healthy home environment. The services provide repairs and modifications to assist people managing disabling conditions to move safely about the house. Services work in partnership with the person, their carer and other service providers to implement approaches which improve, restore or maintain the person's capacity to remain living independently at home.
- Allied Health Coordinating Access to allied health services
- **Social support** Social Support provides assistance to clients by taking them shopping, banking or to appointments, or just providing company for a chat.
- Meals on Wheels Assisting with access to Meals on Wheels Service
- Fortnightly Planned Activity Group (Yoonggama Group) Planned activity groups (PAG's) support people's ability to remain living in the community by providing a range of culturally appropriate, enjoyable and meaningful activities. These activities support social inclusion, community participation, and build capacity in skills of daily living. For people with carers, planned activity groups are also designed to support care relationships. Activities are delivered in a range of accessible, safe venues and settings suitable to participants. Activities include indoor activities such as cards, games, music, shared lunches bead making classes

Key achievements in 2013-2014 through the HACC Program include.

- Conducted HACC client intake assessment focusing on the 'Active Service Model initiative. Active Service Model assists people to stay actively involved in doing as much for themselves as possible, and provides a greater sense of wellbeing, and independence.
- Attended regular KADNAC and VCAACD Meetings through- out the region
- Completed ASM Prepare documentation
- Contributed to Naidoc Activities
- Attended combined luncheons with other PAG's

Community Aged Care Package and Linkages (CACPS) Program

The Gunditjmara Community Aged Care Package and Linkages Program (CACPS) is aimed at the elderly, and people with disabilities in the community living independently (in their own homes). CACPS offers a planned and managed suite of Care Services designed and tailored to suit the particular needs of clients. It is flexible, and co-ordinated to suit a client's health needs, and can vary when the need to change, arises.

Key Achievements in 2013-2014 through the Community Care Package and Linkages Package Program include:

- Maintained established relationships with other community service providers and shared resources and skills to provide the optimal services for clients.
- Adhered to legislative changes and requirements to restructure programs, whilst still providing a culturally sensitive service for Aboriginal people.
- Maintained ongoing support and attendance increases, to between 20-25 regular clients, with the fortnightly (Yoonggama) Planned Activity Group (PAG) lunches and activities, which allow clients to socialise and to build strong community networks.
- Successfully assisted clients to live independently and safely in their own homes through personal support and provided aides and equipment recommended by an appropriate health professional, provided assistance with preparation of meals, transport to medical appointments, shopping and social activities, gardening and general home maintenance, and provided referrals for temporary respite care.

Gunditjmara Child Youth and Family Services Division

Housing and Property Program

The primary objective of the Housing and Property Program is to maintain and manage Gunditjmara's community housing portfolio consisting of 13 separate properties. Our properties are coordinated via a waiting list process and rentals are set at subsidized levels. A secondary duty to the role, but equally important, is to maintain the business premises and assets of the co-operative.

Affordable housing in South West Victoria is invariably in high demand and where we are unable to meet the housing needs of members, Gunditjmara works to improve access to existing housing in the Warrnambool area - through Local Government housing programs, the Department of Human Services and through Aboriginal Housing Victoria by assisting advocating on behalf of clients.

Indigenous Tenancies at Risk (ITAR) Program

Gunditimara and Wathaurong Aboriginal Co-operatives have entered into partnership to deliver a high quality, culturally appropriate, tenancy support service to Aboriginal people across the Barwon South-West Region. This created two positions for a support worker in each of the Cooperatives.

The program aims to reduce the eviction rate of Aboriginal clients from rental tenancies, and support Aboriginal clients who are at high risk of losing their tenancies.

This includes support for

- Accessing Public Housing
- Assistance for tenants of Public Housing, Community Housing and private rentals to maintain secure tenancies
- Ex-Tenants of Public Housing with rent arrears and maintenance debts
- Victorian Civil Administrative Tribunal (VCAT) Matters
- Transfers
- Maintenance Issues
- Other life matters that may compromise Tenancies

Koori Youth Justice (KYJ) Program

The aims of the KYJ Program are to:

- Appropriately diverting the youth that are charged with an offence away from the Criminal justice system.
- Help minimize the likelihood of our youth to "Offend or Re-Offend".
- Contact and supervise youth that are on "Court Orders" to maximize their chances of NOT entering a Youth or Adult facility or to Re-Offend.
- Provide the young person with the necessary support to help get them back on track.

The Gunditimara KYJ Program continues to work towards the above aims by:

Helping to reduce the number of Indigenous youth in South West Victoria coming into contact with the Police and Juvenile Justice systems as a result of criminal activities. This position also includes the provision of supervision and case management of youth offenders on Statutory Juvenile Justice Orders. The target group consists primarily of young Indigenous males and females aged 10-18 years but may, at times, also include working with 19 -20 year olds.

NOTE: For the first time ever in the history of the KYJ Program our Youth number on Justice orders have hit 0. This is a great achievement and our KYJ worker is heavily focused the preventative sphere of the program to continue to maintain the numbers.

Leaving Care Program

The Leaving Care Program primary objective is to provide support and advocacy services to young Aboriginal people transitioning to independence and provide support for those who have transitioned from care and subsequently seek assistance.

The aim of the Program is to achieve better outcomes for young Aboriginal people leaving care by assisting in the development of life skills, providing links to education, employment and training options and preventing homelessness through the creation of pathways to sustainable long term housing options.

The role of the Leaving Care Worker is to ensure the highest standard of service delivery, case-management support and addressing the social marginalisation often experienced by young people leaving care; all whilst in accordance with program specifications as negotiated with DHS. Ultimately, the program assists young people with links to education, employment and training opportunities - along with obtaining appropriate housing options as required.

Regional Indigenous Family Violence Program

The primary purpose of the Regional Indigenous Family Violence Worker aims provide culturally safe, sensitive, confidential and professional advocacy and holistic case management to women who identify as Aboriginal and their children or Non Aboriginal women aboriginal dependents that have experienced and/or are experiencing domestic violence and abuse in the far South west Region specifically in the Portland, Heywood, Hamilton, Framlingham and Warrnambool areas. The service also aims to increase and raise community awareness of family violence and its impacts and effects within our community through the provision of information and education, with a view to equip and highlight early intervention strategies leading to an increased prevention of future incidents.

Provided below is an overview of total clients supported through the Program and their age groupings analysis presented in listed form Program data of clients supported

	Number of	
Age Group	clients	Percent
Under 10 years	14	28.57
10-14 years	3	6.12
15-17 years	1	2.04
18-19 years	1	2.04
20-24 years	4	8.16
25-29 years	11	22.45
30-34 years	6	12.24
35-39 years	3	6.12
40-44 years	3	6.12
45-49 years	1	2.04
50-54 years	1	2.04
55-59 years	1	2.04
Total	49	100.00

Key achievements in 2013-2014 through the Regional Indigenous Family Violence Program include.

- Regional Indigenous Family Violence Worker successfully completed Certificate IV in Aboriginal Family Violence at Swinburne
- Regional Indigenous Family Violence Worker successfully completed COPMI (Children of Parents with a Mental Illness) Keeping families and Children in Mind training
- Program was Involved in The Ngunnung (Sun Melts ICE) committee formed to prepare and strategize the Aboriginal Community response to the Parliamentary Inquiry into the supply and use of Methamphetamines in Victoria
- Participation in the Possum Skin Cloak Training Video
- Active Involvement in the Gunditjmara and Community Golf Classic that raised funds for Peters Project
- Participated in Centre for Rural Regional Law & Justice (CRRLJ) Deakin University Project.
 Improving access to justice for women & children survivors of family violence in regional Victoria



Feature Story 3: Elders Abuse

We all want to be treated well and treated with respect, no matter where we are in life. This may sometimes get forgotten with the day-to-day pressures faced by both individuals and families. Elder abuse is a complex and sensitive issue and it's important that older people understand and know their rights. Elder abuse can be financial, physical, emotional, social or psychological.

A two year association between Seniors Rights Victoria and Gunditjmara Aboriginal Cooperative culminated in the release of the 'Respect Our Elders' brochure which took place at Gunditjmara Cooperative, 135 Kepler Street on Tuesday 29 April in Warrnambool..

Elders, community members and staff from local organisations attended the launch, which was funded by the Victoria Law Foundation. 'Respect Our Elders.'







Brochure Launch

The launch is the first Koori-specific pamphlet on Elder abuse in Victoria..

Elder abuse is no more prevalent in Koori communities than other parts of the community, but after talks with staff and community members of Gunditjmara, it was decided to develop and produce a relevant and meaningful pamphlet for the whole

Gunditjmara community. The pamphlet, designed by Jodie Brennan of Deadly Designs, features the totem of a shield, a protective emblem. The language used is accessible and easy to understand and promotes elders as custodians of Aboriginal culture and aims to eliminate elder abuse and regain confidence in their lives.

Abuse of elders is NOT deadly!

If it is happening to you or someone you know, then call the FREE and CONFIDENTIAL Seniors Rights Victoria Helpline 1300 368 821 at the cost of a local call or speak to your local health or community worker.







DIRECTOR'S REPORT

Your Directors present their report on the Co-operative for the financial year ended 30 June, 2014.

The names of the Directors in office at any time during the year or since the end of the year are:

Bernice Clarke
Tanya DeBono (resigned 15 March 2014)
Caleb Clarke
Louise Wackett

Allan Miller (resigned 24 July 2014 Joe Chatfield Joshua Edwards Jarrod Clarke (appointed 15 March 2014)

Directors have been in office since the start of the financial year to the date of this report unless otherwise stated.

The principal activity of the Co-operative in the course of the period under review, has been to assist the social development of Aboriginals in and around Warrnambool. There were no significant changes in the nature of this activity during the financial year ended 30th June, 2014.

The net amount of the surplus carried forward for the continuation of the Co-operative's programs for the financial year was \$321,376 (2013 - \$(313,552)). No amounts were transferred to or from reserves and provisions during the period other than those disclosed in the accounts.

No matters or circumstances have arisen since the end of the financial year, which significantly affected or may significantly affect the operations of the Co-operative, the results of those operations, or the state of affairs of the Co-operative in future financial years.

Likely developments in the operations of the Co-operative and the expected results of those operations in future financial years have not been included in this report as the inclusion of such information is likely to result in unreasonable prejudice to the Co-operative.

The Co-operative's operations are not regulated by any significant environmental regulation under a law of the Commonwealth or of a state or territory.

No dividends have been paid or declared since the start of the financial year.

No options over issued shares or interest in the Co-operative were granted during or since the end of the financial year and there were not options outstanding at the date of this report.

No indemnities have been given or insurance premiums paid, during or since the end of the financial year, for any person who is or has been an officer or auditor of the Co-operative.

No person has applied for leave of Court to bring proceedings on behalf of the Co-operative or intervene in any proceedings to which the Co-operative is a party for the purpose of taking responsibility on behalf of the Co-operative for all or any part of those proceedings.

The Co-operative was not a party to any such proceedings during the year.

Signed in accordance with a resolution of the Board of Directors:

Joe Chatfield

Director

Director

Bernice Clarke

Dated this 15 day of January 2015.

STATEMENT OF PROFIT OR LOSS FOR THE YEAR ENDED 30 JUNE 2014

	Notes	2014 \$	2013 \$
INCOME			
Recurrent Funding		2,033,616	2,060,079
Sundry and Non Recurrent Grants		396,276	152,817
Interest		16,101	52,949
Refunds		506,739	513,521
Rental & Equipment Hire		120,314	122,195
Insurance Recovery		3,182	1,816
modranos resovery	-	3,076,228	2,903,377
		-, , ,	, ,
EXPENDITURE			
Administration Costs		(9,457)	30,555
Advertising		(6,572)	(4,394)
Annual Leave (Movement in Provision)		`3,999	2,211
Bad and Doubtful Debts		1,368	4,204
Bank Charges		(4,971)	(2,616)
Board Costs		(1,915)	(2,280)
Catering/Meals		(8,382)	(10,383)
Cleaning		(39,568)	(38,232)
Electricity & Gas		(26,623)	(28,888)
Hire of Venue		(182)	(1,878)
Interest Paid		(9,603)	-
Long Service Leave (Movement in Provision)		(23,371)	(9,527)
Loss on Sale of Non- Current Assets		(23,820)	(30,364)
Memberships		(17,956)	(5,866)
Motor Vehicle Costs		(62,595)	(77,168)
Postage		(4,006)	(3,453)
Printing & Stationery		(15,381)	(13,680)
Professional Costs		(98,719)	(121,177)
Program Costs		(216,240)	(238,754)
Rent & Rates		(118,474)	(122,105)
Repairs & Maintenance		(47,597)	(52,914)
Sundry Staff Costs		(8,086)	(15,332)
Superannuation		(144,287)	(143,904)
Telephone		(45,091)	(49,282)
Training		(19,958)	(21,217)
Travel Expenses		(15,036)	(10,660)
Wages		(1,723,578)	(2,014,899)
Workcover		(28,743)	(45,046)
		(2,714,844)	(3,027,049)
SURPLUS/(DEFICIENCY) FOR THE YEAR PRIOR TO DEPRECIATION, WRITE DOWN OF LAND & BUILDINGS AND GOVERNMENT EQUITY			
ADJUSTMENTS		361,384	(123,673)
Depreciation		(163,212)	(189,879)
Write Down of Land and Buildings		(92,967)	-
Adjustment Government Equity in McKnight Street & Mountain Ash Drive		216,171	-
SURPLUS/(DEFICIENCY) FOR THE YEAR		321,376	(313,552)
,			

STATEMENT OF COMPREHENSIVE INCOME FOR THE YEAR ENDED 30 JUNE 2014

	Notes	2014	2013
SURPLUS/(DEFICIENCY) FOR THE YEAR		321,376	(313,55
OTHER COMPREHENSIVE INCOME		(
Net Loss on Revaluation of Land & Buildings Adjustment Government Equity in McKnight Street & Mountain Ash Drive		(378,220) (844,151)	-
Capital Grant - 135 Kepler Street	_	1,107,000	-
TOTAL OTHER COMPREHENSIVE INCOME FOR THE YEAR	-	(115,371)	-
TOTAL COMPREHENSIVE INCOME FOR THE YEAR	=	206,005	(313,55
TOTAL COMPREHENSIVE INCOME ATTRIBUTABLE TO MEMBERS	=	206,005	(313,55

STATEMENT OF FINANCIAL POSITION AS AT 30 JUNE 2014

	Notes	2014 \$	2013 \$
CURRENT ASSETS			
Cash and Cash Equivalents	2	738,634	1,115,548
Trade and Other Receivables	3	128,685	95,772
Other Assets	4	4,450	27,631
	-	871,769	1,238,951
NON CURRENT ASSETS			
Property, Plant and Equipment	5 _	5,906,366	4,807,118
TOTAL ASSETS	_	6,778,135	6,046,069
OUDDENT LIABILITIES			
CURRENT LIABILITIES	6	293,701	430,151
Trade and Other Payables Employee Provisions	7	94,189	75,091
Borrowings	8	43,440	-
Donowingo	_	431,330	505,242
NON CURRENT LIABILITIES			
Employee Provisions	7	19,709	15,436
Borrowings	8	595,700	-
Borrowings	_	615,409	15,436
TOTAL LIABILITIES	_	1,046,739	520,678
NET ASSETS	=	5,731,396	5,525,391
EQUITY		450	450
Members Capital		158	158
Asset Revaluation Reserve		- 821,210	1,323,927 1,392,853
Reserves Retained Earnings		4,910,028	2,808,453
Rotaliou Larinigo	-	1,010,020	2,000,100
TOTAL EQUITY	=	5,731,396	5,525,391

STATEMENT OF CHANGES IN EQUITY FOR THE YEAR ENDED 30 JUNE 2014

				Asset		
	Notes	Retained Earnings \$	Members Capital \$	Revaluation Reserve \$	Other Reserves \$	Total \$
Balance at 1 July 2012 Loss attributable Total other comprehensive		3,122,005 (313,552)	158 -	1,323,927	1,392,853 -	5,838,943 (313,552)
income for the year Transfers to and from reserves		-	-	-	-	-
Balance at 30 June 2013	-	2,808,453	158	1,323,927.00	1,392,853	5,525,391
Profit attributable Total other comprehensive		321,376	-	-	-	321,376
income for the year		1,107,000	-	(1,222,371)	-	(115,371)
Transfers to and from reserves	_	673,199	_	(101,556)	(571,643)	_
Balance at 30 June 2014		4,910,028	158	-	821,210	5,731,396

STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 30 JUNE 2014

	Notes	2014 \$	2013 \$
CASH FLOWS FROM OPERATING ACTIVITIES			
Receipts from funding and operational sources		2,646,400	2,744,874
Interest received		396,276	152,817
Payments to suppliers		(1,118,113)	(1,324,630)
Payments to employees		(1,700,207)	(2,005,472)
Finance Costs		(9,603)	-
Net cash generated from operating activities	15	214,753	(432,411)
The same of the sa			
CASH FLOW FROM INVESTING ACTIVITIES			
Proceeds from Sale/(Payment for Purchase) of Property,		(4 000 000)	40.000
Plant & Equipment	_	(1,230,808)	42,300
Net cash used in Investing Activities	_	(1,230,808)	42,300
CASH FLOW FROM FINANCING ACTIVITIES		000 440	
Proceeds from/(payment to) Borrowings	_	639,140	-
Net cash used in Financing Activities		639,140	-
Not Increase//Decrease) in each held		(376,915)	(390,111)
Net Increase/(Decrease) in cash held		(370,313)	(330,111)
Cash at the beginning of the financial year		1,115,549	1,505,660_
Cash at the end of the financial year	2 _	738,634	1,115,549

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30TH JUNE, 2014

NOTE 1: STATEMENT OF SIGNIFICANT ACCOUNTING POLICIES

The financial report is a special purpose financial report prepared to satisfy the financial reporting preparations requirements of the *Co-operatives National Law Application Act 2013*. The Directors have determined that the Co-operative is not a reporting entity.

Reporting Basis and Conventions

The Directors have prepared the financial statements on the basis that the Co-operative is a non-reporting entity because there are no users dependent on general purpose financial statements. The financial statements are therefore special purpose financial statement that have been prepared in order to meet the requirements of the *Co-operatives National Law Application Act 2013*.

The financial statements have been prepared in accordance with mandatary Australian Accounting Standards applicable to entities reporting under the *Co-operatives National Law Application Act 2013* and the significant accounting policies disclosed below, which the Directors have determined are appropriate to meet the needs of members. Such accounting policies are consistent with the previous year unless stated otherwise.

The financial report has been prepared on an accrual basis and is based on historical costs unless otherwise stated in the notes. The material accounting policies adopted in preparation of these states are as follows:

Accounting Policies

(a) Income Tax

The Co-operative is exempt from Income Tax under the Australian Income Tax Assessment Act (1997), Section 50-10.

(b) Property, Plant and Equipment

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

Freehold land and buildings are measured at their fair value based on periodic, but at least triennial, valuations by external independent valuer, less subsequent depreciation for buildings. Increases in the carrying amount arising on revaluation of land and buildings are credited to a revaluation surplus in equity. Decreases that offset previous increases of the same asset are charged against fair value reserves directly in equity, all other decreases are charge to the statement of comprehensive income. If an item of property, plant and equipment is revalued, the entire class of property, plant and equipment to which that asset belongs shall be revalued.

The carrying amount of plant and equipment is reviewed annually by Directors to ensure it is not in excess of the recoverable amount from those assets. The recoverable amount is assessed on the basis of the expected net cash flows, which will be received from the assets employment and subsequent disposal. The expected net cash flows have not been discounted to present values in determining recoverable amount.

The depreciable amount of all fixed assets including buildings and capitalised leased assets, but excluding freehold land, are depreciated over their useful lives commencing from the time the asset is held ready for use. Properties held for investment purposes are not subject to a depreciation charge. Leasehold improvements are amortised over the shorter of either the unexpired period of the lease or the estimated useful lives of the improvements.

As part of funding arrangements, the Government holds a percentage government equity in the McKnight Street property. This has been disclosed in Note 5 as a deduction in the carrying value of Land & Buildings.

(c) Employee Benefits

Provision is made in respect of the Co-operative's liability arising from services rendered by employees to balance date. Employee benefits that are expected to be settled within one year have been measured at the amount expected to be paid when the liability is settled, plus related on-costs. Employee benefits payable alter than one year have been measured at the present value of the estimated future cash outflows to be made for those benefits.

Contributions are made by the Co-operative to an employee superannuation fund and are charged as expenses when incurred. The co-operative is not legally obligated to contribute greater than the 9.5% superannuation guarantee levy. The co-operative has no legal obligation to provide benefits to employees on retirement.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30TH JUNE, 2014

NOTE 1: STATEMENT OF ACCOUNTING POLICIES (cont.)

(d) Cash and Cash Equivalents

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

(e) Impairment of Assets

At each reporting date, the Co-operative reviews the carrying values of its assets to determine whether there is any indication that those assets have been impaired. If such an indication exists, the recoverable amount of the asset, being the higher of the asset's fair value less costs to sell and value-in-use, is compared to the asset's carrying value. Any excess of the asset's carrying value over its recoverable amount is expensed to the Statement of Comprehensive Income.

(f) Leases

Leases of fixed assets where substantially all the risks and benefits incidental to the ownership of the asset, but not the legal ownership that are transferred to entities are classified as finance leases. Finance leases are capitalised by recording an asset and a liability at the lower of the amounts equal to the fair value of the leased property or present value of the minimum lease payments, including any guaranteed residual values. Lease payments are allocated between the reduction in the lease liability and the lease interest expenses for the period. Leased assets are depreciated on a straight-line basis over the shorter of their estimated useful lives or the lease term.

Lease payments for operating leases, where substantially all the risks and benefits remain with the lessor, are charged as expenses in the periods in which they are incurred.

(g) Revenue

Revenue from the sale of goods or rendering of services is recognised upon delivery of goods or service to the customer. Grant revenue is recognised in income when it is controlled. When there are conditions attached to grant revenue relating to the use of those grants for specific purposes it is recognised in the balance sheet as a liability until such conditions are met or services provided. Donations and bequest are recognised as revenue when received unless they are designated for a specific purpose, where they are carried forward as prepaid income on the balance sheet.

All revenue is stated net of the amount of goods and services tax (GST)

(h) Goods and Services Tax (GST)

Revenues, expenses and assets are recognised net of the amount of GST, except where the amount of GST incurred is not recoverable form the Australian Taxation Office. Receivables and payables in the balance sheet are shown GST inclusive.

(i) Comparative Figures

Where required by Accounting Standards comparative figures have been adjusted to conform with changes in presentation for the current financial year

(j) Critical Accounting Estimates and Judgments

The directors evaluate estimates and judgments incorporated into the financial report based on historical knowledge and best available current information.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2014

		2014	2013
		\$	\$
2. Cash and Cash Equivalents			
Current:			
Cash on hand		687	1,170
Cash at bank	_	737,947	1,114,378
	-	738,634	1,115,548
Reconciliation of Cash:			
Cash and cash equivalents	_	738,634	1,115,548
·	MARKET NAME OF THE PARTY NAME	STATE OF THE STATE	
3. Trade and Other Receivables			
Current:			
Trade Debtors		131,718	100,173
Less: Provision for Impairment		(3,033)	(5,291)
		128,685	94,882
Other	_	-	890
	-	128,685	95,772
4. Other Assets			
Current:			
Prepayments		3,058	6,379
Accrued Income		-	20,372
Other		1,392	880
	=	4,450	27,631
5. Property, Plant and Equipment			
Land (Directors Valuation 2011)			1,375,000
Land (Independent Valuation 2014)		2,535,000	1,373,000
Land (mdependent valuation 2014)		2,535,000	1,375,000
	_	2,000,000	1,010,000
Buildings (Directors Valuation 2011)		_	2,709,370
Building (Independent Valuation 2014)	5(a)	3,315,000	-
Less: Accumulated Depreciation		-	(208,156)
Less: Government Equity		(420,980)	_
	_	2,894,020	2,501,214
Total Land and Buildings		5,429,020	3,876,214

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2014

	2014	2013
	\$	\$
5. Property, Plant and Equipment (Cont)		
Plant & Equipment (at cost)	315,517	329,662
Less: Accumulated Depreciation	(207,654)	(179,211)
-	107,863	150,451
Motor Vehicles (at cost)	422,425	490,098
Less Accumulated Depreciation	(289,237)	(346,720)
- -	133,188	143,378
Office Furniture and Equipment (at cost)	568,904	545,348
Less Accumulated Depreciation	(429,406)	(401,611)
- -	139,498	143,737
WIP - Harris Street	96,797	96,995
WIP - Kepler Street		396,343
Total Property, Plant and Equipment	5,906,366	4,807,118
5(a) - Harris Street Building and accompanying Health Building were warchitect advice that the buildings require demolition after the 2010 fire June 2014		
6. Trade and Other Payables		

Current:

Trade Creditors	110,089	53,928
Sundry Creditors & Accrued Expenses	8,342	34,946
Annual Leave	130,504	134,503
Payroll Liabilities	41,936	101,713
GST Liability	(113,861)	(16,326)
Grants in Advance (Deferred Expenditure and Auspiced Funds)	116,691	121,387
	293,701	430,151

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2014

	2014	2013
	\$	\$
7. Employee Provisions		
Current:		
Provision for Long Service Leave	94,189	75,091
Non Current:		
Provision for Long Service Leave	19,709	15,436
	113,898	90,527
8. Borrowings		
Current:		
Bank Loan Secured	43,440	-
Non Current:		
Bank Loan Secured	595,700	
	639,140	
		_
9. Reserves		
Asset Revaluation Reserve - held in relation to revaluation of land a	nd buildings.	
Other Reserves - held in relation to statutory grants and property, pla	nt and equipment g	rants.
10. Capital and Leasing Commitments		
10(a) Operating Lease Commitments (Rent of Office Space)		
Payable - minimum lease payments		
- not later than 12 months	-	67,734
- between 12 months and 5 years	-	_

- not later than 12 months	-	67,734
- between 12 months and 5 years	_	-
	_	67 734

Lease of Kepler Street Warrnambool property from OzChild (Children's Australia Inc.) was in place until purchase settlement on 3 April 2014.

10(b) Capital Expenditure Commitment		
Purchase of 135 Kepler Street	_	2,385,000

11. Contingent Liabilities and Assets

The Director of Housing holds a mortgage over 16-18 McKnight Street Warrnambool Vic 3280.

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2014

11. Contingent Liabilities and Assets (cont.)

The Minister for Aboriginal Affairs Victoria holds a first mortgage and National Australia Bank a second mortgage over 135 Kepler Street Warrnambool Vic 3280. The first mortgage may be repayable to the Minister in the following circumstances per the funding agreement:

- * immediately on demand by the Minister, if the Grantee is wound up or becomes insolvent or steps are taken to make it so: or
- * within 30 days of a written demand by the Minister under clause 14.1; or
- * immediately upon settlement of a sale of the Property under clause 14.1.4.

The Aboriginal and Torres Strait Islander Commission holds caveats over the following properties:

- * 4 Granter Street Warrnambool Vic 3280
- * 68 Grafton Road Warrnambool Vic 3280
- * 16-18 McKnight Street Warrnambool Vic 3280

Commonwealth of Australia holds caveats over the following properties:

- * 40 Taits Road Warrnambool Vic 3280
- * 3 Banyan Street Warrnambool Vic 3280
- * 1 Dunroe Court Warrnambool Vic 3280

12. Events After the Balance Date.

The Directors are not aware of any events which have occurred subsequent to balance date which would materially effect the financial statements at 30th June, 2014.

13. Directors' Remuneration

Income received or due and receivable by all Directors of the Co-operative from the Co-operative and any related Bodies:

Number of Co-operative Directors whose income or fees derived as a result of their directorship of the Co-operative or any related bodies corporate was within the following bands

		2014 No.	2013 No.
\$0 - \$9,999		-	-

The names of Directors who have held office during the financial year are:

Joe Chatfield
Caleb Clarke
Joshua Edwards
Jarrod Clarke

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 30 JUNE 2014

14. Related Party Transactions

The entity did not enter into any contracts with related parties apart from rental agreements for housing being made to family members of Director Bernice Clarke. Allan Miller, a former Director of the Co-operative and current employee also rents a property. Rental charged during the year was at less than market value, but was consistent with rental charges for the other residential properties owned by the Co-operative.

15. Cash Flow Information	2014 \$	2013 \$
Reconciliation of Cash Flow from Operations with Profit		
Profit from ordinary activities after income tax	321,376	(313,552)
Non-cash flows in profit:		
Depreciation	163,212	211,379
Net (loss)/gain on sale of assets	(23,820)	-
Write Down of Assets	92,967	-
Adj Government Equity in McKnight Street & Mountain Ash Drive	(216,171)	-
Changes in assets and liabilities:		
(Increase)/Decrease in Receivables	(9,732)	45,213
Increase/(Decrease) in Payables	(136,450)	85,474
Increase/(Decrease) in Provisions	23,371	31,046
Cash flows provided by operating activities	214,753	59,561

16. Entity Details

The registered office and principal place of business is 135 Kepler Street, Warrnambool Vic 3280.

DIRECTOR'S DECLARATION

In accordance with a resolution of the Directors of Gunditjmara Aboriginal Co-operative Limited we declare that in the opinion of the Directors:

- 1. The financial statements and notes are in accordance with the Co-operatives National Law Application Act 2013, and:
 - (a) comply with Australian Accounting Standards (including Australian Accounting Interpretations and International Financial Reporting Standards) as described in note 1 to the financial statements in accordance with Co-operatives National Law Application Act 2013; and
 - (b) give a true and fair view of the Co-operatives financial position as at 30 June 2014 and of its performance for the year ended on that date in accordance with accounting policies described in note 1 to the financial statements.
- 2. In the Directors opinion there are reasonable grounds to believe that the Co-operative will be able to pay its debts as and when they become due and payable

Director

10. Clarke, Directo

Bernice Clarke

DATED the 5 January 2015.



Warrnambool 257 Timor Street P.O. Box 217 Warrnambool VIC 3280

Tel: 03 5564 0555 Fax: 03 5564 0500

Ausdoc DX: 28026

Camperdown 142 Manifold Street Camperdown VIC 3260

Tel: 03 5557 0333

Colac 73 Gellibrand Street Colac VIC 3250

Tel: 03 5231 1527

Hamilton 50 Thompson Street Hamilton VIC 3300

Tel: 03 5551 3111

Mount Gambier 9 Wehl Street South Mount Gambier SA 5290

Tel: 08 8724 0399

Casterton 25 Henty Street Casterton VIC 3311

Tel: 03 5581 1000

Cobden 17 Curdie Street Cobden VIC 3266

Tel: 03 5595 1954

Mortlake 108 Dunlop Street Mortlake VIC 3272

Tel: 03 5599 2244

Port Fairy 62 Sackville Street Port Fairy VIC 3284

Tel: 03 5568 2823

Terang 84 High Street Terang VIC 3264

Tel: 03 5592 2020

Timboon 6 Main Street Timboon VIC 3268

Tel: 03 5598 3466

INDEPENDENT AUDIT REPORT TO THE MEMBERS OF GUNDITJMARA ABORIGINAL CO-OPERATIVE LIMITED

Scope

We have Audited the accompanying financial report, being a special purpose financial report of Gunditjmara Aboriginal Co-Operative Limited, which comprises the Statement of Financial Position as at 30 June 2014, Statement of Profit and Loss, Statement of Comprehensive Income, Statement of Changes in Equity and Statement of Cash Flows for the year then ended, a summary of significant accounting policies, other explanatory notes and the Directors' Declaration.

The Responsibility of the Director's for the Financial Report

The Directors of the Co-Operative are responsible for the preparation and fair presentation of the financial report and have determined that the accounting policies described in Note 1 to the financial statements, which form part of the financial report, are appropriate to meet the requirements of the *Co-operatives National Law Application Act 2013* and are appropriate to meet the needs of the members. The Directors' responsibility also includes such internal controls as the Director determines as necessary to enable the preparation of a financial report that is free from material misstatement, whether due to fraud or error.

Audit 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 Auditing Standards require that we 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 statement, whether due to fraud or error. In making those risk assessments, the Auditor considers internal control relevant to the entity's preparation and presentation of the statement 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 Directors, 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 Australian professional ethical pronouncements.

Audit Opinion

In our opinion, the financial report of Gunditjmara Aboriginal Co-Operative is in accordance with the *Co-operatives National Law Application Act 2013*, including:

- a. giving a true and fair view of the Co-Operative's financial position as at 30th June, 2014 and of its performance for the year ended on that date in accordance with the accounting policies described in Note 1; and
- b. complying with Australian Accounting Standards to the extent as described in Note 1, and complying with the *Co-operatives National Law Application Act 2013*.

Felicity Melican Partner SINCLAIR WILSON

Dated this 19 January, 2015

257 Timor Street Warrnambool VIC 3280



Head office

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