



**Aboriginal
Health Council
of Western Australia**

Annual Report

2024-2025

**We acknowledge the
Whadjuk people of the
Noongar Nation as the
custodians of the land that
AHCWA is located on and
we pay our respects to
all Elders, past, present
and future.**

Annual Report Artwork 2024–2025 by Goreng Minang Noongar artist Kieron Pearce.



DISCLAIMERS

A. The term Member Service is inclusive of all Aboriginal Community Controlled Health Services (ACCHS) and Aboriginal Community Controlled Health Organisations (ACCHOs) that satisfy the membership requirements of the AHCWA Constitution.

B. The word Aboriginal has been used throughout this document. When referring to Aboriginal we are referring to all Aboriginal and Torres Strait Islander people.

Our Member Services

The Aboriginal Health Council of Western Australia (AHCWA) is the state's peak body for Aboriginal health. We exist to support and act on behalf of our Member Aboriginal Community Controlled Health Services (ACCHS) across WA, offering support, advocacy, and influence; building capacity, and strengthening the Sector to improve health outcomes for Aboriginal people and their communities.

Our Member Services

- 23 members located across seven regions in WA.
- Perating 86 service delivery sites.
- Offering health and wellbeing services specifically designed to meet the health needs of local Aboriginal people.
- Providing high-quality, holistic, and culturally safe care to over 55,000 Aboriginal and 10,000 non-Aboriginal patients around the state.
- Delivering around 500,000 episodes of care per annum.
- Providing relevant and comprehensive training for Aboriginal health workers and practitioners, clinic experience for nurses, and registrar training for general practitioners.

Beagle Bay Health Service

Bega Garnbirringu Health Service

Bidyadanga Health Centre

Broome Regional Aboriginal Medical Service

Derbarl Yerrigan Health Service

Derby Aboriginal Health Service

Geraldton Regional Aboriginal Medical Service

Kimberley Aboriginal Medical Services

Mawarnkarra Health Service

Milliya Rumurra Aboriginal Corporation

Moorditj Koort Aboriginal Corporation

Ngaanyatjarra Health Service

**Ngangganawili Aboriginal Health Service
Community**

Ngnowar Aerwah Aboriginal Corporation

Nindilingarri Cultural Health Services

Nirrumbuk Environmental Health and Services

Ord Valley Aboriginal Health Service

Pilbara Aboriginal Health Alliance

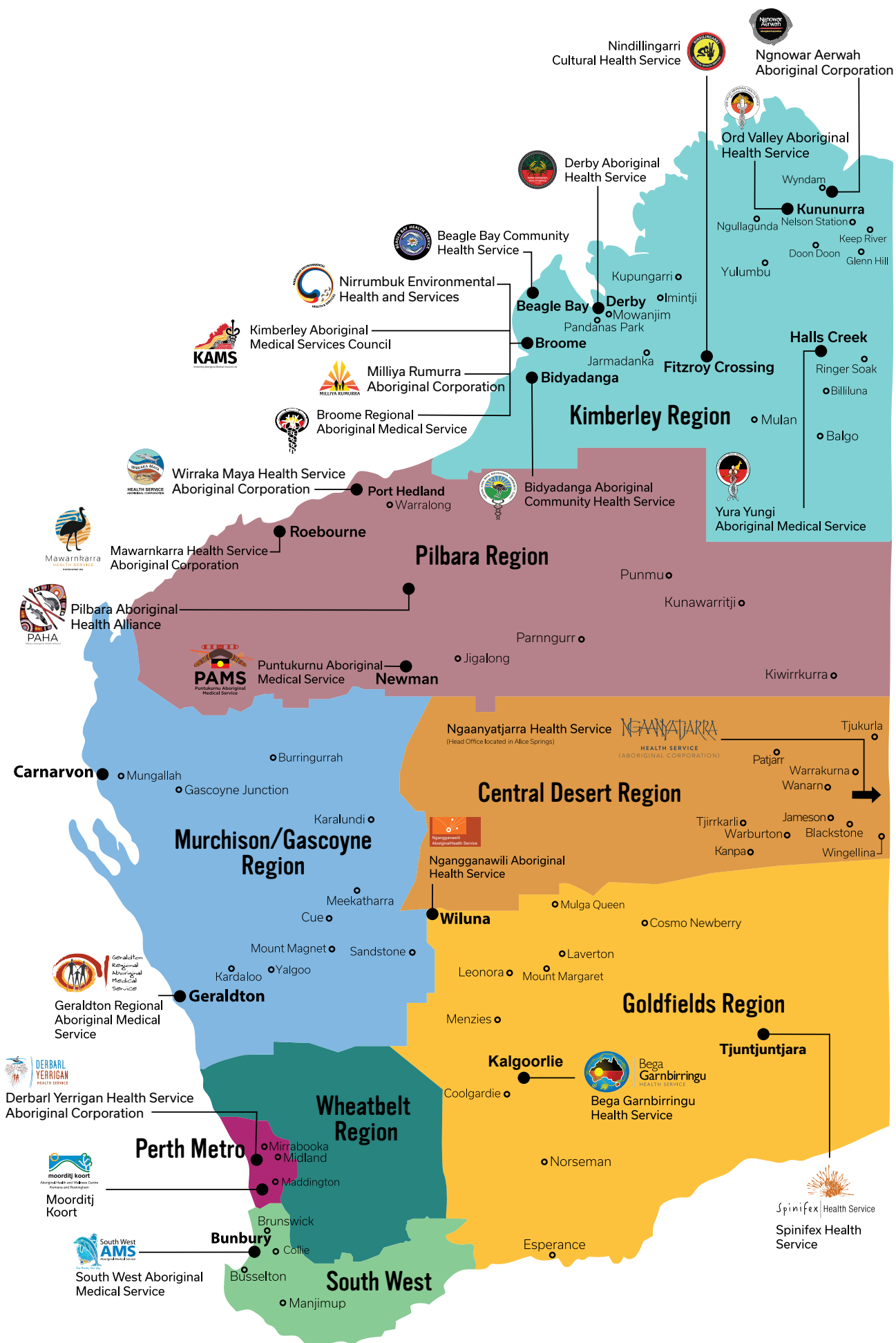
Puntukurnu Aboriginal Medical Service

South West Aboriginal Medical Service

Spinifex Health Service

Wirraka Maya Health Service

**Yura Yungi Medical Service Aboriginal
Corporation**



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Welcome to the 2024–2025 Annual Report

This year marks 20 years of operation for AHCWA. In honour of this, the 2024–2025 Annual Report carries an emerald green theme, representing growth and renewal. Thank you to all our Member Services, partners, and stakeholders for walking alongside us over these past 20 years.

As the peak body for ACCHS across WA, AHCWA exists to support our Member Services in delivering comprehensive primary health care effective for Aboriginal people and their communities. Central to this work is striving to support and promote the ACCHS Model of Care, a model that is built around the delivery of comprehensive, holistic, and culturally secure health care services. Strength in culture, community control, and self-determination underpin everything we do. We understand that when services for Aboriginal people are led and delivered by Aboriginal people, the outcomes are always better. Our vision is for Aboriginal people to enjoy the same level of health and wellbeing as all Western Australians.



Figure 1: ACCHS Model of Care

Strategic Goals

1

Enhance and Promote

the ACCHS Model of Care as the best practice primary health care for Aboriginal people and communities.

**Enhance
and Promote**

2

Support and Strengthen

our Member Services to achieve excellence in service delivery.

**Support
and Strengthen**

3

Lead and Influence

the state and national Aboriginal health policy and research agenda as determined by our Member Services.

**Lead
and Influence**

**Grow
and Advance**

4

Grow and Advance

the capacity and capability of AHCWA and our Member Services for long-term sustainability.

Chairperson and CEO's Report



Pictured: AHCWA CEO Des Martin and Chair Vicki O'Donnell OAM at the 2025 WA ACCHS Conference, July 2025

AHCWA has worked throughout the 2024–2025 financial year to grow relationships fundamental to our partnerships, such as with the Department of Training (DoT) and Workforce Development (DTWD), Department of Justice (DoJ) and the joint work with the Council of Aboriginal Services Western Australia (CASWA).

The National Health Reform Agreement (NHRA) remains a critical framework for health funding and service delivery in Australia. From AHCWA's perspective, the NHRA must ensure that resources are distributed equitably and that the unique needs of Aboriginal people in WA are recognised and prioritised. AHCWA continues to advocate for funding models that strengthen ACCHS, embed cultural safety, and support local decision-making in line with Closing the Gap.

The National Skills Agreement (NSA) represents a significant opportunity to grow and sustain the Aboriginal health workforce. AHCWA has been actively engaging with the DTWD and other partners to ensure the NSA reflects the priorities of our Sector.

Building a skilled Aboriginal workforce, particularly in regional and remote areas, is essential for improving access to culturally secure health care. AHCWA's role is to guide the implementation of the NSA in WA to ensure training pathways, funding, and partnerships strengthen Aboriginal community control and meet the health needs of our people.

Through the Coalition of Peaks, AHCWA has actively contributed to national policy discussions that impact Aboriginal health and wellbeing. These engagements have provided a platform for AHCWA to represent the voices of WA ACCHS and ensure that WA-specific challenges are understood in national reform processes. Our involvement underscores the importance of collaborative advocacy and reinforces the collective strength of the ACCHS across Australia.

Collaboration between WA's two peak bodies for Aboriginal community control, CASWA and AHCWA, with the DoJ over the past 12 months has contributed to substantial improvements that are underway within youth facilities at Banksia Hill Detention Centre. An invitation has been extended to the Sector to supply an ACCHO model of care within Banksia Hill, and discussions are underway with Derbarl Yerrigan Health Service (DYHS) around the co-design of an ACCHO-led youth justice health service model for trial at the facility. These changes point to a commitment from the DoJ to doing the right thing by our young people in detention, to taking a rehabilitative rather than a punitive approach, and to ensuring their needs are being met.

In 2023, AHCWA was funded by the WA Department of Health to develop a contemporary Aboriginal Environmental Health Model of Care as a blueprint to achieving equity in health outcomes by

addressing preventable environmental health conditions. The reduced capacity of our communities to prevent or minimise environmental health conditions is the result of the lasting impacts of colonisation and subsequent government policies, marginalisation, and limited access to services. To make progress, we need trust, cultural safety, local presence, and Aboriginal environmental health workers who are supported to work respectfully and effectively with our communities. We would like to acknowledge all stakeholders, including all staff, service providers, and community members who engaged with and contributed to the co-design process and the development of this significant document for our Sector.

Following around nine years' work and a concerted effort from across the nation to get the new National Aboriginal Community Controlled Health Organisation (NACCHO) constitution across the line, the modern charter is a noteworthy achievement and a positive step for NACCHO. The process engaged more than 1,000 people across 60 sessions, and our WA members should be congratulated for their contribution to a structure that will ensure a strong national body for our Sector. AHCWA would like to congratulate NACCHO on this momentous outcome.

The transition of funding to Aboriginal community control is a significant milestone that reflects long-standing advocacy by our communities for greater control over health services and outcomes. The commitment by Government to progressively transition funding from non-Aboriginal providers to Aboriginal community control aligns with Priority Reform One of the National Agreement on Closing the Gap, ensuring that Aboriginal people have formal partnerships and

shared decision-making. It is not just about transferring services, it is about transferring power, decision-making, and resourcing to our communities so that services are responsive, effective, and culturally secure. AHCWA stands ready to work alongside our Member Services and Government to support a well-planned, transparent, and staged transition process that strengthens the capacity of our Sector, maintains continuity of care for our people, and ensures outcomes are led by community.

AHCWA's Board of Directors have been working on the new five-year Strategic Plan 2025–2030 and have held workshops with Member Services, their CEO's and AHCWA staff. The Strategic Plan is structured around six strategic pillars that reflect AHCWA's long-term commitment to improving the health and wellbeing of Aboriginal people in WA. Each pillar outlines a key focus area for the organisation over the next five years, positioning AHCWA to lead Sector growth, influence policy reform, and strengthen the ACCHS Sector. This alignment with the National Close the Gap Agreement ensures that AHCWA's strategy is not only community-driven, but nationally connected and positioned to contribute meaningfully to Closing the Gap reforms in WA. It also reinforces AHCWA's leadership role in driving Sector-wide structural change to improve the health and wellbeing of Aboriginal people in this state.

In acknowledging the excellent work being done in the Sector and recapping the highlights of the past 12 months, we would like to single out the COVID-19 Response Review. This comprehensive Review was conceived by AHCWA and supported by CEOs from ACCHS across WA. It catalogues the experience of our ACCHS throughout the COVID-19

pandemic, offering compelling analysis of our state's pandemic plans as they relate to the specific needs of Aboriginal people. The Review presents unequivocal evidence for the urgent need for plans that support local solutions, which are culturally appropriate and helpfully consider the needs of Aboriginal people across WA. It highlights how ACCHS assistance to Government was vital to the success of the pandemic response, and presents the case for meaningfully valuing ACCHS expertise and knowledge to support the communities they serve. The Review makes important recommendations to the WA State and Commonwealth Governments, and to our Sector, to ensure we take forward the hard-won lessons of the pandemic and build on the strong partnerships that emerged during that time. We are immensely grateful to our Member Services for the tremendous work done in keeping our people safe during the pandemic, and to AHCWA's Medical Advisor Dr Marianne Wood for her leadership during the COVID-19 pandemic, and in the writing of this Review.

We would like to acknowledge the strong governance and leadership from the AHCWA Board and the CEOs through the State CEO Network. Both of these groups are highly influential, and necessary for advocating for the Sector through their voice, views, and aspirations in ensuring that government policies are guided by what the Sector determines are the priorities are and the best way to meet the Sector's needs.

Over the next 12 months, AHCWA will be focusing on youth and men's health. Youth is often a forgotten space and AHCWA has continued as an organisation to support the AHCWA Youth Committee, understanding their contribution is significant and

broader than health. The Committee is part of our core business and AHCWA will continue to advocate for further funding to support the Sector, particularly through the WA Aboriginal Youth Conference. We would like to take the opportunity to thank National Indigenous Australians Agency (NIAA) for their funding and support for the 2025 WA Aboriginal Youth Conference, which we may not have been able to host without their commitment.

Men's health is another overlooked area and AHCWA is making this a priority for the 2025–2026 financial year by sourcing avenues to host a Men's Health Forum in the 2026–2027 financial year. The engagement from the session held at the AHCWA WA ACCHS Conference, along with discussions through the Regional Planning Forums, will assist in providing AHCWA direction for the Forum, and in developing a statewide Sector strategy.

We would like to thank the AHCWA Directors, staff, and Member Services for their continued dedication and commitment to Aboriginal health, and to the funders for enabling AHCWA to work with the Member Services to develop, implement, and drive the changes necessary to support Aboriginal people and communities. This resonated with the 2025 WA ACCHS Conference, Members Day, WA Aboriginal Youth Conference theme *Nurturing a Strong Tomorrow through Culture, Care and Community*.

We look forward to working with you all closely in the 2026–2027 financial year.

Executive Directors



VICKI O'DONNELL OAM
Chairperson

Vicki O'Donnell is a Nyikina Aboriginal woman from Derby and has been a leader in Aboriginal community-controlled health for the past 17 years. She has been the CEO of the Derby Aboriginal Health Service (DAHS) and is currently the CEO of the Kimberley Aboriginal Medical Service (KAMS) in Broome. Ms O'Donnell has been a Director of AHCWA for more than 17 years, spending nine as the Chair. In 2022, she received the Medal of the Order of Australia (OAM) in the General Division for service to the Aboriginal community of WA.



CHRISTOPHER (CHIPS) BIN KALI
Deputy Chairperson

Christopher Bin Kali is a Bardi Jawi and Gidja man from the Kimberley. Born in Derby, he spent 10 years working within the education system, before moving to the Government sector as a Field Officer at the Department of Education, Employment, and Training. Mr Bin Kali was the Broome Regional Aboriginal Medical Service (BRAMS) CEO for nearly nine years. Health has been a significant part of his life for over 17 years, either working in the Aboriginal Medical Service or as a Director. He has contributed to the better health of Aboriginal people over the years and looks forward to continuing to work for his people.



FABIAN TUCKER
Secretary

Fabian Tucker is a Wongatha man from North Eastern Goldfields. He was born in Kalgoorlie, and has established and managed several businesses over the past two decades. Mr Tucker has been a Director at Bega Garnbirringu Health Service (BGHS) since 2007, and the organisation's Chair since 2006, overseeing BGHS's growth and success for 16 years. He has been a Director of the AHCWA Board since 2007 and commenced as Secretary in 2017.



JUNE COUNCILLOR
Treasurer

June Councillor is a proud Banjima woman and has been the CEO of Wirraka Maya Health Service Aboriginal Corporation (WMHSAC) in South Hedland since 2012. For three years before that, she was the Indigenous Advisor to the Office of the Ombudsman WA (the Parliamentary Commissioner for Administrative Investigations), advising on the child death review team and supporting the complaints investigation team on Aboriginal affairs. Ms Councillor is passionate about Aboriginal child and maternal health and issues such as Fetal Alcohol Syndrome (FASD). She has engaged the Telethon Kids Institute to work to make FASD history in the Pilbara.

Regional Directors



ERNIE HILL
South West

Ernie Hill is a proud Ballardong Wardandi man who grew up on and has spent most of his life in Wardandi Country. He has a passion for empowering and raising the voice of Aboriginal people in the South West. Mr Hill is the South West Aboriginal Medical Service's (SWAMS) Chairman and Director of AHCWA. He is the Chairperson of the Goomburrup Aboriginal Corporation (GAC) and Catch a Dream Inc. Mr Hill is also a Board member of Advocacy South West. He is passionate about Closing the Gap and improving the health and wellbeing of Aboriginal people.



ERIC SIMPSON
Goldfields

Eric Simpson was born in Geraldton, and worked for many years across the mining sector around Meekatharra, before moving to Wiluna to run a mechanics workshop at the request of his family. He has been the Director of the Ngangganawili Aboriginal Health Service (NAHS) since 2011 and Chairperson since 2015. A compassionate man who raised his family as a single dad, he is committed to helping the local community. Mr Simpson sees this service to the local community as his way of giving back.



STANLEY WATSON
Pilbara

Mr Stanley Watson is a respected Elder of the Nyiyaparli people of the East Pilbara region. He is the Chairperson of Puntukurnu Aboriginal Medical Service (PAMS) and a representative of the Karla Nyiyaparli Aboriginal Corporation (KNAC). Hailing from the Martu through his mother and Nyiyaparli from his father, Mr Watson grew up in Marble Bar and Port Hedland, and now calls Newman home, where he is an integral part of the community. In his professional capacity, he works closely with several mining companies, focusing on land surveying to ensure the preservation and protection of cultural heritage and history. Mr Watson is driven by a passion for making a positive impact in his community.



RACHEL MALLARD
Gascoyne Murchison

Rachel Mallard was born in Geraldton with a connection to both Wajarri and Nhanda. Her mother and father founded Geraldton Regional Aboriginal Medical Service (GRAMS). Ms Mallard is passionate about family, culture, and Aboriginal health and is committed to continuing her parents' legacy. She believes that without good health, you have nothing. Ms Mallard is the Chairperson of the Barrell Well Community. She is also a Board member of GRAMS and the Hutt River Cultural Committee and a Director of AHCWA.



RAYMOND CHRISTOPHERS
Kimberley

Raymond Christophers is a man of Bardi descent, hailing from the Dampier Peninsula. He is the CEO and Managing Director of Nirrumbuk Environmental Health and Services. Mr Christophers has been a member of the Nirrumbuk Aboriginal Corporation for 27 years and a Director for 25 years. He has been a member/Director of his local Aboriginal Medical Service (BRAMS) and a KAMS Council representative. Mr Christophers holds the position of Deputy Chair on the Board of KAMS and is a Director on the Board of AHCWA.



PRESTON THOMAS
Central Desert

Preston Thomas, known as "Mr. T", was born in Mount Margaret and is a Wongi man who works on the Ngaanyatjarra Lands. He is a former Deputy Chairperson of the Aboriginal Land Trust. He is currently the Deputy Chair of the Ngaanyatjarra Group (which includes the Ngaanyatjarra Council Aboriginal Corporation, Ngaanyatjarra Services, and Ngaanyatjarra Health Service). Mr. T is also the Chairperson of the Kanpa Community Council. He is an active member of the Aboriginal Legal Service of WA and has been a Director of AHCWA since 2015. He has served as WA representative Director on the NACCHO Board for three years.



JOSLYN EADES-TASS
Metro Rep

Ms Eades-Tass was appointed to the AHCWA Board on 30 June 2025. She is a Noongar woman with custodian ties to the Wagyl Kaip and South West Boojarah regions of the South West. Ms Eades-Tass is the founding director of the Dream a Dream Foundation, a member of the Supervised Review Release Board at the WA Department of Justice, and a member of the Department of Communities Care Planning Review Panel. She is also a WA Director for the National Aboriginal and Torres Strait Islander Women's Alliance and Accordwest Boards, and is a committee member with NAIDOC Perth.



VINCENT CARTER
Youth Rep

Vincent Carter is a proud Gooniyandi and Kija man on his father's side, and Butchulla and Jagera on his mother's. He is Senior Manager, Communications at KAMS and serves on the Kimberley Regional Aboriginal Men's Health Sub-Committee, chairs the AHCWA Youth Committee, and represents as Youth Director on the AHCWA Board. Mr Carter is committed to learning, leading, and sharing knowledge that empowers our communities. Outside of work, he finds strength and balance with his partner and two kids—camping, fishing, and spending time on Country to nourish the mind and soul. Every step he takes is about growth, connection, and creating a healthier future for our people.

Executive Management Team



DES MARTIN
Chief Executive Officer

Corporate Services, Office of the CEO, Health and Wellbeing.



AMANDA COLLINS-CLINCH
Executive Manager

Office of the CEO, Business Development, Mappa, Policy Advocacy and Strategy, Sector Engagement.



KIM GATES
Executive Manager

Public Health, Sexual Health and Blood Borne Viruses, Social and Emotional Wellbeing.

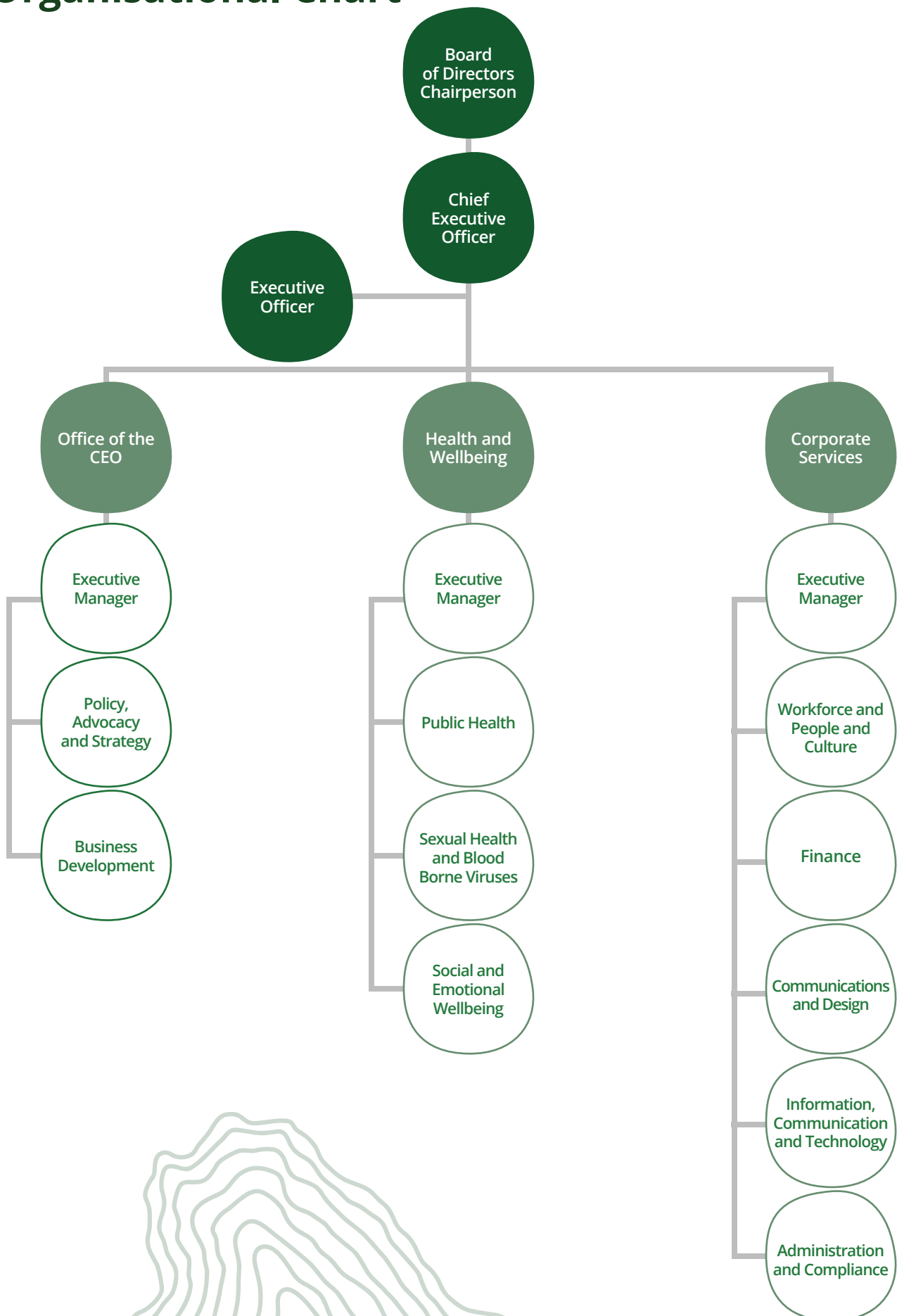


TRINA PITT
Executive Manager

Workforce People and Culture; Finance, Communications and Design, Information, Communications and Technology, Administration; Workforce and Sector Development, Events.



Organisational Chart



Office of the Chief Executive Officer:

Policy, Advocacy, and Strategy

AHCWA's Policy, Advocacy, and Strategy Work Unit works to promote the ACCHS Model of Care and service excellence, and to influence policy at all levels of government. Throughout the 2024–2025 financial year, the Policy Work Unit worked closely with the other AHCWA work units to elevate the voices of our Member Services by taking part in national and state inquiries and reviews.

AHCWA's submissions to national inquiries included food security, mental health, alcohol and other drugs, prostate cancer, prison healthcare, family safety planning, and Closing the Gap and the Aboriginal and Torres Strait Islander-led Review.

The organisation regularly facilitates Member engagement with state and national consultation processes, gathering feedback from Member Services to inform AHCWA submissions and providing information for Member Services. This includes the facilitation of CEO Network meetings with the WA ACCHS. Key topics over the 12 months have included the transition of funds to the Aboriginal community controlled sector; establishment of further ACCHS; lateral violence; NSA Workforce Strategy; GP recruitment; Mental Health and Alcohol and Other Drugs Strategy 2025-2030; Early Childhood Dental Program; and the NHRA.

AHCWA regularly provides advice to government agencies, such as Health, Communities, and the Mental Health Commission—regarding Aboriginal program and model of service design, highlighting gaps and inequities in services, as well as providing feedback on what is working well. The organisation consistently engages with our Member Services for feedback on submissions and to understand issues and areas of concern



Lead and Influence

through CEO Network meetings and other forums. AHCWA also shares information around opportunities for Member Services to participate in working groups and other committees, across a range of policy areas.

AHCWA responded to 69 requests for formal policy advice and information in the financial year, including at least 22 requests from Member Services. The organisation conducted 92 formal consultations on policy and advocacy for the Sector, including ambulance access, dental and oral health, aged care, renal and dialysis, mental health and SEWB, youth justice and health, workforce, NDIS and disability, and food security.

AHCWA provided submissions to seven national inquiries and national consultation processes, supported by feedback from Member Services.

Submissions:

- National Strategy for Food Security in Remote First Nations Communities; and
- Department of Social Services on the draft list of the National Disability Insurance Scheme (NDIS) supports (draft list).

National Health Reform Agreement

The National Health Reform Agreement (NHRA) is an agreement signed between the Australian Government and all state and territory governments. It sets out the shared responsibilities and contributions of both levels of government in the planning and performance of public hospital services. Following the NHRA Mid-Term Review and the 2024 Aboriginal and Torres Strait Islander Roundtable, the Federal Minister for Health and Aged Care announced the Government's intention to include a dedicated Aboriginal Schedule in the next Addendum (2025–2030). The new Aboriginal Schedule

aims to recognise and strengthen the ACCHS Sector, improve governance and funding arrangements to deliver better Aboriginal health outcomes, and enhance cultural safety across the health system. It also seeks to improve access to services in rural and remote areas; and align with the National Agreement on Closing the Gap.

AHCWA's senior policy officer has been working alongside other national affiliates and the Deputy CEO at KAMS to draft the Aboriginal specific schedule, now referred to as Schedule B. Development has involved close collaboration and co-design with state and territory governments through the Health Collaboration. Schedule B is now nearing finalisation, with a strong policy focus on governance, accountability, cultural safety, and Indigenous data sovereignty.

Sustainable Health Review

AHCWA's Policy Work Unit continues to advocate strongly in relation to the Sustainable Health Review (SHR) contributing to the Mid-Point Review and advancing key recommendations. This includes work on the 'First 1,000 Days Framework' and the WA Health Workforce Strategy, reviewing Aboriginal Health Impact Statements and the development of Aboriginal-specific health measures, indicators, and outcomes.

2025–2026 Budget Submission and Election Priorities

In preparing the 2025–2026 Pre-Budget Submission, the Policy Work Unit adopted a more targeted approach, focusing on discrete, costed proposals designed to meet the needs of the ACCHS Sector. Priority areas identified included healthcare infrastructure, the Patient Assisted Transfer Scheme and Patient Journey, and improving access to oral health.

As 2025 was a WA State Election year, the Policy Team also developed an election advocacy paper, provided to all ministers, which highlighted broader sector priorities. These included culturally safe short-stay accommodation for pregnant women, affordable and appropriate housing, the Aboriginal Environmental Health Model of Care, and community capacity building for remote maintenance. These documents also featured proposals around free dental care for all Aboriginal people in WA, Social and Emotional Wellbeing and Family and Domestic and Sexual Violence Program Funding, and improved child development services. As a result of this advocacy, AHCWA was invited to contribute to the functional brief for the short-stay accommodation component of the WA Government's new Women and Babies Hospital.

AHCWA's Election Priorities

- 1 Culturally Safe Short-Stay Accommodation for Pregnant Women
- 2 Affordable and Appropriate Housing
- 3 Funding for the Aboriginal Environmental Health Model of Care and Community Capacity Building for Remote Maintenance
- 4 Free Dental Care for all Aboriginal people in WA
- 5 Social and Emotional Wellbeing and Family and Domestic and Sexual Violence Program Funding
- 6 Improved Child Development Services

Oral Health

The Policy Work Unit has continued to advocate for improved oral health services for Aboriginal people across WA. This included designing a new oral health care delivery model in partnership with the Sector and the Royal Flying Doctor Service in the Kimberley, providing policy advice on the Early Childhood Dental Program (Smiling Starts), and working with the Office of the Chief Dental Officer to advance ACCHS Sector oral health service priorities.

Aged Care and Disability

The Policy Work Unit have addressed Member Services' queries regarding Aged Care Assessment Team (ACAT) within ACCHS and advised on future aged care assessment reforms. In response to this query and the stalling of ACAT in ACCHS, AHCWA met with WA Health's Acting Manager of Aged Care Programs and Planning to advocate for an Aboriginal workforce to deliver aged care assessments.

The Work Unit provided Member Services with information about specific aged care grants and available training, and offered them the opportunity to provide feedback on communication

and education regarding the new Aged Care Quality Standards (First Nations specific). The Team has engaged on an ongoing basis with the Australian Government (DoH) and Aged Care WA stewards to advocate for reforms in First Nations aged care. AHCWA's letter to the Interim First Nations Aged Care Commissioner was shared to highlight barriers, support needs across the Sector and initiate further discussions on advocating for change for WA ACCHS.

The Team advocated for funding and resources for WA ACCHS healthy ageing programs and dementia services to WA Primary Health Alliance and Alzheimer's WA, and engaged with WA Health regarding the current TCP pilot and programs being delivered within Member Services. The complexities of the program and steps to progress improvement within WA Health were discussed at these sessions.

The Policy Work Unit participated in the 2025 National Elder Care Support Yarning Circle, which provided an opportunity to network with national bodies and the ability to inform further aged care advocacy efforts for WA ACCHS.

AHCWA met with the Director General of the DoC, Mike Rowe, and his team during the course of the reporting period to discuss their plans for implementing foundational supports. The discussion emphasised the importance of genuine collaboration between the Department and the ACCHS Sector at every stage of policy development.

AHCWA's Policy Work Unit provided NACCHO with policy feedback on the Aged Care Rules to support their submission to the national consultation, and attended the NDIA's (First Nations division) information session regarding the legislation reforms, and their Legislative Amendment Consultation Session (Sections 44, s47 and s48). In response to NDIS legislation changes, AHCWA has arranged for the NDIA engagement team to hold an information session for Member Services disability staff to support their transition to the new requirements.

AHCWA's Policy Work Unit has also engaged with SNAICC (the National Voice for Aboriginal and Torres Strait Islander children and families) about their involvement in the NDIA's Children's Expert Advisory Group to gather updates on national policies for children with developmental delays. SNAICC's involvement in the development of the national practice framework for early childhood developmental support was discussed, with a focus on how AHCWA Member Services could be consulted in the future.

AHCWA met with KPMG to discuss the development of a Capacity-Building Framework for moving ACCOs into the aged care sector, and shared feedback that was previously received from Member Services on the barriers to entering the aged care sector.



Pictured: Yokai's Dakota Morrison, MKAC's Chantel Narrier, and AHCWA's Workforce and Training Coordinator Helene Casey at the National Aboriginal Community Controlled Health Organisation Elder Care Yarning Circle, on Kaurna Country (Adelaide), April 2025

The Policy Work Unit also attended Independent Health and Aged Care Pricing Authority's (IHACPA's) NDIS pricing workshop for providers to feed back on the NDIS pricing approach, specifically with regard to the limitations of the guide regarding rural and remote delivery.

AHCWA provided CEOs with an update on upcoming aged care reforms that will impact the Sector and provided them with further information regarding the upcoming NDIS mandatory registration.

Mental Health and Social and Emotional Wellbeing

Mental Health and AOD Strategy

AHCWA has played a key advocacy role in shaping the soon-to-be-released Mental Health, Alcohol and Other Drugs Strategy, facilitated by the MHC. Through regular engagement with senior MHC leadership and ensuring ACCHS voices are heard, AHCWA has strengthened its strategic partnership with the Commission. This collaboration has supported more meaningful inclusion of Aboriginal perspectives in statewide policy development, fostering trust, cultural safety, and a shared vision for a more coordinated and responsive mental health and AOD system in WA.

Psychosocial Toolkit

Feedback from Social and Emotional Wellbeing (SEWB) and Family and Domestic and Sexual Violence (FDSV) pilot teams have highlighted the wide variety of resources being used across sites, often developed for local needs but difficult to navigate for new staff. In response, AHCWA, in partnership with KAMS and the University of WA, is developing a culturally secure, strengths-based Screening, Assessment, and Brief Intervention Toolkit. This entry-level resource will

bring together existing best-practice tools and practice-based wisdom from ACCHS across WA, supporting workforce consistency and confidence. The Toolkit will include practical guidance on screening and assessment, psychosocial supports, and brief interventions, alongside culturally secure approaches such as yarning and holistic models of care. It is designed as a 'starter guide' for staff, particularly those new to SEWB roles, and will be supported by accessible resources from platforms such as HealthInfoNet and WellMob.

Family, Domestic and Sexual Violence Reform

AHCWA has actively participated in monthly webinars hosted by the DoC, which provide updates on FDSV reform in WA. These sessions cover key initiatives such as the 16 Days in WA campaign, legislative changes, funding developments, and the design of a new FDSV Workforce Entity and Capability Framework. They have also provided important updates on the review of the Common Risk Assessment and Risk Management Framework (CRARMF) and the development of a new Aboriginal Family Violence Risk Assessment Tool. Participation has enabled AHCWA to share information with the Sector, and to gather feedback that informs ongoing advocacy and strengthens the cultural safety of statewide reforms.

Traditional Healers

AHCWA has continued to explore opportunities to strengthen the role of traditional healers within mainstream health settings. Through ongoing engagement with the Transforming Indigenous Mental Health and Wellbeing (TIMHWP) project and other partners, AHCWA has examined how culturally grounded healing practices can be integrated alongside clinical services to provide more holistic models of care. This work has included

gathering insights from ACCHS and national examples, such as the Anangu Ngangkari Tjutaku Aboriginal Corporation (ANTAC) in South Australia, to understand how traditional healing can be supported through commissioning pathways. Embedding these practices into hospitals and primary care settings offers a powerful opportunity to improve cultural security, expand choice for Aboriginal clients, and strengthen the connection between health services and community-led approaches to wellbeing.

This focus has also been reflected in major infrastructure planning. The Graylands Redevelopment Project (GRP) will deliver new forensic mental health beds, including a dedicated child and adolescent unit. During the project's first stage, functional brief workshops highlighted the importance of incorporating traditional healing spaces and culturally safe outdoor areas. AHCWA's senior policy officer has engaged directly with the project's clinical lead and her team to ensure Aboriginal perspectives are embedded, gathering feedback from AHCWA Member Services to inform the functional design of culturally appropriate spaces. Together, these efforts demonstrate a growing recognition of the value of Aboriginal healing practices in building a more inclusive and culturally safe mental health system.

NACCHO National Disability Insurance Agency (NDIA)

The National Disability Insurance Agency (NDIA) has funded NACCHO and Affiliates to provide policy advice to support culturally safe Aboriginal disability related service delivery. A key focus of this initiative is addressing the low participation and utilisation rates of the Scheme among Aboriginal people with disability. To achieve this, NACCHO and Affiliates have been engaged to conduct national and jurisdictional level workforce and service delivery analysis and desktop research on the disability policy landscape. To do this they will engage with a range of Aboriginal and disability stakeholders to identify flexible frameworks and models for place-based ACCHO service delivery. The work will involve assessing the ACCHO disability servicing landscape through needs assessments in each region.

NACCHO and Affiliates will also provide policy advice to the NDIA on matters that affect Aboriginal participants and communities throughout the life of the project. The project involves a phased approach designed to deliver high-quality outcomes through co-design, stakeholder engagement, and rigorous analysis.

The NDIA is dedicated to improving access to the NDIS and ensuring better outcomes for Aboriginal people. Aligned with the National Agreement on Closing the Gap, particularly the Priority Reforms, as well as the recommendations from the Disability Royal Commission and the NDIS Review, the Agency is prioritising initiatives that address systemic barriers and ensure culturally appropriate service delivery.

AHCWA will be engaging with Member Services from June 2024, to identify flexible frameworks and models for

place-based ACCHO disability service delivery. AHCWA will be recruiting for the senior policy officer NDIA position to undertake this work.



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Formal AHCWA
Policy Responses

22

from AHCWA
Member Services



Pictured: AHCWA's Policy, Advocacy and Strategy Work Unit, Jenn Sweeting, Kim Brewster and Klaudia Shenton, present at the 2025 WA ACCHS Conference Members Forum.



MAPPA

Mappa is an online platform which seeks to improve access to health services as close as possible to family, home, and Country for Aboriginal and non-Aboriginal people. Mappa's consultation, design, and development have been driven by cultural considerations and made possible through collaboration with the WA health sector. The platform uses spatial mapping technology to chart the location of primary, secondary, and tertiary health care services, alcohol, and other drugs services, visiting specialists, outreach clinics, and mental health and social and emotional wellbeing facilities in regional and remote WA. It works to help Aboriginal and non-Aboriginal people, health service providers clinicians, GPs, allied health, and health professionals to better-access health service as close as possible to family, home, and Country.

Mappa supports the Sustainable Health Review's Recommendation 12: *Improve coordination and access for Country patients by establishing formal links between regions and metropolitan health service providers for elective services including outpatients and telehealth, patient transfers, clinical support, and education and training.*

As of July 2024, AHCWA was required to place the Mappa platform on hold due to the inability to access further funding to support its continued update and maintenance. AHCWA is seeking further funding to support this maintenance.

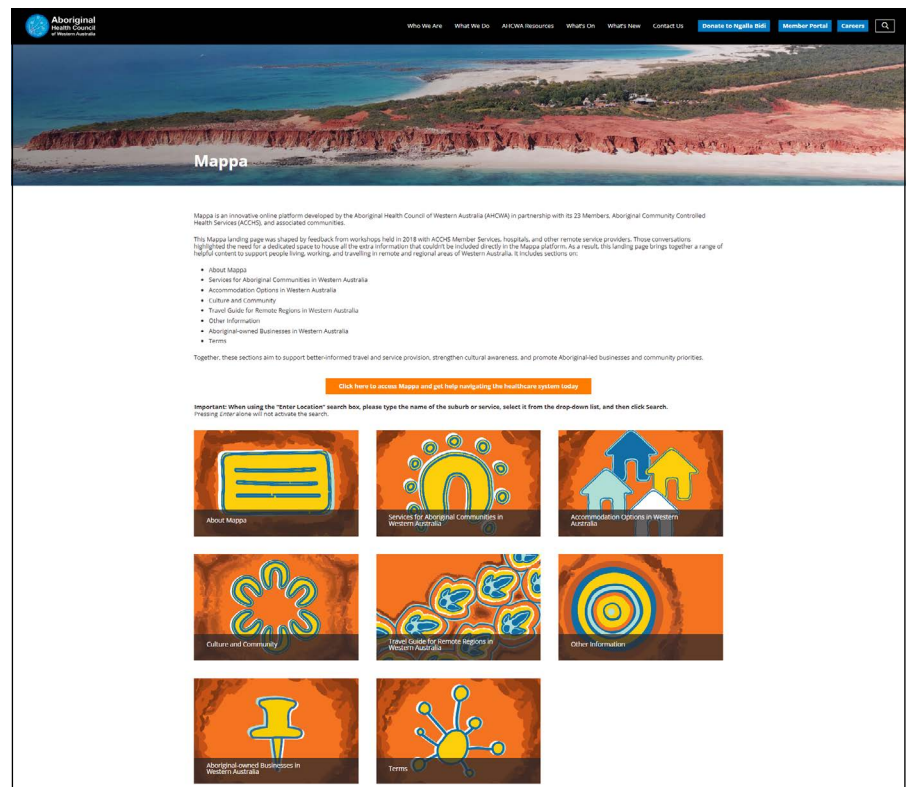
In early 2025, key information on the platform was transferred to the AHCWA website, making additional information about Mappa available alongside the Mappa platform.

This Mappa landing page was shaped by feedback from workshops held in 2018 with ACCHS Member Services, hospitals, and other remote service providers. Those conversations highlighted the need for a dedicated space to house all the extra information that couldn't be included directly in the Mappa platform. As a result, this landing page brings together a range of helpful content to support people living, working, and travelling in remote and regional areas of Western Australia.

It includes sections on:

- About Mappa
- Services for Aboriginal Communities in Western Australia
- Accommodation Options in Western Australia
- Culture and Community
- Travel Guide for Remote Regions in Western Australia
- Other Information
- Aboriginal-owned Businesses in Western Australia
- Terms

Together, these sections aim to support better-informed travel and service provision, strengthen cultural awareness, and promote Aboriginal-led businesses and community priorities.



Pictured: The new MAPPA page on the AHCWA website.

COVID-19 Response Review by the WA ACCHS Sector

“What is the greatest lesson for government? It is to listen. To actually be in touch with the people on the ground, with the people themselves. It is easy to make decisions at a distance; but listen to what communities are saying. Listen to the comments that are coming from people on the ground”.

The work of the ACCHS and WA during the COVID-19 pandemic emergency was remarkable—in both scope and scale. For almost three years, the ACCHS Sector worked relentlessly to reduce the impact (both direct and indirect) on Aboriginal families and communities across the state. From the outset of the COVID-19 pandemic emergency, the ACCHS in WA provided Aboriginal people with culturally safe, localised and accessible alternatives—for information, vaccination, testing, and treatment; and filled multiple gaps where there was no government service available.

AHCWA's 180-page COVID-19 Response Review by the WA ACCHS Sector, published in July 2025, details the remarkable scope and scale of the work undertaken by the Sector during the pandemic, and how it indispensably complemented the State's response. In cataloguing how the WA ACCHS Sector responded to the threat of COVID-19 from the early weeks of 2020 until WA's state of emergency ended on 4 November 2022, the Review presents unequivocal evidence for the urgent need for culturally appropriate emergency and pandemic plans that support local solutions. It highlights how ACCHS' assistance to government was vital to the success of the pandemic response, and presents the case for meaningfully valuing ACCHS expertise and knowledge to support the communities they serve.

The Review describes how the Sector's unique Model of Care was readily adapted for each stage of the pandemic—meeting the needs of Aboriginal communities and filling multiple gaps in government service delivery. It highlights the Sector's remarkable resilience, flexibility, responsiveness, and

innovation. Above all, it describes the Sector's absolute commitment to Aboriginal people, not just locally but throughout WA.

The purpose of the Review was to, firstly, provide a detailed written record of the work done by WA ACCHS throughout the COVID-19 emergency; secondly, highlight the unique qualities that ACCHS bring to WA's health service landscape; thirdly, describe how decisions by the WA Government impacted ACCHS and Aboriginal communities (both positively and negatively); and finally, provide guidance to decision-makers regarding future emergency planning, to ensure an appropriate focus on the needs of Aboriginal people. Plans must be developed with Aboriginal people.

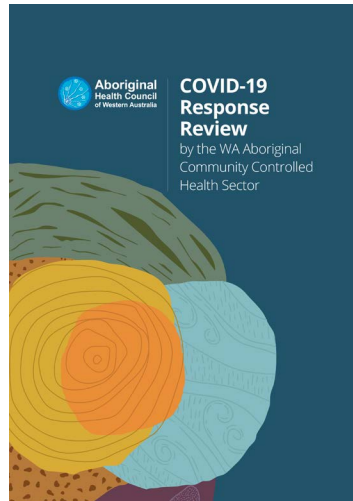
Astonishingly, the ACCHS Sector was invisible within WA's standing pandemic and epidemic plans going into COVID-19. ACCHS had not been involved in the development or review of the plans, had not participated in government-led scenario testing exercises, and had no agreed roles in an emergency pandemic response—“Next time we need a plan in the beginning that everyone knows about and has contributed to. A plan that supports local solutions” (de-identified quote from page 16).

WA's pandemic plans were highly centralised and government-focused and while they identified the potential heightened risk for Aboriginal people, there were no obvious arrangements in place to mitigate these risks. During the course of the emergency, some COVID-specific plans were developed with input with the ACCHS, but these plans have now ‘expired’ and the system has largely returned to the pre-pandemic status quo.

Despite having no formal role, ACCHS willingly provided their expert advice throughout the COVID-19 emergency—attending government meetings and providing feedback on proposed strategies. When their advice was ignored (or rejected), ACCHS took the lead and designed their own responses.

The Review is available online, where you can read more about how WA ACCHS provided culturally safe and accessible public health information; innovative vaccination strategies; COVID-19 testing (including point-of-care molecular testing in remote communities within weeks of the pandemic declaration); clinical monitoring and treatment; assistance with contact tracing and other public health activities; essential support for isolating households; ongoing comprehensive primary health care; and importantly, advocacy for ACCHS and Aboriginal people throughout WA.

The Review makes serious recommendations for both the WA State and Commonwealth Governments, and for the ACCHS Sector, to ensure that the lessons learnt during the COVID-19 pandemic are not lost, and that the strong collaborative partnerships developed during that time are built upon to ensure we are fully prepared for future health emergencies.



Supporting staff mental health and wellbeing was also crucial. The COVID-19 pandemic was a very stressful time and ACCHS held regular staff meetings to keep everyone informed and connected—with those working from home linked up via teleconferencing.

"Meetings were convened with managers of various centres conducting daily 'check-ins' with their workgroup to both keep communication channels open and to ensure the wellbeing of staff."

At the managerial level, ACCHS were part of wider regional and State-wide collectives including the ANCHM-facilitated Chief Executive Officer (CEO) Network and Clinical Leadership Group (CLG).

"The other ACCHS were fantastic and ANCHM provided a forum for us to share ideas and support each other."

Some ACCHS were able to provide staff with assured COVID-19 leave in case of enforced isolation or quarantine. This was very reassuring to staff who had no personal leave available and "could see the growing queues in the 'extended line'."

On a more positive note, the ACCHS Sector successfully joined the State Government to allow ACCHS staff the same access to real-time COVID-19 testing and routine support as was available for the WA Health workforce. This helped reduce the time ACCHS staff spent in self-isolation while waiting for results.



COVID-19 Response Review by the WA Aboriginal Community Controlled Health Sector | 83

"Next time we need a plan in the beginning that everyone knows about and has contributed to. A plan that supports local solutions."

"Respect that Aboriginal Community Controlled Health Services know what they are doing and that the decision they make are based on knowledge and expertise."

"We have a relationship with the communities and the contacts and the networks and we are best placed to drive and guide and advise. They need to listen to us and we need to have that authority."

Figure 4: Kimberley Desktop Exercise from 2020 held at Kimberley Aboriginal Medical Services



Figure 5: Remote Community Clinic Operational Drill to Test and Practice Response to a COVID-19 Case Diagnosed in a Remote Community



The Importance of Established Partnerships

"The most important point about developing a plan is not where, sitting on the shelf at the end of it all, but it's the journey along the way and the relationships you make with the people you need to deal with when the actual emergency happens."

Paul Armstrong, Director of Communicable Disease Control, Department of Health, WA/NTS

While this section highlights only three of these relationships, the Sector acknowledges that there were a great many other individuals, organisations, and agencies who supported the work of the ACCHS during the pandemic. Many of these relationships are referred to in other chapters of the Review.

ANCHM SECTOR RELATIONSHIPS

During the pandemic, the most important relationships for ACCHS were those within the Sector itself. ACCHS have a shared Model of Care and the united goal of improving health outcomes for Aboriginal people. In WA, ACCHS have worked closely together for decades—sharing ideas, concerns, and information, and providing a strong collective voice for advocacy. ANCHM's role as the peak body was to "support and act on behalf of our (ACCHS) across the state, offering support, advocacy, and influence."¹⁰⁰

The Sector in WA had (and continues to have) a robust and highly effective state-wide networking and communications system that includes both regular CEO Network¹⁰¹ and Clinical Leadership Group (CLG) meetings¹⁰². When COVID-19 arrived in early 2020, this established networking system was quickly and easily adapted to focus on the pandemic. The network provided a mechanism for the two-way sharing of critical and timely information, but also helped reduce the sense of isolation for individual ACCHS.

"We had a forum to share ideas and support each other. It was so stressful and ANCHM and other ACCHS were instrumental in alleviating some of that stress."

"It made all the difference being able to reach out and be part of those conversations. It gave the opportunity for us to be able to talk about our issues and to hear that other health clinics are dealing with similar issues. It was really informative... and also reassuring."



¹⁰⁰ ANCHM, *Aboriginal Health in WA: The Road to Resilient Communities*, 2019, p. 10. ¹⁰¹ ANCHM, *Aboriginal Health in WA: The Road to Resilient Communities*, 2019, p. 10. ¹⁰² These groups are facilitated by the ANCHM. The CLG meetings are chaired by the ANCHM Health Implementation Unit.

Pictured: AHCWA's COVID-19 Response Review by the WA ACCHS Sector.

Ethics

The Western Australian Aboriginal Health Ethics Committee (WAAHEC) is also a sub-committee of AHCWA and one of three Aboriginal-specific Human Research Ethics Committees (HRECs) across Australia. It ensures that health research involving Aboriginal people is conducted ethically, with cultural authority and community priorities at the centre.

WAAHEC’s governance strength lies in its diverse membership, which brings together Elders, community representatives, and professionals to guide decisions. Membership reflects both the National Health and Medical Research Council’s (NHMRC’s) required categories for HREC composition and WAAHEC’s commitment to strong Aboriginal community authority.

WAAHEC Committee Composition
Chairperson
Elder/Deputy Chairperson
Representative with Legal Training
Health Professional
Researchers (x2)
Community Members (x3)
Regional Professionals (x2)
Youth Representative

WAAHEC’s workload is consistently high, with well over 700 submissions in each of the past two years, signalling this level of activity has become the new norm. New applications have rebounded to 93 this year after several years of decline, while amendments (38 per cent) and progress reports (31 per cent) together account for nearly 70 per cent of submissions, reflecting the scale of ongoing projects under WAAHEC review.

Other areas included cultural and social research, infectious diseases, cancer and chronic disease, education, mental health, family and domestic violence, and oral health.

At the 2025 Lowitja Institute International Indigenous Health and Wellbeing Conference, Ashley Councillor, CEO of the Pilbara Aboriginal Health Alliance (PAHA), and June Councillor, CEO of Wirraka Maya Health Service, presented Our Story Our Way, a WAAHEC-approved project led by June as Chief Investigator.

The project is about creating community-led approaches to data governance that put Aboriginal priorities and decision-making at the centre. WAAHEC’s role was to provide the ethical platform that enabled the project, while the leadership and outcomes rest firmly with the Pilbara community.

In 2023, PAHA signed the first Aboriginal-led formal data agreement in WA with the Office of Digital Government. This work is establishing culturally appropriate data protocols, while also highlighting gaps, as only five of the 17 Closing the Gap datasets are available at a Pilbara level.

The initiative now contributes to national policy discussions through the Coalition of Peaks, ensuring the Pilbara experience informs broader reforms.





Pictured: Wirraka May Health Service CEO June Councillor and PAHA CEO Ashley Councillor present Our Story Our Way at the 2025 Lowitja Institute International Indigenous Health and Wellbeing Conference.

Ethics Highlights

- **Hearing Health**
49 projects
- **Telehealth and Digital Health**
27 projects
- **Data and Policy**
21 projects
- **Child and Youth**
16 projects

Submissions Overview (2021/22-2024/25)

The table below shows WAAHEC submissions over the past four years, including 2024-2025.

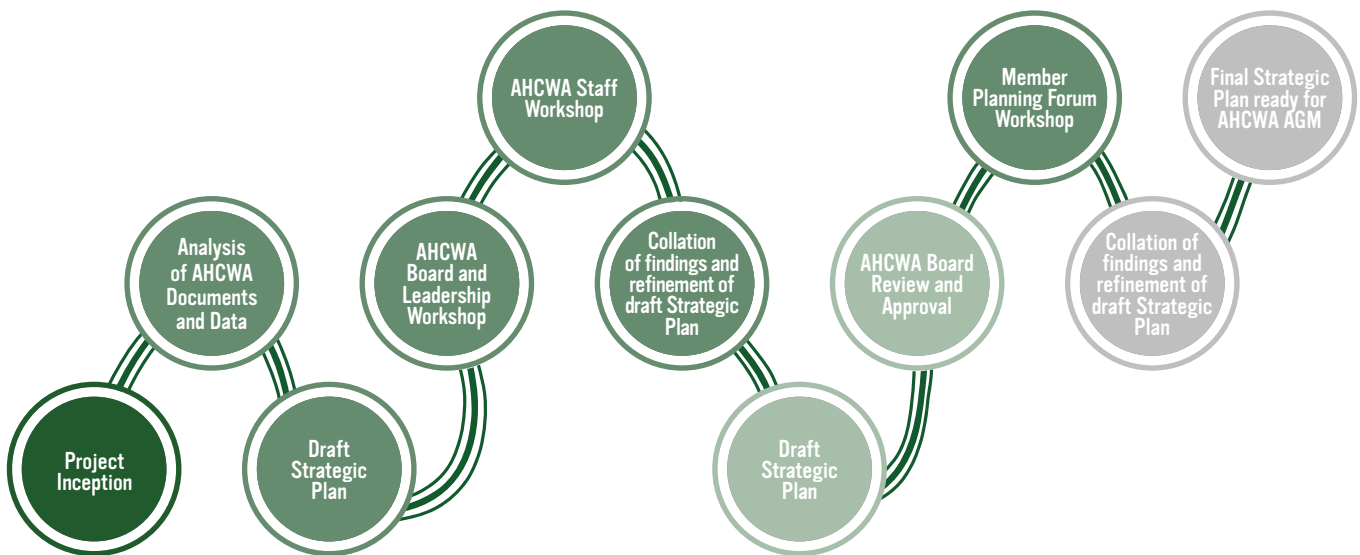
Submission Type	2021/22	2022/23	2023/24	2024/25
Applications	95	86	81	93
Amendments	212	234	295	283
Responses	66	57	76	76
Progress Reports	87	221	233	236
Final Reports	21	18	64	47
Publications	49	25	15	12
Adverse Events	0	3	3	5
Complaints	0	0	0	0
Total	530	644	767	752

Business Development

The Business Development Work Unit is responsible for identifying income streams and business development opportunities for AHCWA and its Member Services, establishing and managing contracts, and strategic planning.

Throughout the 2024–2025 year, AHCWA’s Business Development Work Unit has worked alongside Yamagigu Consulting on developing AHCWA’s Strategic Plan 2025–2030. Recognising the importance of establishing the strategic direction for the next five years of AHCWA, consultations were conducted with our Executive Management Team, our Board, our Member Services, staff, and other relevant stakeholders. We are looking forward to launching the new Strategic Plan at our 2025 AGM.

Strategic Plan 2025–2030 Development Process



AHCWA continues to work with Lotterywest to provide small grants to our Member Services:

\$690,000

Organisational Development
June 2024–June 2026

\$375,000

Crisis and Emergency Relief
December 2023–November 2024*

*Currently working with Lotterywest on a new round of CER funding.

45

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External Funding
Contracts

Member and
Partner
Sub-contracts

- National Aboriginal Community Controlled Health Organisation
- WA DoH
- Mental Health Commission
- Department of Communities
- Department of Premier and Cabinet
- Department of Disability and Ageing
- Australian Digital Health Agency

- WA Primary Health Alliance
- National Indigenous Australians Agency
- Cancer Australia
- Central Queensland University
- University of Western Australia
- University of New South Wales

Organisational Development Devolved Grants by Purpose



Capacity Building: Family, Domestic and Sexual
Violence Support in WA Aboriginal Community
Controlled Health Sector Pilot

\$17,3000,000

Department of Communities
Two-year contract extension to 30 June 2027

Social and Emotional Wellbeing Model
of Service Pilot Program

\$21,800,548

Mental Health Commission
Extension to 30 June 2026

Philanthropic Partners

Our Philanthropic Partners have provided much-needed funding and pro bono services and goods over the past twelve months. We would like to give our sincere thanks to:

Johnson & Johnson

KING & WOOD MALLESONS

The Ngalla Bidi Bursary Fund

“Hearing the journeys of other doctors, particularly those who didn’t have the opportunities and the support that is available today, was truly inspiring and motivating. It reminded me of the privilege and responsibility we have to carry their legacy forward, to break down barriers, and create even more opportunities for the next generation of Indigenous doctors” - Brianna Ozies.

At AHCWA, we’re working to increase the number of Aboriginal doctors delivering healthcare to Aboriginal people in WA. From Monday, 2 until Friday, 6 December 2024, support for our Ngalla Bidi Bursary helped AHCWA to send 10 Aboriginal medical students and junior doctors to the Pacific Region Indigenous Doctors Congress (PRIDoC) in Adelaide.

This Indigenous-led space fosters knowledge sharing, mentorship, and community for Aboriginal medical students, and works to increase culturally safe healthcare for First Nations people across the Pacific. A biannual forum for Indigenous doctors and students from across the Pacific, PRIDoC comprises delegates from Australia, Aotearoa (New Zealand), Taiwan, Hawai’i, the U.S.A, and Canada. Attendees discuss issues of mutual interest, and share scientific advances, best practices, ancient wisdom, and traditional knowledge to further the health and wellbeing of their communities. Support and mentorship of medical students is also a key PRIDoC function.

The inaugural Ngalla Bidi Bursary program was established with the assistance of seed funding from Lotterywest. This enabled a PRIDoC Bursary Officer Keisha Calyun to be employed on a part-time basis to develop promotional materials, commence bursary fundraising activities, network with medical students and junior doctors, and coordinate other program activities.

Funding also supported Keisha and Aboriginal doctors from the WA ACCHS Sector, AHCWA’s Ngalla Bidi Patrons—or ‘Aunties and Uncles’, to attend PRIDoC alongside bursary recipients, offering cultural mentorship and support. AHCWA would like to acknowledge and thank Dr Daniel Hunt, Dr Corey Dalton, and Dr Kim Isaacs. They understand the cultural support and mentorship that is required for the recipients as they continue their studies through medical school.

In its inaugural year, a total of \$28,403.12 was raised with \$11,198.00 from individuals and \$17,205.12 from four organisations.



Pictured: Dr Luke Davies, Brianna Ozies, and Dr Bianca Howard attended PRIDoC 2024 on Kaurna Country (Adelaide).

Thank you to our sponsors and donors for making it possible for WA Aboriginal medical students to connect with Indigenous peers and mentors from across the pacific, to further the health and wellbeing of First Nations communities.

The 2024 sponsors and donors:

- Dr Fiona Stanley
- Rural Health West
- University of WA
- Dr Marianne Wood
- Dr Deborah Lehmann
- Hooi Chee Ee
- The Royal Australasian College of Physicians
- Dr Peter Friedland
- The Burton Family Foundation
- Dr Caitlyn White
- Kim Gates
- Kate Rebeiro
- Rachael Young
- Hannah Hughes
- Harvey Coates
- Jeremy Tweddle
- Alice Tracey
- Marisa Gilles

Congratulations to the 2024 Ngalla Bidi Bursary recipients who attended the 11th Biennial PRIDoC 2024 to delve into the theme: Ngadluku Warra, Ngadluku Tapa Purruna, Ngadluku Purruna (Our Language, Our Culture, Our Health).

The 2024 recipients:

- Shamir Rind
- Shoshanna Scott
- Brianna Ozies
- Kayla Williams-Tucker
- Eliza Mitchell
- Gerad Ryder
- Ella Imber-Ireland
- Bianca Jensen
- Keisha Calyun

PRIDoC will be returning in 2026, this time hosted in Taiwan. To ensure another successful Ngalla Bidi Bursary Program, AHCWA will commence fundraising at the start of 2026 to support the attendance of as many WA-based Aboriginal medical students and junior doctors as possible.



Pictured: Dancers at PRIDoC 2024 on Kurna Country (Adelaide).



**Ngalla Bidi Bursary artwork 2024
by Keisha Calyun, Ballardong Noongar**

Healing from The Voice Referendum

Following the 2023 Referendum on an Aboriginal and Torres Strait Islander Voice, AHCWA received funding from NACCHO to support the organisation's health and wellbeing. Some of the activities AHCWA undertook to support staff wellbeing over the past 12 months are featured.

On the morning of the 17 October 2024, AHCWA staff took the Rottne Express ferry over to Wadjemup to experience a cultural immersion tour with Uncle Walter McGuire and the team from Go Culture Tours.

This teambuilding day offered a special opportunity for the AHCWA staff to learn about the deep historical and cultural significance of Wadjemup, a sacred site in Noongar history.

In February 2025, AHCWA marked the start of a new year with a smoking ceremony by Uncle Nick Abraham from Warrang Bridil, followed by Noongar bushtucker morning tea by Kuditj Kitchen.

On 19 March 2025, AHCWA held a morning tea with staff and invited Joanne Khan and Deidre Backhouse to share their heartfelt stories about their mothers, Gloria Khan and Maxine Armstrong. The event was an opportunity for staff to hear about the remarkable women who dedicated their lives to advancing Aboriginal health in WA and beyond, and understand why our annual employee awards are in recognition of these inspirational leaders.

On Wednesday, 2 April 2025, AHCWA's People and Culture Team arranged an organisation-wide Team Building Day in Boorloo (Perth) which featured a scavenger hunt and a tour of WA Museum Boola Bardip, including a virtual reality experience of The Great Kimberley Wilderness.

On Tuesday, 27 May 2025, AHCWA celebrated National Reconciliation Week with a National Breakfast, where truth-telling, leadership, and connection took centre stage.

On Thursday, 5 June 2025, to mark National Reconciliation Week, AHCWA hosted a VR experience of Galup (Lake

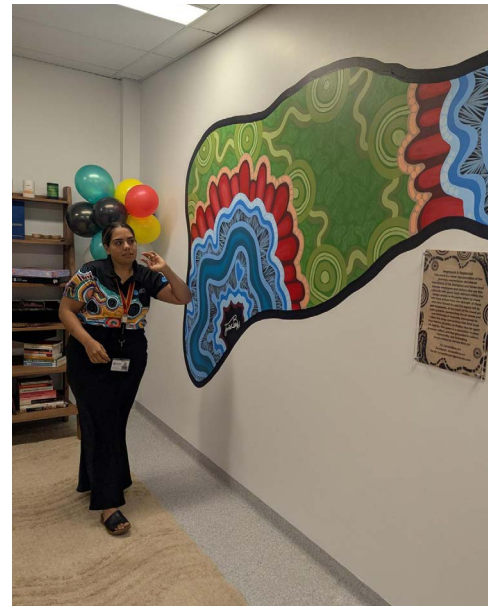
Monger). The experience, created by Noongar theatre-maker Ian Wilkes with artist and filmmaker Poppy van Oorde-Grainger, includes a site-specific performance and a virtual reality work.

On Tuesday, 8 July 2025, following months of planning by Aboriginal staff at AHCWA, the organisation's new AHCWA Cultural Space—Boorloo Room was launched during NAIDOC week. This space is for reflection, learning, and sharing and has been used for Work Unit and community meetings. It was important for the room to feature an acknowledgement to Country, and significant Health Heroes: Aunty Maxine Armstrong (a previous AHCWA Director), Aunty Gloria Khan (a previous AHCWA Director), and our PRIDOC Patrons Dr Dan Hunt, Dr Kim Isaacs, and Dr Corey Dalton.

A mural was created for the space by AHCWA employee, Jarnda Councillor-Barns. It represents the journeys, connections, and shared experiences of the Aboriginal employees and visitors who use this culturally safe space.

To mark the event, AHCWA Aboriginal staff gave Thomas Mayo's *Always Was Always Will Be*, a book investigating what's next for reconciliation and justice in Australia, to their non-Aboriginal colleagues along with a pin of their choosing featuring the Aboriginal and Torres Strait Islander flags.

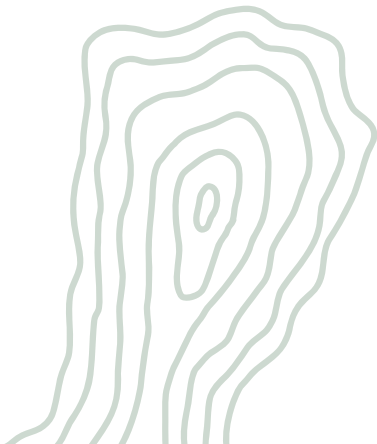
AHCWA engaged the services of Yalkarang Consulting to facilitate two language sessions and two sessions with an Elder. These sessions introduce Noongar language and culture, helping staff build confidence in using Noongar words and phrases in the workplace.



Pictured - Healing from The Voice Referendum: Smoking Ceremony with Uncle Nick Abriham, Jarnda Councillor-Barns mural in the new AHCWA Cultral Space, Noongar Language Sessions with Yalkarang Consulting, Cultural Immersion experience at Wajemup (Rottneest Island), Engage an Elder Sessions with Aunty Tina Hayward, Reconciliation Week Watch Party and AHCWA staff at a team building day in Boorloo

Health and Wellbeing

Support and Strengthen



Public Health

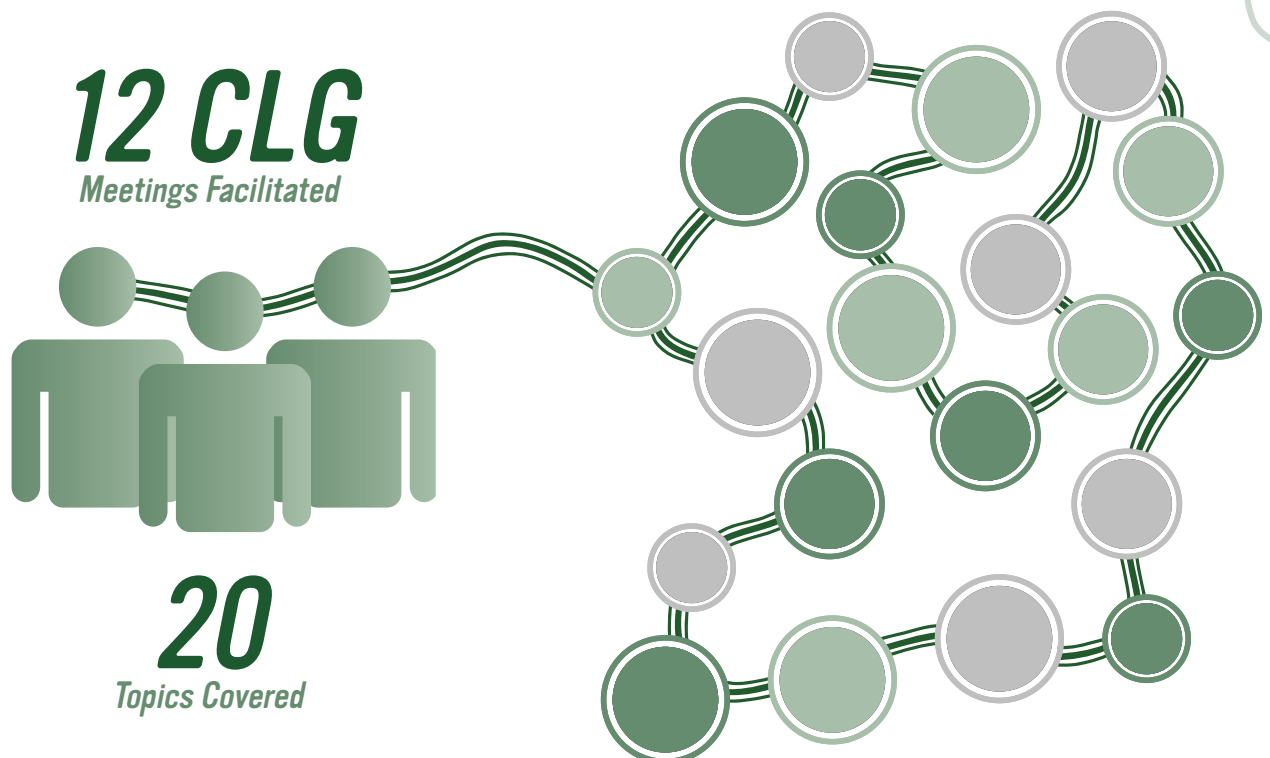
The Public Health Work Unit remains committed to supporting and strengthening our Member Services to deliver high-quality, culturally safe, and community-driven health care. During the 2024–2025 year, the Work Unit provided tailored support to Member Services to integrate continuous quality improvement (CQI) processes and evidence-based approaches across their operations. This included the development and dissemination of CQI tools, templates, and a range of resources.

To support continuous improvement and evidence-based practice in clinical service delivery, the Work Unit—in partnership with the PHMO—facilitated 12 Clinical Leadership Group meetings throughout the year. These forums provide a vital platform for clinical leaders across the ACCHS Sector to collaborate, share expertise, and

discuss emerging priorities. Over the course of the year, the meetings covered over 20 key topics, including:

- Prison health Issues
- National Lung Cancer Screening Program and Alternative Bowel Screening Pathway, including Communicare workflow
- MBS and 715 assessments and MyMedicare
- NDIS access
- Diabetes Connect program
- Using MHR in clinical workflow and uploading syphilis results to MHR
- Hep B treatment services in NG Lands
- Central Referral System issues.
- HIV case management
- Palliative care
- Cyber security
- Childhood immunisation

These sessions contributed to the dissemination of best practice and the strengthening of clinical leadership across our Member Services.



Climate Health

Climate change continues to pose a significant and growing threat to the health and wellbeing of Aboriginal communities across WA. The lack of culturally safe resources and responses underscores the urgent need for Aboriginal-led and Aboriginal-focused climate adaptation and mitigation strategies.

In 2024–25, AHCWA developed a Climate Health Position Statement, which can be found on the AHCWA website. This was an outcome of the partnership project established between WA ACCHS and funded by the WA DoH to emphasise the critical need for responses that are culturally appropriate and community-driven. To align with Priority Reform 2 of the National Agreement on Closing the Gap—which calls for strengthening the ACCHS—AHCWA advocates for the WA Government to recognise climate health as a priority. This includes sustained investment in Aboriginal-led climate health initiatives and services.

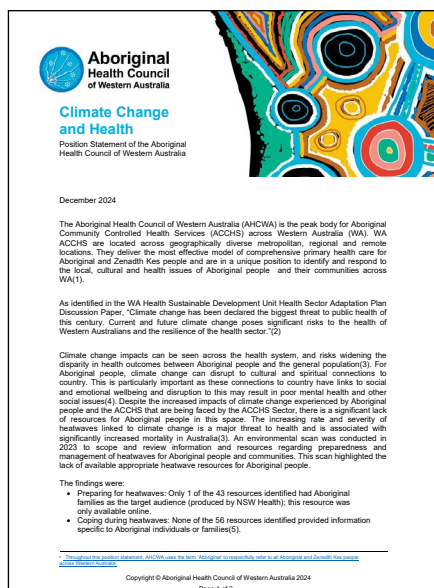


Figure 2: AHCWA Climate Change and Health Statment 2025

Immunisation

AHCWA has continued to provide targeted support to strengthen immunisation efforts across the ACCHS Sector, focusing on culturally safe resources, workforce development, and quality improvement.

Key Highlights for 2024–2025:

1. Respiratory Syncytial Virus (RSV)

Promotional Resources

AHCWA's Public Health and Communications and Design Work Unit developed and distributed culturally tailored RSV promotional resources to raise awareness and improve community understanding of RSV risks and prevention. These materials supported frontline health workers in delivering consistent and accessible messaging to families and caregivers as well as increased knowledge around eligibility.

2. Measles Outbreak Response Resources

In response to localised measles outbreaks, the Public Health Work Unit worked closely with Member Services and public health authorities to provide timely, accurate, and culturally appropriate resources to support outbreak communication and containment efforts.

3. Influenza Outbreak Response Resources

The Work Unit delivered a Sector-wide influenza campaign aimed at increasing uptake among Aboriginal populations. The campaign included:

- culturally safe education materials
- localised promotion through Member Services
- integration of CQI activities to monitor and evaluate vaccination delivery and identify areas for improvement in immunisation practices such as recall and reminder.

These initiatives not only contributed to increased community engagement and vaccine uptake but also supported Member Services in maintaining strong clinical governance and best practice in immunisation delivery.



Get vaccinated against measles

The measles vaccine is the best way to protect yourself and your family from measles, and stop measles in its tracks. The vaccine is free for:

- kids—at 12 and 18 months old
- adults—born after 1965 who haven't had two measles vaccinations

If you were born after 1965—ask the clinic if you need a measles vaccine.

STOP MEASLES

Aboriginal Health Council of Western Australia
450 Beaufort Street, Highgate WA 6003
Ph: (08) 9227 1631 | Fax: (08) 9228 1099
www.ahcwa.org.au | AHCWA | ahcwa_hq

RSV Immunisation with Beyfortus in Babies and Young Children

What parents and carers need to know

Respiratory Syncytial Virus (RSV) is a common cold sick virus that mostly affects babies and young kids, but can infect people of any age.

AHCWA

Aboriginal babies are at higher risk of becoming very sick with RSV, with one in 20 babies needing hospitalisation for RSV in their first six months of life.

What is the Beyfortus immunisation?

An immunisation (needle) called Beyfortus is available to protect babies from RSV. The needle gives babies antibodies to fight off RSV, and protects them for at least five months (about the length of the RSV season).

Pictured: AHCWA Immunisation resources - influenza, respiratory syncytial virus (RSV) and measles.

This certificate is presented to

Aboriginal Health Council of Western Australia
450 Beaufort Street, Highgate WA 6003
Ph: (08) 9227 1631 | Fax: (08) 9228 1099
www.ahcwa.org.au | AHCWA | ahcwa_hq

RSV vaccination with Abrysvo in pregnancy

What parents and carers need to know

What is RSV?

RSV (short for Respiratory Syncytial Virus) is a common cold sick virus that mostly affects babies and young kids, but can infect people of any age. Most babies catch RSV in their first year of life and it is the most common reason for kids under five years to need to stay in hospital. Aboriginal babies are at higher risk of becoming very sick with RSV, with one in 20 babies needing hospitalisation for RSV in their first six months of life. Babies who get RSV can be at more risk of getting asthma, wheezing, and allergies as they grow up. RSV infections usually occur in the colder months, similar to the flu. In the northern parts of Western Australia it can occur all year.

What is the Abrysvo RSV vaccine?

Abrysvo is a vaccine (needle) that can be given to pregnant women to help protect their babies from RSV. When a pregnant mum gets Abrysvo, her body makes protective antibodies that pass to the baby through the placenta. This gives her baby protection from birth to six months old.

Optimising MBS Billing

During the 2024–2025 year, the Public Health Work Unit continued to support Member Services in strengthening their financial sustainability through the Optimising Medicare Benefits Schedule (MBS) Billing initiative. This work is critical in ensuring the long-term viability of ACCHS and enhancing the delivery of comprehensive, culturally safe care.

Key Achievements included:

- The delivery of tailored training sessions and workshops to enhance understanding and utilisation of MBS items across clinical, administrative, and management teams. These sessions focused on high-impact billing areas, compliance, and efficiency.
- Development and distribution of practical tools, billing guides, and workflow templates to support consistent and compliant MBS billing practices within Member Services.
- Integrated CQI principles into MBS billing processes, enabling services to regularly review billing performance, identify gaps, and implement data-driven improvements.
- Provision of one-on-one support and advisory services to help ACCHSs align their clinical and administrative operations with best-practice billing strategies—increasing revenue while maintaining culturally safe service delivery.
- Continued to advocate at state and national levels for policies and reforms that support sustainable and equitable MBS access for Aboriginal health services.

Building Workforce Capacity

In 2024–2025 AHCWA delivered targeted training workshops to build the knowledge, skills, and confidence of the Aboriginal health practitioner (AHP) workforce across WA. These workshops focused on priority areas identified by our Member Services and communities:

- **Immunisation Training**
Provided up-to-date, culturally appropriate training on vaccine schedules, administration, cold chain management, and client communication to support safe and effective immunisation delivery by AHPs.
- **Ear Health Workshops**
Delivered training focused on the prevention, early detection, and management of ear disease—particularly otitis media—which continues to disproportionately affect Aboriginal children. Workshops included the use of ear health tools and community education strategies.

During the reporting period,
six participants from
five Member Services
received Ear Health Training
over seven sessions.
28 participants attended
audiology facilitated training
in the Kimberley.

- **Eye Health Training**
Strengthened the skills of AHPs in conducting basic eye health assessments, identifying early signs of vision problems, and facilitating timely referrals. Training supported integration of eye health checks into routine primary care services, as well as the use of retinol cameras.

These capacity-building initiatives contributed to improved access to essential services in communities and supported the delivery of holistic, culturally safe care by the AHP workforce and others involved in clinical service delivery.



Pictured: 2024 Ear Health Workshop attendees.



Pictured: AHCWA's Creative Media Officer Ashley Spratt presents at AHCWA's 2024 Ear Health Forum



Pictured: AHCWA Senior Public Health Program Officers Liam Guy and Jessica Carnuck facilitate Eye Health Training to Member Services



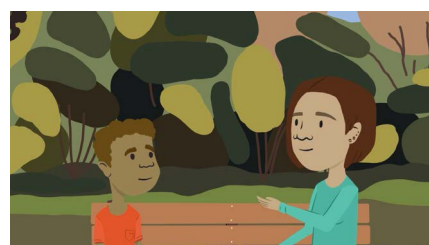
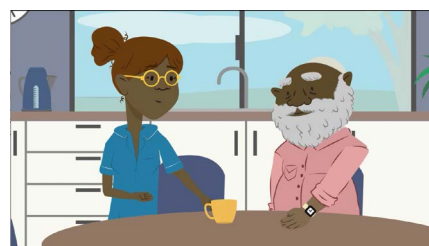
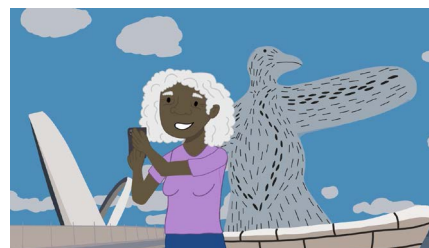
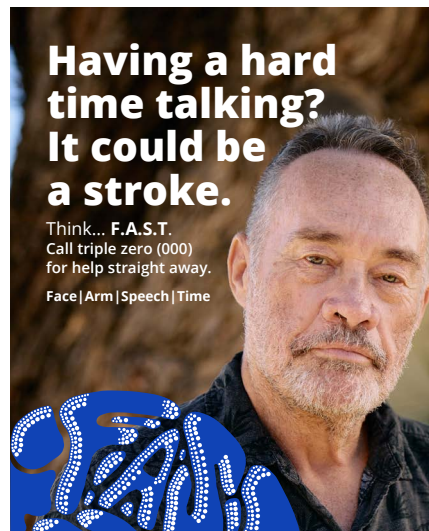
Pictured: AHCWA's Eye Health Training team visit Ord Valley Health Service in 2024.

Aboriginal F.A.S.T Stroke Campaign

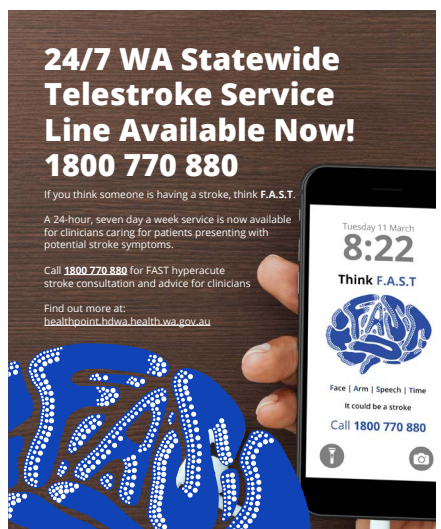
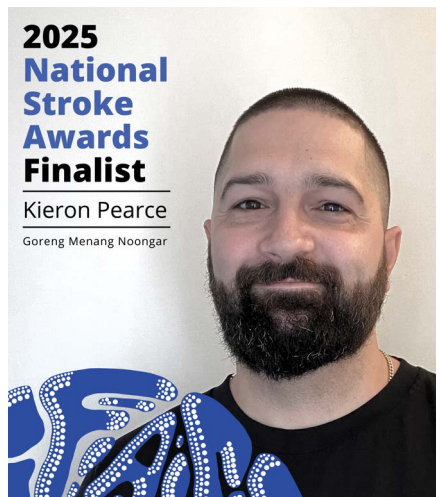
A key achievement in 2024–2025 was the successful development of the Aboriginal F.A.S.T. Stroke Campaign, fully aligned with our Strategic Plan's commitment to improving Aboriginal health outcomes through culturally safe, community-led health promotion. This campaign was funded by the DoH with a focus on co-design with ACCHS to empower Aboriginal people to recognise the signs and symptoms of a stroke quickly and access appropriate treatment promptly. It also sought to raise awareness of the 24/7 WA Statewide Telestroke service that supports ACCHS in enabling timely diagnosis and expert treatment in regional and remote locations.

This campaign supports AHCWA strategic priorities by:

- Enhancing community awareness and early intervention.
- Addressing the strategic goal of reducing preventable illness, by increasing knowledge of stroke symptoms within Aboriginal communities, fostering early recognition and urgent action.
- Strengthening partnerships and community engagement.
- Consistent with our priority to build strong, respectful relationships, the campaign was co-designed in partnership with Member Services, Elders, and local leaders, ensuring messaging was culturally appropriate and community-owned.
- Building workforce and Sector capacity.
- By equipping health workers with increased awareness of the WA Statewide Telestroke Service - the campaign contributed to workforce development, a key enabler in our strategic framework.



Aboriginal F.A.S.T. Stroke Campaign resources, and AHCWA graphic designer Kieron Pearce's subsequent nomination for the National Stroke Awards for the campaign.



Remember.
Any of these symptoms could be a stroke.

- | | |
|---------------|---|
| Face | Does it feel like your face is dropping? |
| Arms | Hard to raise your arms? |
| Speech | Having a hard time talking? |
| Time | Is critical. If you see any of these signs call for help straight away. |

Elder Care Support (ECS)

Throughout the 2024–2025 year, AHCWA focused on building the capacity of the ECS workforce to deliver culturally safe, effective Elder care support across WA. Recognising the unique health and social needs of Aboriginal Elders, targeted training and support opportunities were developed and delivered to enhance skills and knowledge in community controlled aged care.

These initiatives helped strengthen workforce confidence and competence, enabling Member Services to better meet the growing demand for Elder care within Aboriginal communities. A total of nine Elder Care Support workshops were delivered through yarning circles, training sessions, and community of practice participation across two regions, with 240 participants engaged in building their Elder care capabilities.

These represent key events coordinated by AHCWA to bring health professionals together in a culturally safe environment to share and learn. By investing in Elder care workforce development, AHCWA supports the delivery of culturally safe, community-led aged care services that respect and uphold the dignity of Aboriginal Elders.

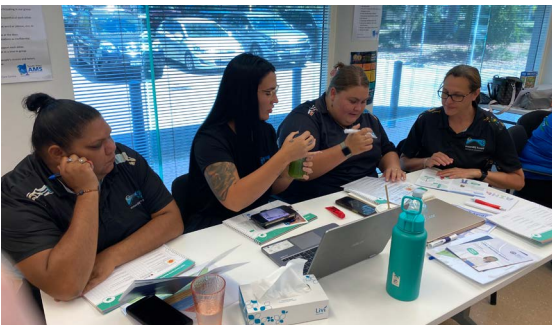
Key components of the Elder Care Support capacity-building initiative included:

- Culturally appropriate training: Providing workforce development that respects and incorporates Aboriginal cultural values, traditions, and approaches to Elder care.
- Holistic support approaches: Emphasising a holistic view of Elder wellbeing that integrates physical, emotional, spiritual, and cultural health on Country.
- Community engagement: Equipping the ECS workforce with strategies to engage Elders and their families and a better understanding of the aged care system.
- Collaboration and referral: Strengthening skills to navigate and coordinate with broader health, aged care, and social services to ensure Elders receive timely and appropriate support.

Elder Care Support Workshops



Building Stronger Communities Through Care and Connection



Pictured: Elder Care Support State Yarning Circle and Elder Care Support Training, with AHCWA's Helene Casey, Senior Public Health Program Officer, Joyal Shaju, Workforce Coordinator and Lily De Vries, Workforce and Training Officer (aged Care).

Ambulance Services Trial for Aboriginal people in WA

In May 2022, the Legislative Council Standing Committee on Public Administration published their final report in WA ambulance services, *Delivery of Ambulance Services in Western Australia: Critical Condition*. AHCWA, and several of our Member Services, had previously made submissions to the Parliamentary Inquiry and the report made several recommendations to improve access to emergency ambulance services for Aboriginal people in WA. AHCWA went on to facilitate a co-design workshop between the ACCHS Sector and State health entities in July 2024 to help drive action on these recommendations, including to reduce financial barriers to accessing ambulance services.

Following this, in December 2024, the WA Government advised AHCWA of a six-month trial aimed at improving access to ambulance services for Aboriginal people by lowering the age of eligibility for ambulance services concessions for Aboriginal patients to 50 years, and covering the costs St John Ambulance legs of medical transports from ACCHS in WA. AHCWA worked closely with WA Health to develop appropriate communication tools to share the scope of, and eligibility for, the trial with ACCHS and Aboriginal community members including posters, social media tiles and digital flyers.

AHCWA's Public Health Medical Officer worked closely with WA Health on the implementation of the trial, and with ongoing advocacy, the trial was extended to 18 months (to 30 June 2026) to allow for appropriate evaluation. AHCWA continues to be actively involved in the evaluation process helping to link feedback from Aboriginal communities on the trial and its implementation back to WA Health.

AHCWA hopes to see these changes made permanent, and will continue to advocate for other recommendations in the parliamentary inquiry's report to be implemented—including for WA Health to identify gaps in ambulance services, particularly in remote Aboriginal communities, and develop strategies to enhance access to ambulance services in these communities.





Emergency Ambulance Services Trial for Aboriginal and/or Torres Strait Islander People in WA

SWIPE TO LEARN MORE ➤

From 1 January 2025 until 30 June 2026*, emergency ambulance services provided by St John WA will be more accessible for Aboriginal and/or Torres Strait Islander people.

This lower cost applies to emergency ambulance services in both country and metropolitan areas. In country areas (outside of metropolitan Perth), this lower cost also applies to non-emergency ambulance services provided by St John WA.



*After this time, the government will need to determine if these changes should continue.

Ambulance Services Trial: Information for Aboriginal Controlled Community Health Services (ACCHS)

WHY

This trial is happening because people have raised concerns about the cost of emergency ambulance services for Aboriginal and/or Torres Strait Islander people, which sometimes means they are less likely to call for the help they need when sick.

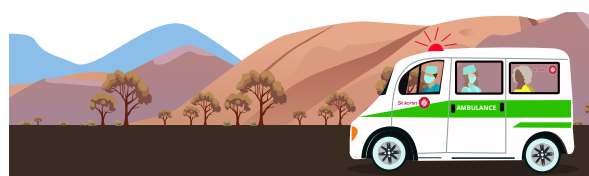
WHO

This trial is for all Aboriginal and/or Torres Strait Islander people in Western Australia (WA), including those living in Perth and in regional and remote areas.

WHAT

This trial has two main parts that are being tried out from **1 January 2025 to 30 June 2026**:

- Lowering the age for cheaper emergency ambulance services:** Aboriginal and/or Torres Strait Islander people aged 50 years and over can now get emergency ambulance services at a lower cost.
- Free ambulance transport from ACCHS clinics to hospital when medically needed:** when ACCHS call an ambulance or the Royal Flying Doctor Service (RFDS) to arrange for someone to go to hospital because it is medically needed, the cost will be covered.



Pictured: AHCWA's Ambulance Trial for Aboriginal People in WA promotional resources.

NEWS FLASH

From 1 January 2025 until 30 June 2026*, emergency ambulance services provided by St John WA will be more accessible for Aboriginal and/or Torres Strait Islander people.

Are you Aboriginal and/or Torres Strait Islander, aged 50 or older, in need of emergency ambulance services?
If yes, then read on!

Do you have a Pension Concession Card?

YES
For those who are 50 years or older and have a Pension Concession Card, the cost of the ambulance for emergency calls will be **fully covered**.

NO
For those who are 50 years or older and do not have a Pension Concession Card, there will be a **50% discount** on the cost of the ambulance for emergency calls.

But how do I access this concession?

IN THE AMBULANCE
Make sure you tell your ambulance officer that you are Aboriginal and/or Torres Strait Islander and give them your pension number if you have one.

AFTER THE SERVICE
You can call St John WA when you receive the bill on (08) 9334 1212, or email billing@stjohnwa.com.au to let them know and have your bill fixed.

IMPORTANT: This lower cost applies to emergency ambulance services in both country and metropolitan areas. In country areas (outside of metropolitan Perth), this lower cost also applies to non-emergency ambulance services provided by St John WA.

*After this time, the government will need to determine if these changes should continue.

Should these ambulance service concessions continue?
Scan the QR code and tell us what you think.

Sexual Health and Blood Borne Viruses

AHCWA's Sexual Health and Blood Borne Virus (BBV) Work Unit provide ongoing support to our Member Services through capacity building and health promotion activities to increase sexual health and wellbeing awareness, and highlight the importance of testing for sexually transmitted infections (STIs) and BBVs. Funded by NACCHO and the WA DoH, the program offers sector support, youth peer education, and interagency collaboration, and features mixed mode deliveries education and training sessions including The Birds and BBVs, the Young Leaders Program, and weekly online 'Bites' workshops delivered in partnership with key stakeholders.

During the reporting period, the Birds and BBVs workshops, delivered in collaboration with Hepatitis WA and WAAC, built workforce capacity by upskilling 70 participants across six locations. These sessions empowered a multidisciplinary group of Aboriginal and non-Aboriginal health staff to promote STI and BBV awareness and reduce associated stigma, directly supporting strategic objectives to

enhance service quality and continuous professional development. The Bites sessions provided an accessible online platform for staff working in Aboriginal sexual and reproductive health to share resources, updates, and clinical knowledge. With 100 per cent of participants reporting increased knowledge, the sessions represent an innovative solution that enhances access to timely, relevant education across the Sector.

The Youth Peer Education Program supports young Aboriginal people to build knowledge and confidence in sexual health and leadership. In April–May 2025, AHCWA delivered the Young Leaders Program at Melville Senior High School, engaging 26 students across four sessions. The program had 100 per cent attendance and showed increased confidence and understanding of consent and healthy relationships. These efforts, supported by strong social media outreach, reflect Strategic Pillars –4 and contribute to improved sexual health outcomes for Aboriginal communities across WA. A planned shift to a train-the-trainer model in

2026 aligns with Strategic Pillar 4, ensuring sustainability.

Young Leaders Program



*Engaging 26 students
across 4 sessions*

**100% attendance and showed
increased confidence and
understanding of consent and
healthy relationships**

Birds and BBVs upskilled

70
participants across
6 locations

100%

**of Bites participants reported
increased knowledge**



In a creative and youth-focused collaboration, AHCWA partnered with the Youth Affairs Council of WA (YACWA) Youth Educating Peers (YEP) team and WAAC to launch a condom wallet and meme design competition on social media. This initiative was launched to engage young people in conversations around safe sex and BBV prevention through culturally relevant and accessible mediums. Public voting determined six final condom wallet designs and three meme winners. Printing was completed in June 2025, and the materials have since been distributed to the wider community, further supporting youth engagement and peer-led health promotion.

AHCWA's co-facilitation with DOH of the Sexual Health Teams Workshop 2025 further strengthened the Sector by improving connectedness between services and providing networking and knowledge-sharing opportunities to 56 participants from six regions. These initiatives reflect AHCWA's commitment to supporting Member Services via training and capacity building, influencing policy and priorities through partnerships and Sector leadership, and growing Sector sustainability by developing resilient, connected workforces and innovative education delivery models.

In June 2025, members of AHCWA's SHBBV Work Unit attended the 2nd Asia Pacific Conference on Point of Care Testing for Infectious Diseases in Bangkok. The event enhanced Sector knowledge on current Point of Care Testing (POCT) innovations and their application in community settings. AHCWA's update on syphilis POCT in WA was well-received, highlighting the value of frontline insights. The conference also offered valuable networking opportunities, supporting future collaborations and continuous improvement across the Sector.

Collectively, these activities contribute to better sexual health outcomes and reflect AHCWA's ongoing dedication to leading Aboriginal health in WA.



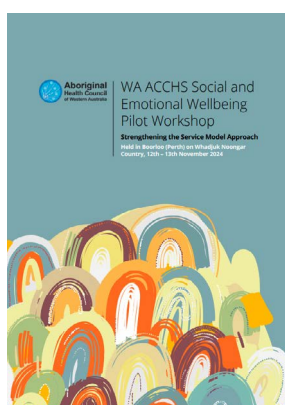
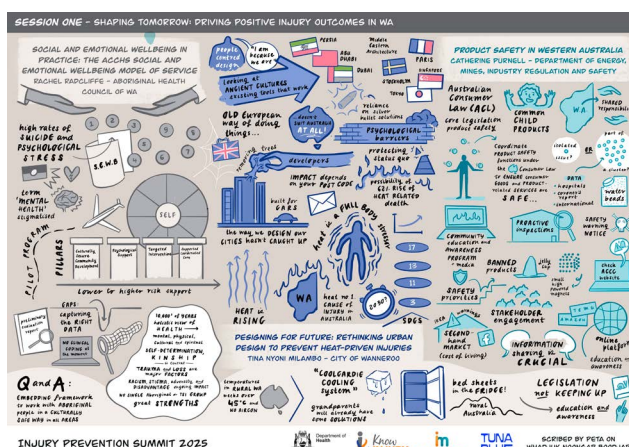
Pictured: AHCWA Birds and the BBVs Training across regional and metropolitan locations, and Executive Manager Health and Wellbeing Kim Gates and Sexual Health and BBV Program Coordinator Liberty Bowles attend the 2nd Asia Pacific Conference on Point of Care Testing for Infectious Diseases in Bangkok.

Social and Emotional Wellbeing Pilot Program

Throughout the reporting period, the ACCHS Social and Emotional Wellbeing (SEWB) Service Model has remained committed to providing a flexible, holistic, and culturally safe approach, supporting individuals, families, and communities to access services without judgement. AHCWA's SEWB Work Unit have continued to strengthen systems and processes and explore opportunities to enhance services within their regions through the four-pillar approach, resulting in significant uptake across Member Services.

In November 2024, the AHCWA SEWB and Transforming Indigenous Mental Health and Wellbeing (TIMHWB) Team hosted a SEWB Pilot Workshop bringing together staff from six regions. The gathering created valuable space for collaboration, reflection, and knowledge sharing. Staff worked through shared challenges, identified practical solutions, and highlighted the importance of collective learning, with outcomes guiding ongoing program development.

As the newest initiative of the pilot, the SEWB Capacity Building Program has made significant progress this year. Designed to strengthen the skills, knowledge, confidence, and capability of workers, organisations, and communities, the program supports improved social and emotional wellbeing for Aboriginal people. Funded by MHC, AHCWA welcomed the inaugural SEWB capacity building program officer (50D) in June 2025. Work has since focused on coordinating training, resources, and other supports for SEWB workers across Member Services. By building a strong and well-equipped SEWB sector, communities are empowered to deliver early intervention, targeted mental health support, social services, and programs addressing family and domestic violence and suicide prevention—promoting long-term wellbeing.



Pictured: The 2024 SEWB and TIMHWB Pilot Workshop, Lowitja Conference, the First Nations Leadership Summit, attending the Waminda Conference, AHCWA's presentation at the Injury Prevention Summit 2025, and the AHCWA SEWB, FDSV and CCC Teams.

Culture Care Connect Program

The NACCHO funded Culture Care Connect (CCC) program integrates suicide prevention and aftercare across regional networks.

This coordinated, Aboriginal-led approach reduces self-harm, suicidal ideation, and suicide while addressing community-identified priorities.

A key achievement has been delivering 14 Aboriginal Mental Health First Aid Training courses across 11 locations, from metropolitan areas to the Warakurna Community, strengthening the capacity of both the CCC workforce and local communities to respond to mental health concerns. NACCHO has secured CCC funding through 30 June 2026, with ongoing advocacy for program sustainability remaining a priority. Efforts include expanding capacity with more Indigenous Applied Suicide Intervention Skills Training (I-ASIST) trainers and a national evaluation by Inside Policy, ensuring continued support for community wellbeing and the program's long-term impact.



Family, Domestic and Sexual Violence Pilot Program

The Family, Domestic and Sexual Violence (FDSV) Pilot Program operates alongside SEWB services across multiple ACCHS, including at Derbarl Yerrigan Health Service (DYHS), South West Aboriginal Medical Service (SWAMS), Puntukurnu Aboriginal Medical Service (PAMS), Broome Regional Aboriginal Medical Service (BRAMS), Ngangganawili Aboriginal Health Service (NAHS), and Yura Yungi Aboriginal Medical Service (YYMS).

Delivering culturally safe responses to the needs of Aboriginal individuals and families affected by violence, the program strengthens SEWB through holistic care, early intervention, and healing approaches. By embedding the FDSV programs within ACCHS, the initiative contributes to safer families, stronger communities, and improved long-term health and wellbeing outcomes. From December 2022 to March 2025, the pilot delivered a range of services, supporting clients and families, providing referrals, and engaging communities in awareness and prevention activities.



The Culture, Care, Connect program delivered:

14

Aboriginal
Mental Health
First Aid Training
courses across

11 locations



From December 2022 until March 2025, the FDV Pilot Program has delivered:

Period End	Total
Total number of encounters provided.	10,955
Total number of clients/families supported by the ACCHS through the pilot.	3,589
Number of formal and informal (e.g. self/family) referrals of clients.	2,415
Total number of referrals to external services by the ACCHS.	1,014
Name/type of external services engaged in wrap around services for clients/families.	349
Total number of encounters by the ACCHS with perpetrators or people using violence.	272
Number of formal and informal (e.g. self/family) referrals of perpetrators or people using violence.	173
Number of and type of community activities related to raising awareness of FDSV and/or the related services.	173
Total number of perpetrators or people using violence accessing the pilot services.	119
Number of group workshops/sessions with perpetrators or people using violence.	60

Corporate Services

Grow and Advance

Enhance and Promote

Workforce and Sector Development

A Workforce Strategy Implementation Plan and subsequent activity workplan were developed to track the delivery of key strategic objectives. Engagement activities over the period addressed priority areas instrumental to workforce development and capacity building of the WA ACCHS Sector.

A key output was the completion of the 'Work in the ACCHS Sector' video, which was, and continues to be, instrumental to the International GP recruitment campaign.

In promoting a vibrant and positive ACCHS Sector, and growing the workplace pipeline, targeted approaches to facilitate student placements saw a total of seven social work students from the University of Western Australia complete their placements with WA ACCHS in the Kimberley and Perth metropolitan areas.



Pictured: AHCWA Public Health Medical Officer Dr Caitlyn White addresses the 2025 WA ACCHS GP Workforce Workshop in Walyalup (Fremantle), graphic recordings from the workshop, and workshop attendees.

Corporate Services Forum

In October 2024, AHCWA hosted the WA ACCHS Corporate Services Forum at Fraser's Restaurant, Kaarta Koomba (Kings Park). The two-day forum, attended by representatives from across the state, provided a platform for governance, compliance, and operational excellence.

Highlights included:

- Governance training delivered by NACCHO's Sector Governance Program, tailored to ACCHS needs.
- Employment law updates from Kingston Reid on the Closing Loopholes Acts, superannuation obligations for contractors, and the Right to Disconnect provisions.
- Workers Compensation reforms outlining new requirements under the 2023 WA legislation.
- Sector-specific compliance sessions on Working with Children Checks, Medicare claiming practices, and disability workforce challenges.
- Emerging topics such as AI in health service delivery and Sector-specific palliative care opportunities.

- The forum reaffirmed the value of collective knowledge-sharing and Sector collaboration, strengthening Member Services' ability to navigate evolving regulatory and workforce challenges.

GP Workforce Development

On 30 June 2025, AHCWA delivered our first WA ACCHS GP Workforce Workshop. The workshop brought together GP and ACCHS leaders, and Sector stakeholders to address systemic recruitment and retention challenges.

Key issues identified included:

- Remoteness and isolation factors impacting GP attraction and retention.
- The need for competitive remuneration and incentives to remain competitive with hospitals and urgent care centres.
- Limited capacity for supervision of GP Registrars and International Medical Graduates (IMGs).
- Ensuring cultural safety across the workforce pipeline.

Solutions explored included flexible contractual arrangements, enhanced clinical orientation resources, innovative supervision models,

and expansion of GP promotional campaigns. These discussions will inform the development of a WA ACCHS GP Workforce Action Plan and a follow-up workshop in 2026.

To strengthen the future GP workforce, AHCWA has extended its activities, engaging directly with medical students and junior doctors at key events, and where staff contributing to teaching and mentoring.

This included engagement at events such as:

- Postgraduate Medical Council of WA Medical Careers Expo
- Curtin Rural Outreach Health Club Rural Careers Night and Indigenous Health Event
- St John of God Midland Hospital Junior Medical Officer Teaching
- McCusker Centre for Citizenship's Student Advisory Committee Panel "Beyond the City: Navigating Healthcare in Rural and Remote Australia" at UWA
- Australian Medical Students Association Rural Health Summit
- Indigenous Health Workshop
- University of Notre Dame Teaching and Examinations



International GP Recruitment

On 24 August 2024, AHCWA, on behalf of and together with representatives from several Member Services, participated in the Auckland Healthcare Job Fair to promote employment opportunities within the WA ACCHS Sector. The Healthdaq® Healthcare Job Fair is New Zealand's premier recruitment event for medical, nursing, and allied health professionals. AHCWA's presence received prominent attention, featuring on New Zealand's Channel 1 News broadcast and in accompanying newspaper coverage. Across the day, the team engaged with 1,072 job seekers, the majority being nursing professionals. Discussions focused on cultural safety and alignment with the unique demands of delivering primary health care in regional and remote Aboriginal communities.

In November 2024, AHCWA attended The Doctors Job Fairs in Dublin and London for the first time, representing the WA ACCHS Sector alongside Member Services. Engagement was strong, with over 400 doctors attending across both fairs and 44 in-depth candidate discussions.

Of these, 28 candidates were identified as highly promising, either already holding or close to completing MRCGP or MICGP qualifications. Follow-up processes have led to early success, with two GPs recruited into the WA ACCHS Sector and one into WA more broadly.

This recruitment milestone demonstrates the Sector's capacity to compete internationally for skilled professionals, while also positioning AHCWA as a trusted representative for ACCHS opportunities abroad.

AOD Certification Project

Partnering with the Western Australian Network of Alcohol and other Drug Agencies (WANADA), the Alcohol and Other Drug (AOD) Certification Ready Project's main objective was to support and enable ACCHS and ACCOs in progression towards certification against the Alcohol and Other Drug and Human Services Standard (AODHSS); therefore increasing their capability to apply for AOD treatment funding, and ultimately enhancing their capacity to respond to the AOD concerns for local Aboriginal people, families, and communities.

The ACCHS Sector has long delivered services which embody a holistic approach, and this approach is well-suited to AOD service provision due to the patient-centred focus on harm minimisation not only from drugs, but all other social and economic harms among individuals, families, and communities.

A key activity enabling progression towards AOD Certification was participation in the Management Systems Auditing and Lead Auditor Training courses run by Gray Management Systems. In total 28 trainees complete these two courses, inclusive of Member Service and key partner staff. This achieved the secondary objective of the project, increasing the lead auditor workforce in the Aboriginal community-controlled sector. Outside the scope of the project, three of these trainees have chosen to progress and complete the Diploma of Quality Auditing.

Development of AOD profiles for each region, providing an AOD snapshot including services, statistics, and resources relevant to Aboriginal clients and for ACCO/ACCHS professionals, to help with scoping, and enabling of identification of AOD service referral options, and AOD service gaps in local and regional areas.

A map and gap analysis between the AODHSS and RACGP was undertaken, using a traffic light system to represent the level of compatibility of criteria and evidencing requirements across the two standards. An interactive tool was developed, including instructions on its use. The tool has been used by services, providing a starting point for evidencing against the AODHSS

28

*Completed AOD Lead
Auditor training*

Indigenous Health Workforce Traineeship Program

Ongoing funding was secured through to June 2027, enabling AHCWA to lead tailored traineeship campaigns over the next two years.

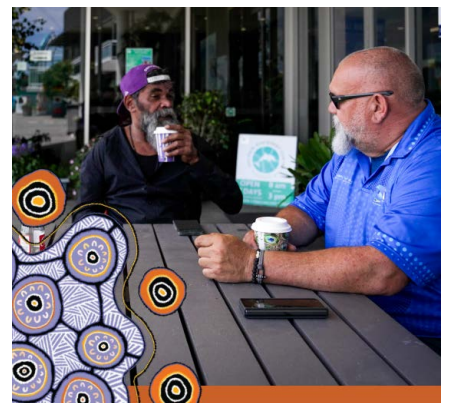
AHCWA led a range of advocacy efforts with the DoH to meet the unique needs of WA; these included expanding the scope of approved IHWT qualifications and trainee and Member Services' needs. AHCWA also led engagement efforts with RTOs to offer flexible delivery and individualised tutoring supports, alongside regular check-in with trainees and mentors. The period saw seven trainees based in Broome, Kununurra and Perth metro regions graduate from the Certificate IV in Mental Health at Marr Moorditj Training and KAMS RTO. The IHWT program currently supports two trainees undertaking the Certificate III in Health Administration and one Diploma of Nursing trainee while maintaining ongoing discussions with Member Services and Community to promote traineeship uptake.

Home Care Workforce Program

AHCWA remains committed to delivering the outcomes under the concluded Home Care Workforce program. The reporting period saw AHCWA engage MMM 6 and 7 Member Services delivering aged care services to identify in-demand training for existing staff and community members to meet the increasing demand for a local care workforce. These consultations informed and guided the updated training proposal AHCWA developed, incorporating key trainings such as Food Safety and Handling, Basic Life Support, and Trauma-Informed Care In Practice. Successful endorsement of the proposal will see seven training sessions across three Member ACCHS, with a capacity of 70 participants having access to upskilling opportunities. The trainees will be equipped with skills and knowledge to provide essential services to older Aboriginal people and their communities.

NDIS Business Solutions Program

While the program formally concluded in June 2024, the final two projects were delivered later in the year. These showcased the service delivery areas of Moorditj Koort Aboriginal Corporation and South West Aboriginal Medical Service. Two organisational journey videos and brochures were released on AHCWA and Member Services' social media to raise community awareness. The work highlighted the holistic model of care that underpins ACCHS delivery of comprehensive care and support services in their communities.



Pictured Indigenous Health Workforce Traineeship Program graduates and MKAC and SWAMS NDIS program participants.

The 2025 WA Aboriginal Community Controlled Health Sector Conference

Since 2008, the AHCWA has hosted the WA Aboriginal Community Controlled Health Sector Conference. The 2025 Conference was held on Wednesday, 2 and Thursday, 3 July 2025 at the Esplanade Hotel in Walyalup (Fremantle). The WA Aboriginal Youth Conference was held on Monday 30 June 2025, and the AHCWA Members Forum on Tuesday 1 July 2025.

The theme for the 2025 Conference was *Nurturing a Strong Tomorrow Through Culture, Care, and Community*, and featured a range of topics spanning health, cultural, political, and community success stories demonstrating strength and innovation across the Sector.

More than 50 speakers presented across the four-day program on a range of important topics related to Aboriginal health and wellbeing.

The 2025 WA ACCHS Conference Artwork

The 2025 WA ACCHS artwork was created by graphic designer and artist Kieron Pearce. Kieron is a Goreng Menang Noongar man from Kinjarling (Albany). His work was inspired by this year's theme, *Nurturing a Strong Tomorrow Through Culture, Care, and Community*.

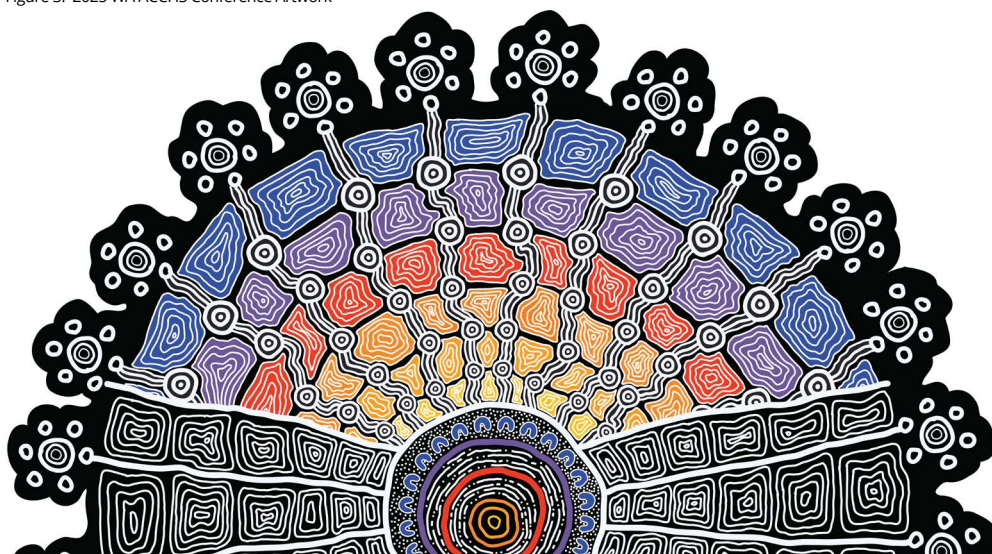
The 2025 WA ACCHS Conference Keynotes

This year's WA ACCHS keynotes featured speakers across disciplines, from Uncle Mick Gooda, Australia's former Aboriginal and Torres Strait Islander Social Justice Commissioner; to Wise Group's Director of Health Equity, Hine Martin. Addresses also included WA Minister for Health and Mental Health, the Hon. Meredith Hammat MLA, WA Minister for Aboriginal Affairs, the Hon. Don Punch, and Australian rules football midfielder Tim Kelly. In their respective keynote addresses, NACCHO Chief Executive Pat Turner AM and AHCWA Chair Vicki O'Donnell OAM raised concerns about the lack of investment in Priority Reform implementation, noting a disappointing disparity between the commitments to Closing the Gap by the WA Government in their recent State Budget with what was handed down in New South Wales and Victoria.

Delegates and Partners

More than 230 delegates attended the WA ACCHS Conference, with an additional 105 participating as non-delegates including exhibitor passes, AHCWA staff and Conference speakers. There were 113 representatives from 22 of the 23 AHCWA Member Services in attendance at the Members Forum. The 2025 WA Aboriginal Youth Conference featured 29 youth

Figure 3: 2025 WA ACCHS Conference Artwork



delegates, including seven from regional and remote areas who were able to attend the Conference through financial support provided by Lotterywest.

The achievements and outstanding performance of those working in the Sector were acknowledged in front of 167 guests at the Awards Dinner, with 39 Award winners nominated by 17 Member Services over three categories. In addition, the Gloria Khan Team Impact Award and the Maxine Armstrong Leaders Awards acknowledged the contribution of two AHCWA employees.

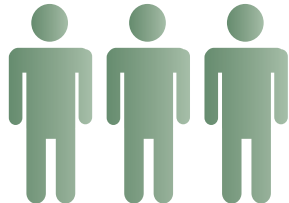
A total of 41 organisations partnered with AHCWA to support this year's Conferences. Participation consisted of 11 major sponsors, 13 Youth Exhibitors and 32 Exhibitors for the WA ACCHS. Excluding NACCHO core funding and Lotterywest youth bursary support, these partnerships generated over \$140k ex GST in direct revenue for AHCWA. The Conference continues to strengthen collaboration across the Sector, showcasing achievements while shaping culturally secure, community-driven approaches to Aboriginal health.



Pictured and Overleaf: Presenters and delegates at the 2025 WA Aboriginal Community Controlled Health Sector Conference.



237
Delegates



105
*Non-Delegates
(exhibitor passes,
staff, speakers)*



41
Conference Partners



113
*Representatives
from 22 AHCWA
Member Services*





The 2025 WA Aboriginal Community Controlled Youth Conference

“This has been such an inspirational and educational experience for me as a young Aboriginal man. I hope that, like many of you here, I can one day contribute a meaningful impact to Aboriginal health across the Country”.

Lotterywest Youth Conference Delegate

This year's 2025 WA Aboriginal Youth Conference was held alongside the WA ACCHS Conference on Monday 30 June in Walyalup (Fremantle). The event hosted 30 Aboriginal youth from across WA and featured a series of Aboriginal youth related workshops and presentations. To make this year's Conference possible, AHCWA received funding from the National Indigenous Australian Agency (NIAA); and a Lotterywest grant supporting youth participants based in regional and remote communities to attend. Funding assisted in ensuring the Conference was truly inclusive and accessible event to Aboriginal youth across the state, with attendees representing a range of Aboriginal communities, and giving them a voice and access to the entire Conference program and to connect with like-minded young people.

The AHCWA Youth Conference is a platform facilitating direct engagement between the ACCHS Sector and Aboriginal young people from across the state, and a valuable avenue for everyone to understand and address the needs of WA Aboriginal youth. This year's Conference was facilitated by Gooniyandi and Gajerrong man Scott Wilson, and opened with a Welcome to Country by Uncle Nick Abraham from Warrang-Bridil. The AHCWA Youth Committee Chairperson, Vincent Carter, delivered the welcome address, and a reflection on this year's theme: *Nurturing a Strong Tomorrow Through Culture, Care and Community*.

Keynote Speaker Soleil White, Community Health Manager and Senior Chronic Disease Aboriginal Health Practitioner at BRAMS, shared her journey in First Nations health and the source of her passion for healthcare. NACCHO Chair Donnella Mills presented on the ways our sector can support young and emerging

leaders, highlighting the work that must be done by current leaders to support the next generation. Jahdai Vigona, Co-Founder and Director of the One Percent Program, shared the story behind the program, a grassroots, Aboriginal-led movement drawing on strength-based approaches, brotherhood, and cultural identity to empower young people and create long-term impact. Uncle Mick Gooda, the Former Aboriginal and Torres Strait Islander Social Justice Commissioner, facilitated a workshop and presentation on the concept of Lateral Violence and its impact on young Aboriginal and Torres Strait Islander people. To close out the day, Scott Wilson, Blake Innes and, Chris Wood from Indigiverse facilitated a live illustration workshop with the group to create their very own Indigiverse health superhero. This character designed by the delegates will be used by AHCWA Youth in promotional campaigns to help spark conversations with young mob around health, relationships, identity, and everything in between.

During his presentation to the 2024 WA ACCHS, AHCWA Youth Committee Chair Vincent Carter called on all CEOs and Chairpersons to make real change—to ensure every ACCHS or organisation not only establishes its own Youth Committee, but also amends its constitution to include a mandatory board position for a young person aged 18–30. This isn't just about representation—it's about embedding youth leadership at the decision-making table.

2025 WA ACCHS Youth Conference Recommendations

1. Ensure every AMS and organisation establishes its own Youth Committee, and amends their constitutions to include a mandatory board position for a young person aged 18–30.

2. Create a Youth Health Hub—a central place to provide universal access to culturally safe resources, programs, and support for young people across WA.
3. Commit to formal mentorship and cultural supervision by our Elders and community leaders.
4. Create an inter-agency youth exchange program—giving young people the chance to grow their skills, cultural knowledge, and leadership experience by working across organisations and regions.

As a group, the youth delegates discussed how lateral violence shows up in their communities, organisations, and governance structures and how it undermines their ability to feel safe, supported, and heard. Most importantly, they talked about how as young leaders, they can be the generation to break that cycle.

The youth delegates worked closely with Uncle Mick over the two days proceeding the Youth Conference on a statement on lateral violence, which they presented at the WA ACCHS Conference. Conference delegates called for all attendees to commit and uphold the lateral violence statement presented by the youth delegates. A copy of the statement was placed on the Youth Conference banner for delegates to sign throughout the afternoon. The AHCWA Youth Committee will be working on a youth focus for the Sector lateral violence campaign and promoting the statement further with an online campaign.

AHCWA would like to thank NIAA and Lotterywest for their support in making the Conference possible and enabling young Aboriginal people from regional and remote locations across WA to attend the event.



Pictured: Presenters and delegates at the 2025 WA Aboriginal Community Controlled Health Sector Youth Conference.

Communications and Design

Expansion of the Communications and Design Work Unit during the year enabled development of communications that are practical, accessible, culturally appropriate, timely, clear and trustworthy.

Prominent among works completed for AHCWA and our Member Services during the year were:

Multi-platform Campaigns

Encompassing posters, social media tiles, merchandise, video, and animation elements:

- F.A.S.T Stroke campaign
- 2025 WA RSV Infant and Maternal Immunisation Program campaign
- Ambulance Services Trial communications
- The AHCWA Youth Justice Position Statement
- Measles campaign
- Pertussis campaign
- Rotavirus campaign
- Ear Health campaign
- HPV campaign
- Ngalla Bidi Bursary campaign

Major Publications

- The COVID-19 Review report
- F.A.S.T Stroke campaign and report
- An extensive update and overhaul of the AHCWA Style Guide
- Environmental Health Model of Care Report
- Cert II in Community Health and Wellbeing artwork and resources.
- Simon Says Volume 7: Environmental Health
- Social and Emotional Wellbeing Service Model
- AHCWA's Pre Budget-Submission
- Medicare Benefits Scheme quick guides
- Influenza Vaccination Program campaign report
- 715 Adult Health Check poster
- 2025 Aboriginal Community Controlled Health Sector Conference
 - sponsorship prospectus
 - collateral
 - merchandise

Artworks

- 2025 WA Aboriginal Community Controlled Health Sector Conference artwork, Kalyokool (Forever) created by Goreng Minang Noongar Kieron Pearce
- Environmental Health Model of Care artwork by Noongar Yued artist Ashley Spratt
- Aboriginal F.A.S.T Stroke Campaign artwork by Goreng Minang Noongar Kieron Pearce
- COVID Report Artwork by Noongar Yued artist Ashley Spratt

Videography and Animation

- Simon Says: Let's Talk About Hearing Loss animation
- The AHCWA Youth Justice Position Statement
- Promotional videos for AHCWA's Social and Emotional Wellbeing and Ear Health Outreach programs.
- The Ngalla Bidi Bursary campaign film.

Digital and Social Media

During the reporting period, 21 organisational ebulletins were developed, published and distributed to Member Services and key stakeholders. Bi-monthly ebulletins were aligned with the Noongar seasons, and regular monthly SEWB, CC and FDSV ebulletins and a new format Public Health communique were distributed. A total of 43 news features were researched, written and published to AHCWA's website and across our social networks to promote organisational programs.

Creative, engaging and culturally relevant Aboriginal health promotion material and purpose-designed artworks were created to mark significant historic Aboriginal events and events aligned with AHCWA programs, and were distributed daily across AHCWA's Facebook, LinkedIn, and Instagram platforms.

Media

A number of media releases, responses and interviews were delivered during the reporting period on behalf of the organisation to advocate for AHCWA's position on public issues.

Features were achieved in the *National Indigenous Times*, *The West Australian*, on the *ABC*, on *RTRFM*, and in *Croakey Health Media* on the following topics:

- the COVID-19 Response Review
- AHCWA's culturally specific measles resources
- the Remote Food Subsidy Scheme
- the First Nations Aged Care Report
- Western Australian Skills and Workforce Development Action Plan
- the new Ngalla Bidi Bursary Fund
- AHCWA's response to the State Government's liquor restrictions

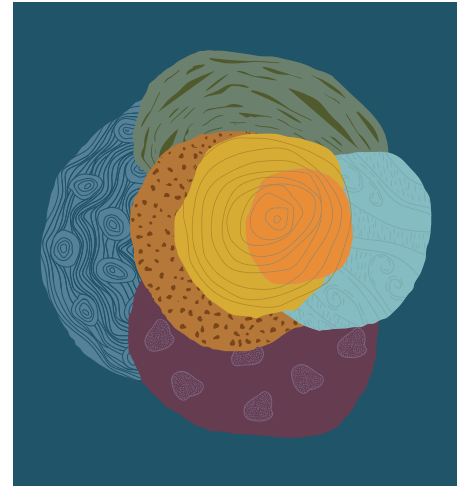
Save the Date: Elder Care Support WA State Yarning Circle 2025



Date Wednesday 4th June – Thursday 5th June 2025
Venue Mandoon Estate, 10 Harris Road Caversham WA

Registration details to follow.

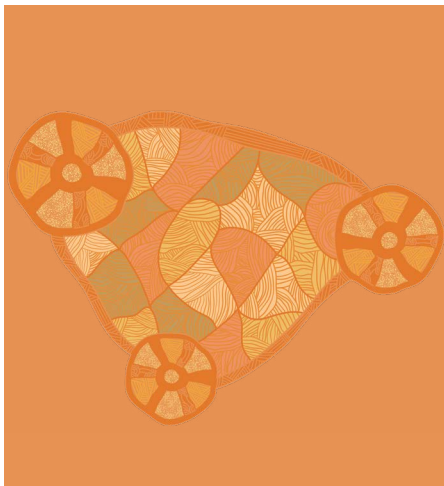
This Yarning Circle is for the Elder Care Support West Australian workforce. If you have any questions, contact the Workforce team at the Aboriginal Health Council of Western Australia: joyal.shaju@ahcwa.org or helene.casey@ahcwa.org



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Aboriginal Health Council of Western Australia | Ear Health Simon Says

Environmental Health
Caring for ears, caring for mob.



AHCWA Digital Platforms Analytics - June 2024 to July 2025



Facebook

Reach: 119,485
Increase of 308.2%

Content interactions: 5,035
Increase of 82.4%

Visits: 15,495
Increase of 32.4%

Follows: 417
Increase of 27.5%

Link clicks increase of 349.7%



Instagram

Reach: 5,239
Increase of 153.6%

Content interactions: 882
Increase of 100%

Visits: 1,722
Increase of 57.7%

New follows: 100

Link clicks increase of 700%



LinkedIn

Impressions: 110,943

Reactions: 2,641

Comments: 121

Reposts: 69

Page views: 2,411

Unique visitors: 1,039

New followers: 881



Website

Sessions: 60,287
Increase of 129%

Pageviews: 121,107
Increase of 141%

New users: 35,784
Increase of 132%

ebulletins: 21

News features: 43

People and Culture

AHCWA's People and Culture Work Unit continued to advance strategic workforce planning across the organisation and Sector through tailored human resource management, workforce development, and capacity-building initiatives.

Our focus remained on addressing the unique workforce challenges faced by the ACCHS Sector, with an emphasis on building sustainable and culturally safe workforce solutions.

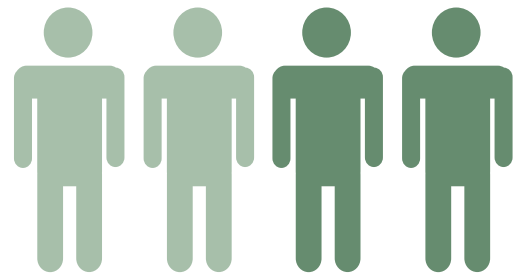
Throughout 2024–2025, AHCWA:

- Delivered over 80 tailored workforce support activities across recruitment and selection, job design, performance management, workforce planning, compliance, industrial relations, work health and safety, remuneration, award interpretation, contracts, and payroll.
- Disseminated key workforce planning tools and resources to strengthen Member Services' organisational capacity, including frameworks for job design, succession planning, and performance development.
- Provided targeted advice and representation to Member Services on legislative reforms, employment matters, and policy development, ensuring compliance with the *Fair Work Act 2009 (Cth)*, the *Workers Compensation and Injury Management Act 2023 (WA)*, and the *Work Health and Safety Act 2020 (WA)*.

With a focus on building and maintaining a learning culture, growing talent from within, and promoting career development opportunities. 356 e-learning activities were completed, and 65 episodes of training and development undertaken by AHCWA staff.

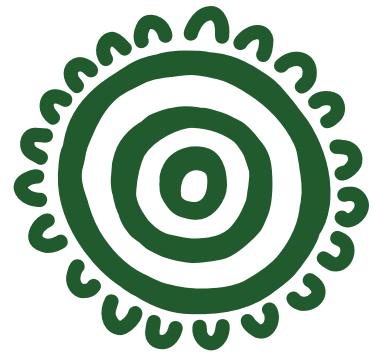
50%

of the executives identify as Aboriginal and/or Torres Strait Islander



17%

of all staff identify as Aboriginal and/or Torres Strait Islander



Pictured: WA ACCHS GP Workforce Workshop 2025 participants.

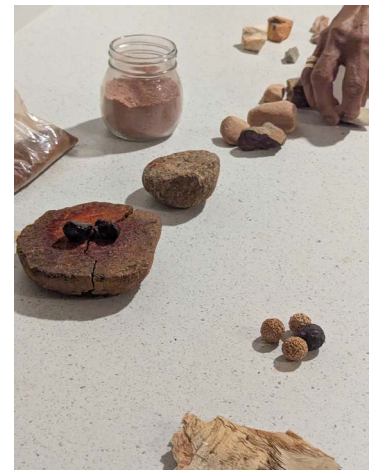


Pictured - VR experience of Galup, AHCWA Cultral Space, Cultural Immersion experience at Wajemup (Rotttnest Island), AHCWA staff at a team building day in Boorloo.

Progress against the Aboriginal Workforce Engagement and Development Strategy 2023–2027

AHCWA continued to make meaningful progress against the objectives of the Aboriginal Workforce Engagement and Development Strategy. Under Focus Area 1: Aboriginal Workforce and Employment Opportunities, AHCWA successfully hosted an Aboriginal student through Fremantle Group Training in a school-based traineeship, enabling the student to undertake vital work-based training to contribute towards a Certificate II in Workplace Skills. This initiative reflects our commitment to creating real and accessible pathways into the workforce for young Aboriginal people.

We also achieved significant outcomes under Focus Area 3: Building and Sustaining a Culturally Safe Workplace. Aboriginal culture has been actively embedded into our organisational practices and team-building activities, including participation in The Great Kimberley Wilderness VR Documentary at WA Museum Boola Bardip, exploring the Spinifex People: Art and Stories from Pila Nguru exhibition, and undertaking a Cultural Immersion activity on Wadjemup (Rottnest Island). These experiences have provided opportunities for staff to deepen cultural awareness, foster respectful engagement, and strengthen AHCWA's identity as a culturally safe employer of choice.



Pictured: Cultural immersion activity on Wadjemup (Rottnest Island), Galup VR experience, Engage an Elder with Auty Tina Hayward and AHCWA staff Yarn with Deidre Blackhouse.

Quality and Compliance

AHCWA successfully maintained its ISO 9001:2015 Certification. A surveillance audit conducted in May 2025 confirmed this with no non-conformances identified. Nine observations and recommendations for improvement were identified, providing the opportunity for continuous improvement and alignment with best practice.

AHCWA continued to meet all legislative and contractual compliance obligations.

Stats	2023/24	2024/25
Documents reviewed and approved	335	435
Internal Audits completed	29	29
ISO External Audit	1	-
All External Audits	4	3
Feedback	Compliments 52 Complaints 3	Compliments 47 Complaints 1
Incidents (Hazards and near misses)	9	12
Suggested Improvements	54	32



Information, Communication and Technology

During the reporting period, AHCWA's ICT department continued to play a pivotal role in driving operational efficiency, enhancing digital capabilities, and supporting strategic objectives across the organisation. Through targeted investments in infrastructure, cybersecurity, and digital transformation initiatives, we strengthened our technological foundation and improved service delivery.



Summary Financial Report



Grow and Advance



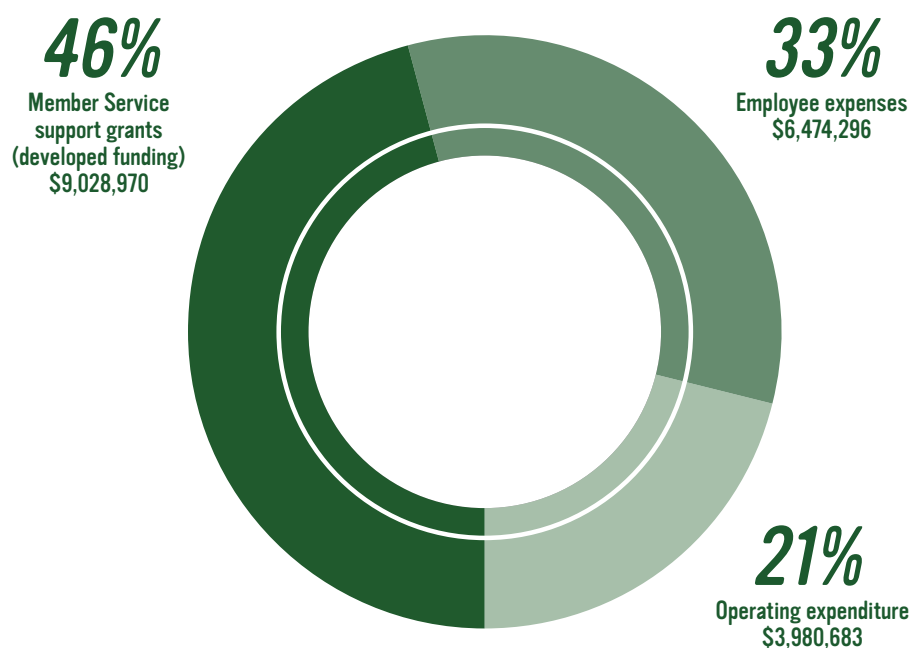
Support and Strengthen

AHCWA recorded a surplus of \$852,439 for the 2024–25 financial year, in comparison to a surplus of \$888,667 for the 2023–24 financial year.

	2025	2024	2023	2022
Income	\$20,336,388	\$19,040,500	\$22,108,573	\$15,447,051
Expenditure	\$19,483,949	\$18,151,833	\$20,161,903	\$13,848,764
Surplus	\$852,439	\$888,667	\$1,946,670	\$1,598,287

97 per cent of AHCWA's income is generated through grant and program funding.

Expenditure



During the 2024–25 period, funds directed to Member Services increased by 30 per cent (\$9,028,970 2024–25, \$6,946,698 2023–24 period).

Total Assets \$21,826,570

Total Liabilities \$7,387,938

Total Equity \$14,438,632

AHCWA continues to exercise judicious management over all funds. Auditors Grant Thornton provided an unqualified audit report for the financial year. A copy of the AHCWA's Audited Financial Report, including the independent Audit Report, is available to all members on the Organisation's website www.ahcwa.org.au and via Australian Charities and Not for profit Commission website.



**Aboriginal
Health Council**
of Western Australia

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