NAATSIHWP

National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners

NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH WORKERS AND PRACTITIONERS ANNUAL REPORT 2023-24

Abbreviations

ANZCO	Australian and New Zealand Standard Classification of Occupations
Aphra	Australian Health Practitioner Regulation Agency
ATSICCHO	Aboriginal and Torres Strait Islander Community Controlled Health Organisations
ATSIHPBA	Aboriginal and Torres Strait Islander Health Practice Board of Australia
BRAMS	Broome Regional Aboriginal Medical Service
CATSINaM	Congress of Aboriginal and Torres Strait Islander Nurses and Midwives
CPD	Continuing Professional Development
MPN	Medicare Provider Number
NAATSIHWP	National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners
NAIDOC	National Aborigines and Islanders Day Observance Committee
NHLF	National Health Leadership Forum
NPAWS	Northern Peninsula Area Family & Community Services Aboriginal and Torres Strait Islander Corporation
PSM	Public Service Medal
P4JH	Partnership for Justice in Health
VET	Vocational Education and Training

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Disclaimer: Aboriginal and Torres Strait Islander persons are advised that this report may contain images of deceased persons.

Welcome

The National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners (NAATSIHWP) acknowledges Traditional Custodians across Australia. We value your knowledge, wisdom, communities, cultures and ongoing connections to the land's waterways and seas. In particular, we pay tribute to the Ngunnawal and Ngambri peoples on whose lands the NAATSIHWP office is situated. We are privileged to conduct our business on the lands you have occupied and cared for over thousands of years.

To those past and present Elders whose Countries we have visited this year, thank you for your generosity and protection, and for welcoming us onto your lands.

To past and present leaders in the Aboriginal and Torres Strait Islander health sector who guide and influence our path, thank you for constantly inspiring us to become a strong, credible and viable national association that is widely recognised for its cultural and professional integrity, and dedication to our people and communities.

Lastly, to all our past, present and future leaders, we are committed to a more truthful, just and equitable future – we hope you see us demonstrating this in the work we are undertaking. We will continue to be guided by you and support your aspirations to promote more positive pathways for future generations.

Our Artwork

The original NAATSIHWP artwork was designed by Ngarrindjeri artist, Jordan Lovegrove from South Australia. It represents working together for healing. The red meeting places and paths in between represent the community, and the little dots represent healing. The white meeting places represent the different health organisations and workers reaching out to the community.

A strong, credible and viable national association that is widely recognised for its cultural and professional integrity, and commitment to supporting and gaining recognition for both current and future generations of Aboriginal and Torres Strait Islander Health Workers and Health Practitioners.

What we do

The National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners (NAATSIHWP) is the peak workforce organisation with responsibility for ensuring Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners, the only culturally-based health workforce underpinned by national training and registration in the world, are embedded as a vital, valued and professional part of Australia's healthcare system.

We play a key role in the delivery of Aboriginal and Torres Strait Islander health, education and employment outcomes; support a large and growing national network of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners; and work in partnership with other Aboriginal and Torres Strait Islander Community Controlled Organisations, governments and a broad range of stakeholders to:

> address the under-representation of Aboriginal and Torres Strait Islander people employed within Australia's healthcare system

> expand and strengthen the professional capability of the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner professions across all health service types (Aboriginal community control, government and private practice)

> promote the delivery of culturally-safe and effective evidence-based models of care and

> effect the self-determined development of Aboriginal and Torres Strait Islander peoples and the transformation of policy and practice at the national level.

Our Values

Our values are consistent with those passed down from our Ancestors:

> cultural integrity

> cultural respect

> the importance of connection to community

> strong leadership

> resilience and determination

> honesty and transparency

> dedication and passion

> commitment to quality workforce and service delivery

> diplomacy and sensitivity.

Our logo

The NAATSIHWP logo was designed by one of our founding members, Patrick Jagamarra Ah Kit.

It represents Aboriginal and Torres Strait Islander people coming from all parts of the country to form the Association and uses colours that reinforce our cultural identity – who we are. The U shape represents all Aboriginal and Torres Strait Islander peoples of our country. The small boomerangs represent our people's toughness and resilience to handle all situations. The bigger boomerangs are windbreaks and shields that provide safety, stability, education, guidance, and vision towards the future.

About the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner Workforce

Aboriginal and/or Torres Strait Islander Health Workers and Aboriginal and/or Torres Strait Islander Health Practitioners are two distinct but related professions that together comprise the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce.

With no mainstream equivalents, the professions play a unique and critical role in ensuring Australia's healthcare system meets the needs of Aboriginal and Torres Strait Islander people. Evidence directly connects the workforce to improved health outcomes across the life course. They restore trust, act as health system navigators, deliver culturally-safe care, play a role in early intervention and prevention, improve access to healthcare services and the client experience.

The workforce was established **by** Aboriginal and Torres Strait Islander people **for** Aboriginal and Torres Strait Islander people in response to the need for geographically accessible and culturally-safe healthcare. Unofficial accounts and narratives indicate the workforce started to emerge close to a century ago, and since this time it has continued to grow and progress under the guidance, knowledge and leadership of Aboriginal and Torres Strait Islander people every step of the way.

Today, with the Aboriginal and Torres Strait Islander Health Practice Board of Australia (ATSIHPBA) guiding professional standards under the Australian Health Practitioner Regulation Agency (Ahpra), as well as a national qualification framework tailored to the health needs of a growing Aboriginal and Torres Strait Islander population, the workforce provides perhaps one of the most significant demonstrations of how inherent self-determination is to the health and wellbeing of Aboriginal and Torres Strait Islander people.

Aboriginal and/or Torres Strait Islander Health Workers and Aboriginal and/or Torres Strait Islander Health Practitioners receive practical, comprehensive primary healthcare training through the vocational education and training (VET) system. Importantly, this is designed to provide Aboriginal and Torres Strait Islander people with vital and alternative entrance level pathways for careers in the health sector. Across the healthcare system there are many examples of Aboriginal and Torres Strait Islanders who have started careers in this workforce and successfully transitioned to nursing, allied health, general practitioners, researchers, practice managers and health system administrators.

Who they are

Of the two professions, Aboriginal and/or Torres Strait Islander Health Practitioners are trained to perform high-level clinical skills and work autonomously. They are required to meet practice standards and register with ATSIHPBA. The registration of Health Practitioners is primarily designed to promote public safety, increase patient trust, promote professional development, and act as an accountability and oversight mechanism. Currently, there is no registration requirement for Aboriginal and/or Torres Strait Islander Health Workers.

NAATSIHWP defines an ***Aboriginal and/or Torres Strait Islander Health Worker*** as:

> an Aboriginal and/or Torres Strait Islander person who has gained a Certificate II or higher qualification in Aboriginal and/or Torres Strait Islander Primary Health Care under the National Aboriginal and Torres Strait Islander Health Worker training package, **or**

> an Aboriginal and/or Torres Strait Islander person who is currently or has previously worked in an Aboriginal and/or Torres Strait Islander Health Worker role and is able to satisfy evidentiary requirements required by the NAATSIHWP Board.

NAATSIHWP defines an ***Aboriginal and/or Torres Strait Islander Health Practitioner*** as:

> an Aboriginal and/or Torres Strait Islander person who has gained a Certificate IV in Aboriginal and/or Torres Strait Islander Primary Health Care Practice and has successfully applied for and been registered with ATSIHPBA through Ahpra.

To address the under-representation of Aboriginal and Torres Strait Islander people working in the healthcare system and ensure it meets the needs of Aboriginal and Torres Strait Islander people there is a genuine occupational requirement to ensure this workforce comprises only Aboriginal and/or Torres Strait Islander people.

From the Chair

As NAATSIHWP continues to grow as an organisation, I am proud to show that we remain focused on supporting our members and are making strides towards positive change in the Aboriginal and Torres Strait Islander health sector. We hold a unique role in ensuring that the professional needs and interests of the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce are met.

This workforce plays a critical role in delivering culturally-safe primary healthcare. Often working within their own communities in broad and diverse roles, these two professions are integral to keeping Aboriginal and Torres Strait Islander people healthy and well. As an Aboriginal health worker myself, like many of my fellow Board members, I understand the day-to-day realities of this work, the ups and downs, the challenges and the ever-giving rewards. Every day, the staff of NAATSIHWP strives to strengthen national recognition of our workforce and advocate for the needs of our members.

This year, we launched our inaugural Leadership Program, marking an important step in our commitment to growing the skills, capabilities, and support for those in management positions. This new initiative offers participants the opportunity to develop both hard skills, such as financial management, and soft skills, including professional self-care, stakeholder negotiation, and governance. We remain committed to exploring and expanding what NAATSIHWP can offer its members, always seeking new ways to empower and uplift our workforce.

We are also immensely proud of the success of the 2023 National Day of Recognition for Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners, which saw a tremendous uptake on social media and in workplaces across the country. It was heartening to see so many workplaces and organisations celebrating the vital contributions of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners. Leading up to and on the day, we shared snapshot stories from some of our workforce and community members to outline the incredible work of these professions. In this report, we are pleased to showcase the work, influence and aspirations of four of our members. We hope this report continues to elevate recognition of our workforce and highlight NAATSIHWP's ongoing dedication to supporting our members.

I would like to express my appreciation to our partner organisations, fellow Board members, and the dedicated NAATSIHWP staff for their continued support and commitment towards both increasing recognition of the professions and improving health and wellbeing outcomes for our communities.

We also extend a warm welcome to our newest Board members, Dawn Daly and Skyan Fernando, who will represent the Northern Territory and the Australian Capital Territory, respectively. They too have lived experience as workforce members, and we greatly value their contributions.

To our incredible Full Members – Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners – it cannot be acknowledged enough that it is you who are setting a benchmark for culturally-safe primary healthcare, providing a welcoming and trusting environment for our people. Alongside our members, we acknowledge and thank their colleagues, training centres, and managers who continuously uplift and promote the recognition of our workforce.

It is with great sadness that I acknowledge the recent loss of Aunty Thelma Weston, a former Board Director and an absolute trailblazer. We also mourn the sudden passing of casual Board member, Harold Koops. Both Aunty Thelma's legacy and Harold's contributions to improving the holistic wellbeing of Aboriginal and Torres Strait Islander peoples remain strong and endearing. We send our deepest respects to their loved ones, and we will continue to honour their memory as we continue our work.

Thank you all for your continued dedication and support.

David Follent
Chairperson
NAATSIHWP Board

From the CEO

Presenting this annual report is always a proud moment for our organisation, as it highlights the positive impact we continue to have on our members and Aboriginal and Torres Strait Islander peoples and communities more broadly. Our ongoing collaboration with government, research institutions and other organisations remains central to achieving better health outcomes and addressing the professional needs of our workforce.

Year after year, we look to our members for guidance on how best to support their professional growth and ensure that our work aligns with their needs and the communities they serve. The feedback we receive from our annual survey, as well as at all our events and programs, is crucial in focusing on the professional needs of our members, whose aspirations, decisions and cultural values form the foundation of all that we do.

We are particularly proud of the progress made this last financial year towards achieving key implementation strategies set out in the National Aboriginal and Torres Strait Islander Health Workforce Strategic Framework and Implementation Plan 2021–2031 (Workforce Plan 2021-2031).

We continue to uphold the responsibility given to NAATSIHWP in achieving greater national consistency for our workforce's professional scopes of practice, alongside the harmonisation of medicine authorities. As the national peak body, we are uniquely positioned to drive tangible change by ensuring that Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners have the policies, resourcing and professional support needed to succeed in their roles. The commencement of our national consultation process marks an exciting step towards making substantial progress in these areas. These efforts run alongside our ongoing work in each jurisdiction and underscores our commitment to working closely with policy makers and health authorities, but more importantly, dedication to effecting real, meaningful differences in the lives of our workforce and all Aboriginal and Torres Strait Islander peoples and communities.

We continue to advocate for a whole-of-government solutions to growing and embedding the vital roles of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners. The National Agreement on Closing the Gap demonstrates that both federal and state governments value change and understand the importance of self-determination and empowering Aboriginal and Torres Strait Islander organisations to lead the way in enacting the changes our communities need.

With the introduction of recent changes to the National Law which secures the right to culturally-safe healthcare at the highest strategic level, we remain focused on driving policy and program changes to ensure that our workplaces, education systems and health services are culturally safe – not just for NAATSIHWP members but for all Aboriginal and Torres Strait Islander peoples.

This report aims to elevate the voices of our workforce, recognising the strengths that come from their deep cultural connections and understanding of the communities they serve. The impact of our workforce extends far beyond direct healthcare; it influences education and training, financial sustainability, self-determination, active community participation, trust in the healthcare system, and the representation of our people in roles that strengthen connections to culture.

I would like to extend my deepest gratitude to our members and the wider workforce. You work tirelessly within your communities, not for recognition, but for the health and wellbeing of those you serve. Your dedication and commitment inspire us all, and we remain steadfast in our mission to support you in every way we can.

Thank you for your continued support and trust in NAATSIHWP.

Karl Briscoe
Chief Executive Officer
National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners

Become a member today!

Joining NAATSIHWP's national membership network helps to increase the profile of the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce and to progress the health and wellbeing aspirations of Aboriginal and Torres Strait Islander people.

Together we can improve the understanding of what Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners do and help to ensure this workforce is embedded as a vital, valued and professional component of Australia's healthcare system. Evidence directly connects their roles to better health outcomes across the life course.

All Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners – past and present – can become members, as well as any individuals currently studying an eligible Aboriginal and Torres Strait Islander Primary Health Care course. We also encourage professional bodies and/or non-Indigenous friends to help by becoming friends of NAATSIHWP.

Our Membership Categories

FULL

A person who:

> identifies as an Aboriginal and/or Torres Strait Islander person

> is qualified as an Aboriginal and/or Torres Strait Islander Health Worker or Health Practitioner

> has completed a minimum qualification of a Certificate II in Aboriginal and Torres Strait Islander Primary Health Care.

Full members have voting and speaking rights at the NAATSIHWP Annual General Meeting following six months of continuous membership, and access to the NAATSIHWP Members Portal which contains tools for Continuing Professional Development (CPD) records, training, advice, information and resources.

ASSOCIATE

Our associate members:

> identify as an Aboriginal and/or Torres Strait Islander person, and

> work in the health field but are not Aboriginal and/or Torres Strait Islander Health Workers or Health Practitioners.

CORPORATE FRIEND

A corporate friend member is:

> organisations who are able to support NAATSIHWP achieve its vision and purpose.

FULL *(without qualifications)*

We welcome you to join NAATSIHWP as a Full Member (without qualifications) if you:

> identify as an Aboriginal/or Torres Strait Islander person

> are currently or have previously worked in an Aboriginal Health Worker role

> can satisfy evidentiary requirements required by NAATSIHWP Board.

STUDENT

Our student members:

> identify as an Aboriginal and/or Torres Strait Islander person, and

> are currently undertaking study in an eligible Aboriginal and Torres Strait Islander Primary Health Care course (proof of enrolment is required).

FRIEND

A friend member is:

> an individual who is able to support NAATSIHWP in achieving its vision and purpose.

Become a member today!

Membership applications are approved by the NAATSIHWP Board. More information about becoming a member can be found at www.naatsihwp.org.au/membership

About this report

This annual report for 2023–24 highlights NAATSIHWP's unwavering commitment to supporting the growth and development of the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner professions. It details the accomplishments of our organisation, the pathway towards achieving the objectives of our Strategic Plan, and a model of working to support the self-determination of our workforce.

This is the first annual report aligned with the NAATSIHWP Strategic Plan 2023–2026, a direction shaped by the achievements of previous years and the evolving professional needs of our members. Our current strategic priorities focus on:

> Increasing recognition and use of the full range of skills and integration of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners across all health services, sectors and jurisdictions.

> Enhancing the accessibility and quality of professional support, leadership and workforce development opportunities for our members.

> Extending our leadership and advocacy across health policy, programs and practices relevant to our workforce.

> Influencing the development and implementation of effective recruitment, retention and career pathway strategies for our workforce.

This annual report presents just a snapshot of recent progress driven by NAATSIHWP. It indicates the significant strides made over the year towards achieving the objectives of the Strategic Plan, as well as the effective deployment of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners across the health system. While our strategic priorities remain focused on the development and growth of the workforce, the activities outlined in this report are indicative of our broader commitment to improving physical, social, cultural and emotional wellbeing for all Aboriginal and Torres Strait Islander peoples.

The Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce was established by our people, for our people. In recognition of our responsibility and commitment to ongoing and sustainable partnerships, we continue to align our initiatives to the Workforce Plan 2021-2031. We remain steadfast in our commitment to continuing our work in implementing its objectives alongside federal and state governments, mainstream and community-controlled organisations.

We wholeheartedly support the National Agreement on Closing the Gap, with consistent evidence showing that the Aboriginal and Torres Strait Islander health workforce and community-controlled organisations deliver the best services and outcomes for Aboriginal and Torres Strait Islander people. We emphasise the importance of aligning the work of all organisations – government, mainstream and community-controlled – with the priority reforms of this Agreement. Achieving these outcomes requires organisational and systemic transformation, ongoing collaboration, and trusting community-controlled organisations to lead the way.

We are proud to share this report as a testament to our ongoing dedication to our members, the value we place on our workforce, and our commitment to a future where our people thrive.

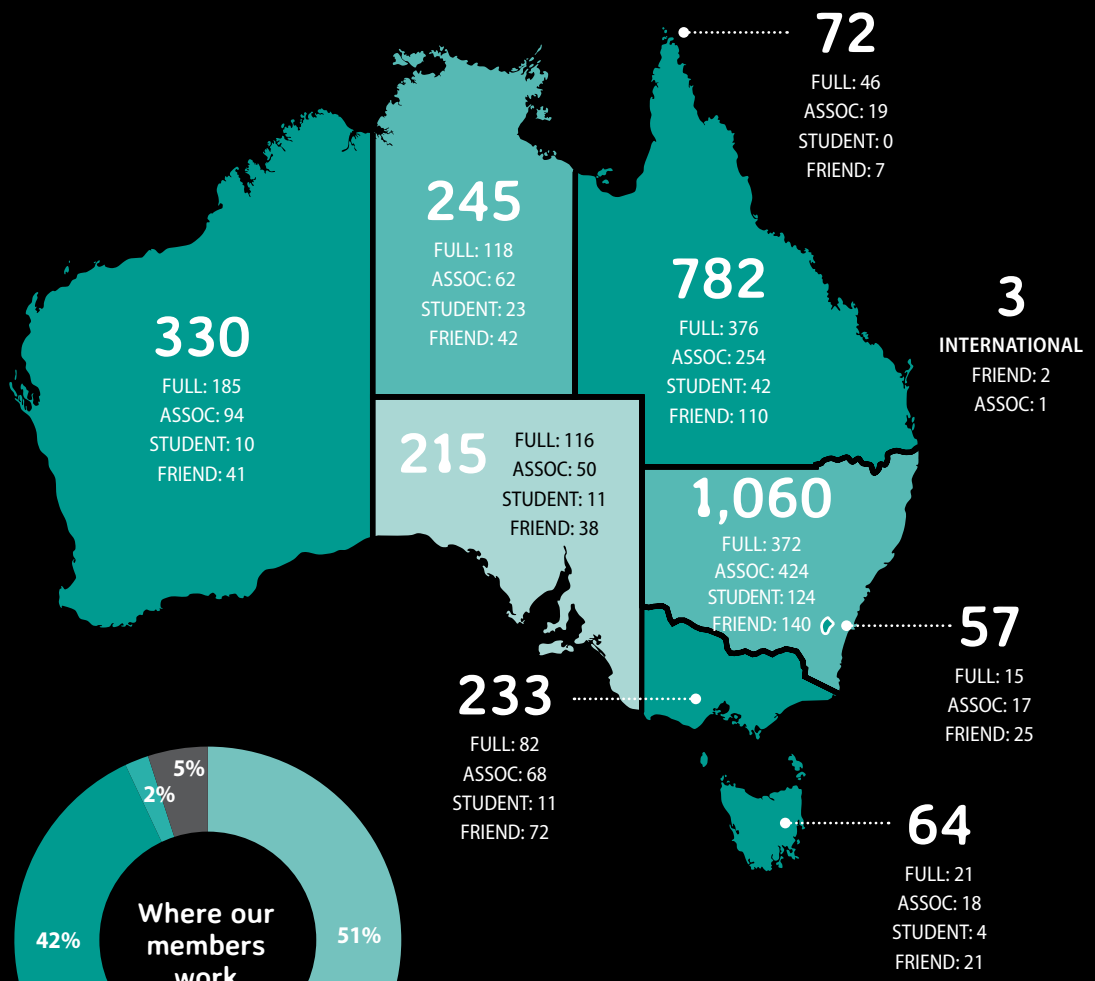
At a glance

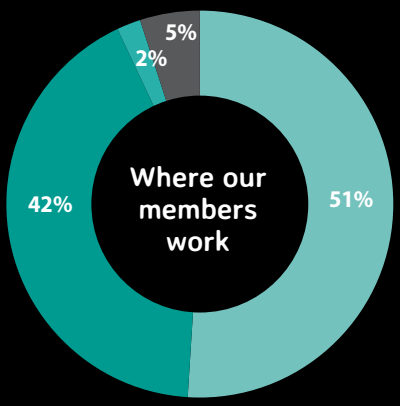
3,061
TOTAL MEMBERSHIP
FULL: 1,331
ASSOC: 1,007
STUDENT: 225
FRIEND: 498

27%
MEMBERSHIP INCREASE
over last 4 years (FY2020–24)
> 3,061 members (FY2024)
> 2,410 members (FY2020)

10%
MEMBERSHIP INCREASE
over last 12 months

84%
of our total membership identify as
ABORIGINAL AND/ OR TORRES STRAIT ISLANDER





Aboriginal Community Control Health Service or Aboriginal Medical Service
State/Territory Government Hospital or Health Service
Private Practice
Other

Total membership

Category	2022–23	2023–24	Up by
Full Members *(with and without quals)*	1169	1331	14%
Students	184	225	22%
Associate Members	939	1007	7%
Friends Membership	491	498	1%
Total	**2783**	**3061**	**10%**

⬆ 23%

INCREASE IN REPRESENTATION

> **572** Engagements (FY2023-24)

> **465** Engagements (FY2022-23)

6,774

SOCIAL MEDIA FOLLOWERS

(Facebook, Twitter, LinkedIn, Instagram)

↑ up **13%** from 5,985 (FY2022-23)

9

PROFESSIONAL DEVELOPMENT FORUMS
(80 members participated)

> Tasmania
> Queensland
> Northern Territory
> New South Wales

37

TRAINING PROGRAMS ENDORSED AS SUITABLE FOR CPD FOR NAATSIHWP FULL MEMBERS

85

PROFESSIONAL SUPPORT & DEVELOPMENT OPPORTUNITIES

> Job vacancies
> Scholarships
> CPD courses
> Webinars
> Forums
> Symposiums
> Yarning sessions

50

NEWSLETTERS CIRCULATED

134

2023 PROFESSIONAL DEVELOPMENT SYMPOSIUM ATTENDEES

26

STEERING COMMITTEES/ WORKING GROUPS

4

SUPERVISOR FORUMS
(250 participants)

> Victoria
> New South Wales
> Queensland
> Western Australia

44

KEYNOTE SPEECHES, PRESENTATIONS & INTERVIEWS DELIVERED

- Participated in the formal review of 22 training programs and 9 disease specific resources tailored to the specific needs of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners
- Maintained internationally recognised ISO9001 quality management standards
- Influenced over 23 different areas of policy, program or service delivery impacting on the health and wellbeing of Aboriginal and Torres Strait Islander people through written feedback and submissions
- Held a National Day of Recognition, 7 August 2023

STRATEGIC DIRECTION 1

Recognise and value our full scope of practice

Objective: To increase recognition and use of the full range of skills and integration of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners into health services across all health sectors and jurisdictions.

As the only national peak workforce body responsible for supporting and uplifting the roles of Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner professions, NAATSIHWP works diligently to ensure the qualifications, skills and roles of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners are being effectively utilised at a community, organisational, state and national level. We remain committed to leading change and ensuring increased recognition and understanding of the professions across policy, program and the health sector.

Achieving greater national consistency for the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce

After securing funding last year, NAATSIHWP is pleased to report that a major project to achieve greater national consistency for the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce has commenced. The project:

> responds to actions identified in the Workforce Plan 2021-2031.

> seeks to drive reform by uniting key stakeholders behind a nationally consistent approach to the responsibilities, scopes of practice and roles of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners and

> is examining what standardised scopes of practice and harmonised drugs and poisons legislation for the professions should include and involve.

The project began with the preparation of a Gap Analysis to develop shared understandings about the different approaches to scope of practice and administering drugs and poisons across jurisdictions. This required the completion of a point-in-time desktop review of the policies and legislation affecting the scopes of practice of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners across jurisdictions. Notably, the findings from this work reinforced the need for reform and strengthened our understanding of the barriers impacting on the growth and professionalisation of the workforce nationally. It demonstrated that:

> standardised minimum scopes of practice do not exist for most Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners in Australia

> Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners are not supported to apply the core capabilities gained through their qualification

> there are major differences across jurisdictions in the tasks and skills Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners with identical qualifications may perform

> existing scopes of practice do not take different qualification levels into account

> there are no clear minimum scopes of practice for Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners with Diploma and Advanced Diploma qualifications

> inconsistent medicines and poisons legislations are a key barrier to achieving national consistency for Aboriginal and/or Torres Strait Islander Health Practitioners and workforce governance is inconsistent and, in some jurisdictions, insufficient.

To consolidate the case for change and ensure that the experiences, voices and aspirations of the workforce are placed front and centre throughout the project, NAATSIHWP is currently partnering with the University of Queensland's Poche Centre for Indigenous Health to deliver a national consultation process.

From mid-April to the end of June 2024 consultations were undertaken in New South Wales, the Australian Capital Territory, the Northern Territory and parts of Queensland.

NAATSIHWP extends heartful gratitude to all those who have taken part in the consultations to date. We are looking forward to meeting those who participate from the Northern Peninsula Area and Torres Strait Islands, Western Australia, Victoria, Tasmania and South Australia in the new financial year.

Once consultations have concluded and findings are analysed, the *Achieving greater national consistency for the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce* project will culminate in a Final Report, including recommendations for whole-of-government consideration and action. We are confident that the project, due for completion in December 2024, will help drive much needed change and address some of the systemic issues that continue to impact the recruitment, retention, and professional utilisation of our workforce.

The consultations being conducted as part of the Achieving greater national consistency for the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce project:

New South Wales & Australian Capital Territory

> Dubbo, 22 April 2024
> Sydney, 24 April 2024
> Grafton, 26 April 2024
> Queanbeyan, 30 April 2024
> Batemans Bay, 2 May 2024
> Online, 3 May 2024

Northern Territory

> Katherine, 11 June 2024
> Darwin, 13 June 2024
> Nhulunbuy, 14 June 2024
> Alice Springs, 9 July 2024
> Online, 11 July 2024

Queensland, Northern Peninsula Area & Torres Strait Islands

> Brisbane, 20 June 2024
> Roma, 21 June 2024
> Mount Isa, 24 June 2024
> Townsville, 25 June 2024
> Cairns, 26 June 2024
> Thursday Island, 2 July 2024
> Bamaga, 3 July 2024
> Online, 30 July 2024

Western Australia

> Broome, 15 July 2024
> Perth, 17 July 2024
> Kalgoorlie, 19 July 2024
> Online, 24 July 2024

Victoria

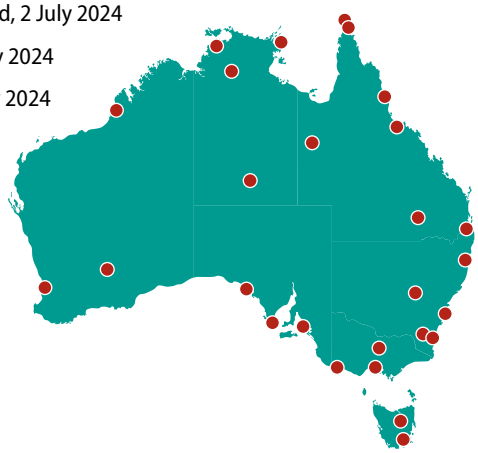
> Melbourne, 5 August 2024
> Shepparton, 6 August 2024
> Portland, 8 August 2024
> Online, 13 August 2024

Tasmania

> Hobart, 26 August 2024
> Launceston, 28 August 2024
> Online, 13 August 2024

South Australia

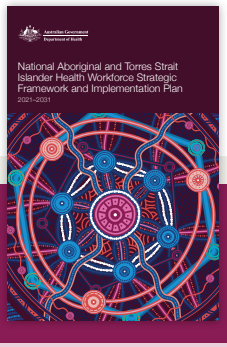
> Adelaide, 9 September 2024
> Port Lincoln, 11 September 2024
> Ceduna, 13 September 2024
> Online, 18 September 2024



Cairns, Queensland

Sydney, New South Wales

Katherine, Northern Territory



STRATEGIC DIRECTION 1

Aboriginal and Torres Strait Islander people are represented and supported across all health disciplines, roles and functions

Implementation Strategy

> 1.1. Revise, expand and nationally standardise the professional scopes of practice for:
  - Aboriginal and/or Torres Strait Islander Health Workers (ATSIHW)
  - Aboriginal and/or Torres Strait Islander Health Practitioners (ATSIHP).
> 1.2. Harmonise medicines authorities across all jurisdictions for Aboriginal and Torres Strait Islander health practitioners, aligned to the defined professional scopes of practice.

Defining professional scopes of practice

To complement and support the *Achieving greater national consistency for the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce* project to achieve greater national consistency, the NAATSIHWP team continued working on a comprehensive resource to define the professional scopes of practice for Aboriginal and/or Torres Strait islander Health Workers and Health Practitioners.

This resource draws on the National Aboriginal and/or Torres Strait Islander Health Worker Qualification Framework endorsed in December 2022 and recognises that the core skills and training gained through successful completion of a qualification provide a benchmark or baseline for what Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners should be able to perform. Essentially the publication:

> outlines the key capabilities Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners gain through their qualifications

> provides a minimum benchmark for what tasks Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners in all roles and settings and every level of qualification across Australia should be entrusted to practice and perform.

> provides case studies to highlight how the professions should be utilised in models of care specifically designed to keep Aboriginal and Torres Strait Islander people engaged in and connected to all types of healthcare services

> outlines the Medicare Benefits Schedule items claimable by the professions

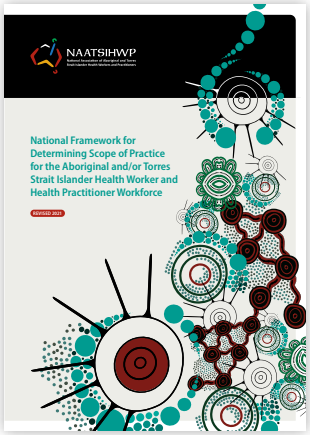
> includes a tool to ensure that roles, position descriptions and individual scopes of practice are designed consistent with qualifications and that Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners are provided with opportunities to apply the knowledge, and practice the skills, they have gained through their qualification/s.

Given the underutilisation and undervaluing of the professions that exists nationally, NAATSIHWP is hoping the resource will:

> provide a consistent understanding of the baseline capabilities that qualified Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners are educated and trained to perform

> aid in the establishment of nationally consistent standards of practice for the professions and

> illustrate how the professions should be utilised in models of care and multidisciplinary healthcare teams.



The *Defining professional scopes of practice* publication confirms that Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners hold valuable, sought-after skills, can undertake a wide variety of roles and deliver a broad range of clinical and non-clinical primary healthcare services in roles that span community health promotion, education and prevention; generalist primary healthcare; specialty clinical fields; and management.

We are anticipating that this exemplary resource will be released to coincide with the National Day of Recognition for Aboriginal and/or Torres Strait islander Health Workers and Health Practitioners on 7 August 2024; details will be available from our website.

Securing the professional identity of the workforce as Primary Health Care professionals

The way Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners are defined, described and aligned within current regulatory frameworks is also contributing to misunderstandings and the effective use of the professions. In this respect the workforce is frequently misaligned with the field of allied health, despite their comprehensive primary healthcare training and the holistic roles they perform.

In the absence of a specific stand-alone health system classification for Aboriginal and Torres Strait Islander Health, NAATSIHWP is advocating for the reclassification of our workforce, because Primary Health Care professionals' preventative and community-centred approach is well suited to the strengths of this workforce, enabling them to deliver comprehensive, culturally-competent care that addresses the root causes of health disparities.

Over the year we have been collaborating with the Commonwealth Department of Health and Aged Care to impact reform and address the challenges and misunderstandings around professional identity created by the current allied health misalignment.

We extend our gratitude to the Commonwealth Department of Health and Aged Care for their support so far.

Supervisor forums

To increase recognition and utilisation of the full range of skills and integration of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners into health services across all health sectors and jurisdictions in Australia, NAATSIHWP has also developed a training package to support supervisors and other health professionals build their understanding of the roles, qualifications and capabilities of the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner professions.

Over the year, we delivered this training package to supervisors in Victoria, Queensland, New South Wales and Western Australia. Given the variance in workforce legislation, regulation and policy, NAATSIHWP tailored the training to each location, to ensure accurate understanding of how the roles can be effectively utilised within multidisciplinary models of care in their respective state or territory.

A total of 250 participants attended the forums, demonstrating the interest amongst non-Indigenous health professionals and supervisors in learning more about these professions. This being the first year that NAATSIHWP has delivered its supervisor training package, we were pleased to see this uptake.

We appreciate the interest amongst mainstream health professionals in learning more about the capabilities of the workforce in primary healthcare, and how supervisors can fully utilise their skills. With the great uptake of these sessions, and over 87% of participants reporting an increased understanding of the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner professions, we are planning the delivery of further supervisor forums this coming year.

Virtual supervisor forum in Queensland

Defining the professions through ANZCO codes

To further secure the identity of the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner professions, NAATSIHWP contributed to the Australian Bureaus of Statistics' comprehensive review of the Australian and New Zealand Standard Classification of Occupations (ANZSCO).

The ANZCO codes are critical to the professional development of our workforce as the codes specify the skill level, qualifications and/or experience needed to work in occupations.

We successfully advocated for the appropriate reclassification Aboriginal and/or Torres Strait Islander Health Worker and Aboriginal and/or Torres Strait Islander Health Practitioner workforce as distinct but related professions, with an emphasis on recognising the critical nature of these professions, the different skillsets and registration requirements for both professions, and the cultural expertise and intellect that our workforce brings to the table.

We are confident that through the amendments of the codes we will see increased accuracy of labour market data, such as demographics across jurisdictions; the enabling of more relevant policy settings and programs for each profession; as well as increased recognition, understanding and utilisation of the workforce.

Walking the path to cervical cancer elimination

During this year, NAATSIHWP partnered with the Yardhura Walani team at the National Centre for Aboriginal and Torres Strait Islander Wellbeing Research, to analyse the important role that Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners play in cervical cancer prevention and identify opportunities to expand the scopes of practice of both professional to include the administration of self-collection cervical screening.

As part of this work our full members were asked to participate in a cross-sectional survey to gain an understanding of the current role the workforce plays in the cervical screening pathway and their aspirations in providing self-collection. Findings highlighted that the workforce is knowledgeable, qualified and eager to enhance their skills to better address the preventative health needs of their communities. Both professions hold valuable cultural skills and connections with their community which allow them to play a crucial role in eliminating cervical cancer.

Resources are currently being developed to expand the professions' scope of practice and strengthen Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner-led models of care. We thank the Yardhura Walani team for their ongoing support and look forward to continuing our partnership to empower the workforce to play a lead role in in cervical cancer elimination into the next financial year.

Supporting continuity of care in South Australia

Over the year, we have embraced the opportunity to collaborate with the South Australia Department of Health and Wellbeing to impact system reform and improve continuity of care for mothers and Aboriginal and Torres Strait Islander children in South Australia.

This work has involved working alongside other key health stakeholders to co-design, develop and test culturally-responsive Continuity of Care Protocols within the South Australia health system. Informed by extensive consultation, these protocols will define the principles that underpin continuity of care and identify the actions that need to be taken to prevent or resolve discontinuities of care across healthcare services and the broader health system.

The embedding of continuity of care protocols in a child and maternal healthcare context, contributes to progress towards transforming ways of working that are consistent with Priority Reform Area Three of the National Close the Gap Agreement. We look forward to playing a role in the full implementation of these protocols and further advocating for the professional utilisation of our workforce to enhance continuity of care.

Influencing policy directions

Over the year, NAATSIHWP has continued to influence the direction of policies, programmes and services impacting on the health and wellbeing of Aboriginal and Torres Strait islander people through the provision of written submissions, feedback and policy advice.

In addition to the work already outlined, NAATSIHWP provided submissions on a range of different health areas including the ninth National HIV Strategy, economic self-determination and cultural safety. While we regularly update our website with our recent submissions, these represent just a portion of NAATSIHWP involvements, as many submissions may respond to classified information or be submitted through online forms.

WORKFORCE SPOTLIGHT

Embracing Culture in General Practice

Danielle Beezley is a proud Wulli Wulli woman from central Queensland who has returned to her Country to raise her two children. She is the Practice Manager and Aboriginal Health Practitioner at Theodore Medical Centre, as well as the Practitioner member for Queensland on ATSIHPBA. Danielle strives to embed cultural ways of being and doing in the general practice which serves her community.

I started off doing admin work with different Aboriginal medical services, gaining experience in New South Wales, Northern Territory and Queensland. I always felt a pull towards work that would help mob stay safe and healthy. Returning home to my Country and with the support of my beautiful family, I began working in an Aboriginal Health Worker role at Theodore Medical Centre. It was here that I completed my Certificate IV in Aboriginal and/or Torres Strait Islander Primary Health Care Practice and became an Aboriginal Health Practitioner.

Ten years on, Theodore Medical Centre now has an integrated healthcare model with their own Aboriginal Health Team. As the Practice Manager and Aboriginal Health Practitioner, I work closely with our other Aboriginal Health Workers, doctors, nurses and other health professionals to service our town, which has a population of around 500 people. Our Aboriginal Health Team has the clinical skills and knowledge that is vital to treating our people in a culturally-responsive way, and we also support our doctors in giving them the right tools to treat our patients safely.

My mob seeing me in action gives all of us a sense of pride. My old people, uncles and aunts helping community with their health and all different aspects has influenced me and my journey. Being able to help mob, understand their treatment options and support them through their health journeys is so fulfilling, and as an Aboriginal Health Practitioner, I am in a strong position to provide continuity of care to mob.

Seeing my role and my clinical team grow together and improve the health of our community has been one of the most rewarding feelings of being a part of this profession.

We are continuing the healing legacy of our old people whilst breaking down clinical barriers in the healthcare system. I encourage our current trainees to tap into supports, training and upskilling opportunities to further their career as Aborigin

> "It's a really rewarding career, and it doesn't just stop at getting your certificate and doing 715's – you can upskill."

I have obtained my x-ray license to ensure that the patients of our general practice had a one-stop-shop for their health needs. From taking bloods to conducting hearing tests, Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners support patients in so many areas of their health journey.

From my experience as an Aboriginal Health Practitioner, I am also the Practitioner member for Queensland on Ahpra's ATSIHPBA. It has been an important role as I am able to provide insights and advice to support the workforce, particularly from rural areas, and make sure that our voices are heard. In all my roles, as a Board member, Practice Manager and as an Aboriginal Health Practitioner in a rural area, everything is to improve the health journey of my people.

STRATEGIC DIRECTION 2

Workforce support, development and leadership

Objective: To enhance the accessibility and quality of professional support, leadership and workforce development opportunities for our workforce.

A key priority of NAATSIHWP is to ensure Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners are well-equipped and supported to deliver high quality and culturally-safe healthcare. Providing professional development opportunities and fostering the leadership of our members, enables the workforce to respond to evolving community needs and healthcare advancements. Our programs and initiatives are designed to enhance the knowledge, skills and abilities of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners through active participation in both formal and informal training.

The endeavours outlined here demonstrate that NAATSIHWP is continuing to expand access to professional support and professional development opportunities and, with the roll-out of our inaugural Leadership Masterclass, setting a new benchmark in leadership development.

Growing the Workforce at our Professional Development Symposium

Over 24–25 October 2023, more than 130 Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners gathered on Kaurna Country to participate in the NAATSIHWP biennial Professional Development Symposium.

This year's theme, 'Growing the Workforce', highlighted the NAATSIHWP commitment to nurturing talent, building capacity, and fostering a strong and highly skilled Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce. Aside from being an opportunity to connect and forge new partnerships and networks, the Symposium was designed to equip Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners with the skills and knowledge needed to excel in their roles.

Across two days, Symposium delegates participated in a carefully curated program that included sessions facilitated by:

> proud Gomeroi man, Ray Kelly, who shared the implementation and success of strategies identified through the research-based program *Too Deadly for Diabetes*

> Dr Donna Carkeet and Hayley Baldwin from EarTrain, who gave a comprehensive refresher on identification, management and treatment of ear diseases and hearing loss and

> Gamilaroi woman and CEO of the Culturally Informed Practices Institute, Rosie Lang, who provided an insight into culturally-informed health and therapeutic activities

Fostering connection to culture is critical to the professional development and resilience of our workforce and alongside professional development in clinical areas, delegates had the opportunity to immerse themselves in stories from Aboriginal and Torres Strait Islander artists at the 'Tarnarthi' exhibition at the Art Gallery of South Australia. To reinforce the important role that culture plays in health and wellbeing we also showcased the work of local artist Dre 'Mozzi' Ngatokorua. As part of the formal symposium dinner, Dre recreated his multimedia production, 'A New Moon' noting that the story of his mother growing up at the Umeewarra Mission outside Port Augusta served as a powerful reminder of both the ongoing impacts of colonisation and of how truth telling can serve as a in important mechanism for healing.

NAATSIHWP thank all session facilitators, presenters, member presenters, sponsors, and delegates for helping to make the event an overwhelming success. We look forward to hosting our next Professional Development Symposium in 2025.


NAATSIHWP
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2023 NAATSIHWP
PROFESSIONAL DEVELOPMENT SYMPOSIUM

Leadership Masterclass

Through feedback from members, NAATSIHWP identified that Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners in managements roles are not provided with adequate cultural or professional support to advance their leadership. We were proud to respond to this feedback this year through the launch of the inaugural NAATSIHWP Leadership Masterclass

From March to May 2024, 10 Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners, selected through a rigorous assessment process from a field of nearly 40 applicants, participated in three one-week blocks of training on Ngunnawal and Ngambri Country.

Successful participants completed a range of professional development modules specifically targeted to those in managerial roles. Sessions facilitated by Dr Paul Callaghan, Geoff Richardson PSM, the Australian Indigenous Governance Institute and NAATSIHWP CEO Karl Briscoe, saw the cohort put their learnings into action through yarns, hands-on activities and offsite visits. As well as learning about cultural leadership and motivations, professional and stakeholder relationships, governance, financial literacy and succession planning, the cohort also had the opportunity of hearing the personal stories of and networking with prominent leaders from across the Aboriginal and Torres Strait Islander health space.

Throughout the program, NAATSIHWP consistently saw participants challenge themselves and take their next step on their leadership journey. Congratulations to our first cohort of graduates:

- Andrew Fraser
- Cathy Davison
- Delia Lawford
- Genavie Tabuai
- John Mosby
- Marsha Dodd
- Michelle Miller
- Sarah Corrigan
- Sharni Dorante
- Suzie Smith

We look forward to welcoming future cohorts of the NAATSIHWP Leadership Masterclass. All those interested please keep your eyes on the NAATSIHWP website for further details.

"I know the areas I need to develop further to become a better leader, but I have also identified my strengths"

– Leadership Masterclass participant.

"The content was inspiring, empowering and validating and 100% relevant to Indigenous leadership"

– Leadership Masterclass participant.

Delivering professional development forums

During 2023–24 NAATSIHWP continued to deliver professional development forums. The forums offer an opportunity for Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners, as well as other interested health professionals and sector staff to network and discuss the strategic directions of the workforce at regional and national levels, negotiating a scope of practice, cultural safety in the workplace, pathways in CPD, and professional and self-care, in addition to the benefits of networking with workforce in the area.

This year, forums were delivered in Nowra and Hobart; multiple online sessions were delivered to members working in the Torres and Cape Hospital and Health Service; and the first professional development forum tailored specifically to student members, held in Batchelor.

Nipaluna, Hobart


Kungarakany and Awarai Country, Batchelor, Northern Territory


Wandandian Country, Nowra

Increasing access to training

Over 2023–24 we maintained a focus on the provision of professional development opportunities to ensure Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners have access to culturally-safe, contemporary and relevant training programs. We launched our revitalised members portal; circulated training opportunities directly to members, through our weekly newsletter and social media channels; and worked with stakeholders to grow and promote training and professional development opportunities.

This year, we were involved in developing programs and resources for the workforce on the following topics:

> Asthma

> Cancer medications

> Lung Cancer

> Cervical screening and self-screening

> Syphilis and sexual health

> Immunisations

> Virology

> Stroke recovery

> Palliative care

> Burns and wound care

> Eye health

> Smoking cessation

> Sexual assault forensics

> Gout medicines.

Over the year the number of professional development initiatives we endorsed under our CPD Endorsement Program also increased. A total of 37 CPD programs ranging from face-to-face training sessions, educational videos, courses and seminars were endorsed. The following provides a snapshot of some of the topics covered.

> Sexual health and sexually transmitted viruses and infections

> Palliative care

> Cancer care

> Mental health and emotional wellbeing

> Diabetes

> Pneumococcal and Meningococcal Diseases

> Chronic pain

> High blood pressure

> Cervical screening and HPV prevention

> Immunisation

> Acute Rheumatic Fever and Rheumatic Heart Disease

> Asthma and other respiratory tract conditions

> Organisational topics for Aboriginal and Torres Strait Islander Community Controlled Health Organisations (ATSICCHOs)

> My Health Record

> Mosquito related viruses and disease.

Members can access these courses through the Member's Portal on the NAATSIHWP website, which includes an automated register to assist Aboriginal and/or Torres Strait Islander Health Practitioners to manage and report on their CPD activities as part of their Ahpra registration requirements.

At NAATSIHWP we do appreciate the increasing number of stakeholders who have taken the initiative to grow the number of professional development opportunities available to the workforce. It demonstrates increased recognition of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners and the importance of investing in their skills.

Mentor training program

NAATSIHWP continues to successfully expand its Mentor Training program, having successfully trained 16 mentors across the year in a range of topics such as:

> strength-based approaches to practice

> appreciating and building resilience

> embedding cultural safety into the workplace

> healthy mentor and mentee relationships.

The program recognised that Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners continue to experience a range of barriers to entry and effective participation, and often carry additional cultural loads that remain unrecognised. Our mentorship training enables the workforce to access peer-to-peer support and is a valuable opportunity for members to further develop their mentoring skills.

Models of Care training in Bamaga

This year NAATSIHWP staff travelled to Bamaga, to deliver training on Models of Care to Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners, and other relevant staff, at the Northern Peninsula Area Family & Community Services Aboriginal and Torres Strait Islander Corporation (NPAWS).

The comprehensive face-to-face training provided an opportunity for staff to learn more about how Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners can be involved in models of care at each level of qualification, the Medicare Items relevant to the models of care, and the process for obtaining Medicare Provider Numbers (MPN).

The training provided a great opportunity to learn more about how the roles of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners can be maximised in ways that benefit clients and support the financial security of clinics.

We look forward to working with more healthcare providers and remaining committed to supporting all stakeholders to learn more about the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner professions and how they can be used effectively in multidisciplinary models of care to achieve better health and wellbeing outcomes for Aboriginal and Torres Strait Islander people.

Jurisdiction specific mentoring

The success of our mentoring program has also given rise to further opportunities. NAATSIHWP is pleased to announce that work is underway to co-design and pilot a Mentoring and Support Program for all Aboriginal and Torres Strait Islander employees working in clinical, non-clinical and administrative roles, in collaboration with the South Australian Department of Health and Wellbeing. The program aims to improve recruitment, retention and recognition of Aboriginal and Torres Strait Islander staff within South Australia Health through providing peer-to-peer support that is accessible to all Aboriginal and Torres Strait Islander employees. This program is set to be piloted in the 2024–25 financial year, and we look forward to connecting with more of our members in South Australia through the roll-out of the program

NPAWS Model of Care training participants, Bamaga

WORKFORCE SPOTLIGHT

Connecting Clinical to Community

Michael Woods is a proud Yuin and Gunaikurnai man through his nan's side and was born on Wakka Wakka Djakunde Country.

Josiah Little was born on Taribelang Bunda Country in Bundaberg and has ties to Djakunde country from his father's side, and Bandjin and Warrgamay from his mother's side.

Both Michael and Josiah are registered with Ahpra as Aboriginal Health Practitioners and are engaged as Aboriginal Health Workers at Inala Indigenous Health Service, Metro South Health, Queensland Health. They completed their studies together and are both dedicated to improving health outcomes for Indigenous communities through clinical care, health promotion, and community-led initiatives. Having recently completed their Graduate Diplomas of Indigenous Health Promotion at the University of Sydney, they are both looking forward to becoming Indigenous Health Promotion Practitioners.

Michael

At Inala Indigenous Health Service, Josiah and I have three main areas that we are accountable for as Aboriginal Health Workers. We do clinical work at the Centre of Excellence Clinic with clinical director Dr Noel Hayman, the doctors, the nurses and the Diabetes Educator. We are the first point of contact for patients before any doctor or nurse engagement; we triage and do screening, wound care, health assessments, and have yarns with patients to make sure everyone going through the clinic doors feels comfortable. We also do health promotion to improve health literacy and advocate for our patients. Our roles interestingly sit as part of Queensland Health, but are positioned solely in the Aboriginal medical service, so we have the ability to help our communities navigate the health system by using our primary health and hospital networks to provide integrated best-practice care. Lastly, as part of our health promotion efforts we've established a men's health group, which has been a welcomed learning curve for both of us. From our work in the group, we have really built on our commonality of being Aboriginal men and from these shared experiences, we were able to develop relationships of trust. Over the last 12 months, we've been able to grow the group from three men at the initial meet-and-greet, to over 25 active men engaging in the weekly gathering.

"We've been able to do some really engaging cultural activities... we really all feel like a close-knit bunch of men now."

For NAIDOC this year we were able to engage a local artist to collaborate on a men's business painting which has since been transferred to a men's group shirt and a NAIDOC shirt that our men and community can wear with pride and agency.

We keep the group culturally safe and welcoming, and the group's growth is a testament to the Aboriginal and Torres Strait Islander men of Inala. We've also recently developed a partnership with Inala Wangarra Inc., the local Aboriginal community-controlled organisation, to help merge each of our Aboriginal men's health groups. It has presented a form of opportunistic healthcare where our men are able to engage with their doctors and specialists on the same day as the men's groups to improve appointment attendance and overall health engagement.

I feel as though Aboriginal and Torres Strait Islander Health Workers and Health Practitioners are the most integral parts in our efforts of the Closing the Gap. Similar to other identified health professionals, Aboriginal Health Workers are effective in establishing rapport and professional relationships to be able to improve healthcare and outcomes. We are able to turn medical consultations into conversations and take away the scary medical part of it, and make it a really positive experience.

Josiah has been a mentor to me in my journey, so I've experienced first-hand the benefits of mentorship from an Aboriginal Health Worker. My maternal grandmother experienced displacement of culture, and Josiah offered me an opportunity to strengthen my cultural identity by immersing myself in community throughout my Health Worker journey. Since then, we have both completed our Certificate III and IV Primary Health Care, a Diploma in Primary Health Care in practice, and the Graduate Diploma in Health Promotion alongside each other. The past 12 months of completing our Graduate Diplomas, developing the men's group, and working with mob from Inala has been the most rewarding experience.

In the next five years I want to make positive changes in public health through, hopefully, getting into a leadership positi on and utilising my clinical experiences to ground my strategic thinking when striving to achieve health equity for mob.

Josiah

I always had a natural sense of helping others which was instilled in me through my parents. As a teenager, we cared for my great-grandmother who had dementia which led me down the path of being a nurturer and wanting to work in the health sector. During my early 20s, I took up a trainee Health Worker role at the Indigenous Wellbeing Centre in Bundaberg and learnt so many skills. Everything a nurse did, I learnt how to do.

Working in communities like Cherbourg and Yarrabah and having to blend our clinical skills with our community health promotion work has been one of the most rewarding experiences for me. Michael and I really appreciate the value in connecting community health to clinical work and working holistically with mob as Aboriginal Health Workers. We both recognise that the integration of Aboriginal Health Workers and Practitioners promotes early detection and prevention in clinics throughout Australia to bridge the gaps of mainstream health services to achieve health equity for our mob.

A lot of people don't access health services because of fear and often because of trauma, but our faces and us being there makes it just that bit easier to engage in health services, come to the clinic and actually get the support they need, whether it be mental health, sexual health or physical health. With the education we've received, we are able to yarn to patients and answer their questions in a way our patients understand, so they are able to make informed decisions about their health journey. I really enjoy health education and promotion, and I look forward to utilising the knowledge and skills I've acquired through my current Graduate Diploma in Diabetes Education and Management. I want to help mob live healthy lives and I see myself going on to specialise in endocrinology as well.

We appreciate our Operations Manager for being passionate about our Aboriginal Health Workers and Health Practitioners and providing us opportunities to upskill. Michael and I also acknowledge our deadly team of Aboriginal Health Workers and Health Practitioners that we work closely with at Inala Indigenous Health Service, especially Priscilla for sharing her knowledge and skills with us and nurturing us during our transition from purely clinical health workers to hybrid community health workers throughout our time at Inala. In the next few years, we also want to focus on pushing through other young Health Workers to enter the sector, especially young men.

"Just over the past 2 weeks we have had young fullas, 18 and 23 come to our men's group and share interest in becoming Health Workers... it shows the importance of representation."

STRATEGIC DIRECTION 3

Leadership and advocacy in Aboriginal and Torres Strait Islander health

Objective: To extend our leadership and advocacy across Aboriginal and Torres Strait Islander health policy, programs and practice relevant to our workforce.

We remain committed to growing our voice, advocacy and leadership across the sector. We continue to work alongside other Aboriginal and Torres Strait Islander peak health workforce bodies, ATSICCHOs and government organisations to represent and promote the Aboriginal and/or Torres Strait Islander Health Workers and Aboriginal and/or Torres Strait Islander Health Practitioners workforce on an ongoing basis and use our expertise to advocate for holistic Indigenous led approaches to improve health outcomes for Aboriginal and Torres Strait Islander people. An overview of our key achievements in this area is provided in this section.

Ministerial Roundtable with the National Indigenous Health Leadership Forum

Since September 2023, NAATSIHWP has been proud to be Chairing the National Health Leadership Forum (NHLF). The NHLF is a partnership of 15 national Aboriginal and Torres Strait Islander health organisations that influences the systemic and structural transformation of mainstream governments. With expertise across health, aged care and disability policy, service delivery, workforce, research, healing, mental health, and social and emotional wellbeing the NHLF provides advice and direction to Australian governments on the development and implementation of policies, programs and services to Aboriginal and/or Torres Strait Islander people.

In March 2024, the NHLF played a key role at the National Aboriginal and Torres Strait Islander Health Ministers Round Table. The Round Table was an important opportunity to identify tangible strategies to Closing the Gap and foster meaningful partnerships between state governments, the Australian Government and ATSICCHOs. NAATSIHWP representatives spoke on the need for culturally-safe healthcare, highlighting the transformational change required across health systems and other sectors to ensure they are culturally safe and free from racism.

Puggy Hunter Memorial Scholarship Scheme

In March, we were pleased to announce that the development and delivery of the Puggy Hunter Memorial Scholarship Scheme is now under Aboriginal and Torres Strait Islander leadership. NAATSIHWP and the Rural Doctors Network joined a consortium led by Indigenous Allied Health Australia to administer the scheme in the 2024–25 financial year.

The scholarship plays an essential role in providing equitable access to education, training and employment, supporting Aboriginal and Torres Strait Islander representation in the health workforce, with scholarship recipients making positive impacts in their communities every day.

NAATSIHWP believes the shift is a tangible step towards building the community-controlled sector in alignment with Priority Reform Area 2 of the National Agreement on Closing the Gap. The delivery of the Puggy Hunter Memorial Scholarship Scheme under Indigenous Allied Health Australia's leadership will ensure culturally-safe and responsive scholarships are available to Aboriginal and Torres Strait Islander individuals with an interest in joining the health workforce.

Close the Gap campaign

In 2023–24 NAATSIHWP continued to co-Chair the national Close the Gap campaign, a community-controlled movement that advocates for the change needed to close the health and life expectancy gap between Aboriginal and Torres Strait Islander peoples and non-Indigenous Australians through a human rights-based approach. Through our involvement in the Close the Gap campaign, we aim to showcase successful rights-based approaches, programs and initiatives that are already active and achieving positive results in communities as a result of Aboriginal and Torres Strait Islander leadership.

The 15th Close the Gap Annual Report was launched in March 2024 on National Close the Gap Day. The launch was an opportunity for NAATSIHWP, together with other Close the Gap members and federal politicians to come together to celebrate the effectiveness of strengths-based community-controlled approaches to closing the gap and advocate for increased government support to further strengthen these self-determining initiatives.

The Partnership for Justice in Health

Our involvement in addressing racism and advocating for culturally-safe healthcare provision is ongoing through NAATSIHWP's role as co-Chair of the Partnership for Justice in Health (P4JH) and provision of secretariat support.

Formed in 2017, the P4JH works tirelessly to improve health and justice outcomes for Aboriginal and Torres Strait Islander peoples at individual, institutional and systemic levels.

Over the past year the P4JH has been actively pursuing the formation of a Parliamentary Friendship Group against Racism in Health, meeting with and inviting decision-makers across the political spectrum to share the P4JH objectives and initiatives. Once established, it is anticipated that the Parliamentary Friendship Group will assist the P4JH combat racism in the health and justice sectors, by lobbying directly for regulatory and legislative reform including the provision of Medicare to incarcerated individuals.

Aside from advocating for systems-level change, NAATSIHWP continues to assist the P4JH in the roll-out of the 'Your Health Rights' initiative, distributing posters and postcards to healthcare organisations across the country to provide healthcare consumers with an accessible resource that will inform them of their healthcare rights when they attend healthcare services.

International involvement

Ensuring Indigenous peoples across the world have access to culturally-safe and responsive healthcare is a growing area of interest for NAATSIHWP. In April 2024, CEO Karl Briscoe met with Pacific Health Leaders at the 15th Pacific Heads of Health Meeting in Samoa to contribute to international discussions on the key challenges and successes in addressing health disparities for Indigenous people. NAATSIHWP welcomed the opportunity of raising international awareness on the effectiveness of the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce in improving access to high quality and culturally-safe healthcare and the possibilities of drawing on this unique culturally-based workforce model to strengthen approaches to Indigenous health across the world.

Cultural safety framework evaluation

Cultural safety is a critical component in providing access to safe care, supportive workplaces and the recruitment and retention of Aboriginal and Torres Strait Islander staff. NAATSIHWP is committed to promoting culturally-safe workplace environments for Aboriginal and Torres Strait Islander consumers and health professionals. This is why, in 2013, NAATSIHWP (then NATSIHWA) developed its own Cultural Safety Framework to increase the capability within the healthcare systems to deliver culturally-safe and responsive health and wellbeing services for Aboriginal and Torres Strait Islander Peoples.

Work is currently underway to review and update the Framework.

As part of this work we intend to address the notion that cultural safety requires changing attitudes on an interpersonal level and instead highlight the need for long-term systemic approaches to cultural safety across the healthcare system. It is envisaged that once updated, the revitalised Framework will set the precedent for meaningful change and culturally-responsive healthcare at a service and systems level and support health professionals, policy makers and stakeholders to continuously engage in critical reflection about cultural safety and culturally-responsive healthcare.

Nation-wide representation

Recognising the importance of involving communities at a grassroots level, NAATSIHWP regularly represents and promotes the workforce through presentations, information booths and providing sponsorships at nation-wide and local events. By representing our workforce and involving communities in discussions about the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner roles, we strengthen the understanding and utilisation of – and demand for – this unique workforce.

Across the 2023–24 financial year, NAATSIHWP connected with Aboriginal and Torres Strait Islander communities across Australia, promoting the workforce through exhibition stalls at:

> 2024 National Aboriginal and Torres Strait Islander Eye Health Conference, Hobart
> Aboriginal Health Council of Western Australia State Sector Conference, Freemantle
> Aboriginal Health Worker Conference, Broome
> Australian Indigenous Doctors Association Conference, Hobart
> Barunga Festival, Barunga
> Deadly Cup Carnival, Darwin
> Gayaa Dhuwi Conference, Melbourne
> Indigenous Allied Health Australia Conference, Sunshine Coast
> Laura Festival, Laura
> NAATSIHWP Symposium, Adelaide
> National Multicultural Festival, Canberra
> Reconciliation Day Event, Canberra
> Tagai State College's Careers Day, Thursday Island.

We are proud and grateful to support the exceptional work of other organisations throughout this year and look forward to working together to advocate for positive change towards Aboriginal and Torres Strait Islander health and wellbeing.

Strategic partnerships to eliminate racism

Genuine and collaborative relationships, and a cross-sector approach from governments, community-controlled and private organisations is essential to driving real change in bettering health and wellbeing outcomes and eliminating racism within health systems. As a result, NAATSIHWP remains actively involved in several long-term sustainable initiatives to eliminate racism and embed culturally-safe practice across the healthcare system.

We value our ongoing partnership with the Aphra, and we commend the steps taken by the organisation to ensure Aboriginal and Torres Strait Islander peoples have access to culturally-safe healthcare. Recent changes to the national law in particular have been successful in enshrining cultural safety at the highest strategic level, setting a strong precedent for ensuring that Australia's health workforce contributes to the elimination of racism and is responsive to the health needs of Aboriginal and Torres Strait Islander people. NAATSIHWP continues to be involved in several Working Groups under Aphra's Cultural Safety Framework and remains committed to working with Aphra to ensure Aboriginal and Torres Strait Islander people can access culturally-safe healthcare, free from racism. We would like to acknowledge the tireless efforts and leadership of Martin Fletcher, CEO of Aphra, who has announced his intention to step down from his role in December 2024, after 15 years of service.

WORKFORCE SPOTLIGHT

Realising Our Career Pathways

Jessica Mitchell is a proud Gunditjmara and Wemba Wemba woman living and working on Wurundjeri country in Naarm (Melbourne) and the Executive Manager of Workforce Development at the Victorian Aboriginal Community Controlled Health Organisation, that has 33 community-controlled member organisations. Jessica supports the members in their advocacy and policy efforts to develop the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce and improve health outcomes for our mob across the state.

I am an Aboriginal Health Practitioner, and in my current role I look after the general practitioners, Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners, Nurses and Midwives apart of the Koori Maternity Services Program that work within our Aboriginal Community Controlled Organisations based in Victoria. I support them with their Medicare claiming and develop workforce campaigning strategies to increase Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner representation in our health system.

From my early days at the National Aboriginal Community Controlled Health Organisation with Aunty Janine Mohammed and Aunty Renee Williams, I was inspired by my mentors and my trail-blazing mother, Lisa Briggs, who has really been a compass for me through my professional journey. I was born into a family of people who have worked in Aboriginal health for decades, and I'm continuing their legacy. My time working with community at the Victorian Aboriginal Health Service and Wathaurong Aboriginal Co-operative at a grass-roots level has often informed my strategic thinking. My clinical experience has fuelled my passion for preventative health and empowering mob to self-determine decisions around their health to lower the prevalence of chronic diseases in our communities.

"Aboriginal Health Workers and Practitioners are the cultural and clinical experts in our service. We know mob, we know what's needed to care for mob. I see you and you see me."

Our strong connection to community and culture is central to our role as Aboriginal and Torres Strait Islander Health Workers and Health Practitioners. Working in maternal child health in one of the most vulnerable areas in Geelong and empowering all the new mums and parents to feel safe and make the best decisions for their babies and families was one of the most rewarding experiences in my clinical career. In my advocacy work, the recent changes to scopes of practice have been really great as we have been able see some of our advocacy efforts come to fruition, especially in Victoria where the Aboriginal Health Worker role is approaching it's 40-year anniversary.

In working in the health sector for over a decade now, most of what I've learnt comes from my experience of being an Aboriginal Health Practitioner. My passion really comes from helping community and helping the Aboriginal Health Workers and Health Practitioners be the best they can be in their roles. Whilst it's a tough gig sometimes, it's just so rewarding, and you get to see first-hand the impact you've had. The influence we have on the ground, making medical spaces accessible and welcoming, is immeasurable and rewarding. My experiences in clinical work and on the ground with families as an Aboriginal Health Practitioner continues to inform my leadership role and all my advocacy work for the workforce. From health promotion, to specialising in a clinical area like maternal health, to becoming a CEO – there are countless opportunities that arise from pursuing study as an Aboriginal and/or Torres Strait Islander Health Worker or Health Practitioners.

STRATEGIC DIRECTION 4

Workforce recruitment, retention and career pathways

Objective: To increase our influence in the development and implementation of effective recruitment, retention and career pathway strategies for our workforce.

A strong Aboriginal and Torres Strait Islander health workforce is a powerful driver of change. Evidence consistently demonstrates that Aboriginal and Torres Strait Islander staff deliver better health outcomes for Aboriginal and Torres Strait Islander people. Yet, despite this, there continues to be considerable under-representation of Aboriginal and Torres Strait Islander people across all roles and divisions of the healthcare system.

Over the year, we spearheaded a wide array of projects and initiatives to strengthen recruitment, retention and career pathways for Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners. Our ongoing partnerships with other ATSICCHOs, government hospitals and health services, private practices, as well as VET organisations, have resulted in the development of culturally-safe and secure career pathways that ensure both professions are embedded as a vital, strong and valued resources within a broad range of healthcare teams.

National Day of Recognition

On 7 August 2023, we saw an unprecedented level of interest in our National Day of Recognition for Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners, with celebrations across social media, news reports, office events and in health services across Australia.

Within the Aboriginal and Torres Strait Islander community our workforce is renown as a vital and reliable resource critical to improving health and wellbeing outcomes. Yet across mainstream Australia few would know, understand or recognise Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners as stand-alone professions or, more significantly, that together the professions comprise the only culturally-based health workforce underpinned by national training and registration in the world. The National Day of Recognition celebrations across the country are, therefore, critical to raising awareness about the history and essential role of the workforce in providing culturally-safe, responsive care for Aboriginal and/or Torres Strait Islander people. It is also an opportunity for the health sector and all Australians to help celebrate the achievements of the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce.

This year, NAATSIHWP grew public excitement in the lead up to the National Day by hosting a *Walk for NAATSIHWP* Heroes, a public walk fundraising event that ran from 10 July to 6 August 2023. As well increasing recognition for Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners, the inaugural event saw

National Day of Recognition celebrations at the NAATSIHWP office

$1385 raised towards the NAATSIHWP's bursary program.

On the National Day, the NAATSIHWP team hosted an in-person morning tea for workforce members and sector leaders, and met with local representatives Aboriginal and Torres Strait Islander, health and wellbeing, and government organisations to share the great work of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners.

We also marked the day by showcasing the incredible work and positive impact that the professions have in improving health and wellbeing outcomes by using the hashtag #NAATSIHWPHeroes across our social platforms, and disseminating member profiles and testimonials across our networks. We appreciate the many health services, organisations and individuals who used the day to share the valuable experiences and opportunities that these two careers offer.

National Day of Recognition celebrations at the NAATSIHWP office

"I would (and as I have for many years) emphasise the importance of this workforce. It is imperative the non-indigenous workforce embrace the roles and responsibilities of our Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners and take the time to learn and understand the value we all add to Aboriginal health from a holistic viewpoint. This in-turn will potentially aid and reduce stigmas towards Aboriginal clients/ patients within the health sector."

– **James Bisset** (Arrernte descent with connection to Arabana, far north South Australia), Registered Training Organisations Manager, Aboriginal Health Council of SA Ltd and working on Kaurna land

"Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners play a vital role in providing clinical services, health promotion and education, disease prevention, primary healthcare and culturally-considered care for individuals, families, and community groups across all areas of the health service."

– **Haylene Grogan** (Yalanji and Tagalaka woman with Italian heritage), Chief First Nations Health Officer Queensland Health

"Becoming an [Aboriginal and/or Torres Strait Islander] Health Practitioner or Health Worker is a rewarding career path that works in a culturally-safe way to improve our mobs' health outcomes. This journey opens the door to career growth and many more opportunities in the health sector"

– **Tahnee Hooper** (Kamilaroi), Aboriginal and/or Torres Strait Islander Health Worker Professional Lead

"Their work has been understated and, often taken for granted, how hard they search for the answers that our people need. [They are] keen experts in creating opportunity when none appear available and empowering us to take the lead in our health journey are their ultimate superpowers. Their ability to keep us connected to our bodies, support networks, our communities and our families is a bonus."

– **Sunni Jamieson**, Acting Service Manager, Sunshine Coast Health

NAATSIHWP is also proud to note that this year's National Day of Recognition was celebrated for the first time in the Commonwealth Parliament. We are grateful to the current Minister for Indigenous Australians, Senator the Hon. Malarndirri McCarthy, who gave the following address in her previous capacity as Assistant Minister for Indigenous Australians at a Parliament sitting:

"Today we celebrate Aboriginal and Torres Strait Islander health workers right across Australia. This is their particular day, when we look at what they do in terms of assisting our families and communities across Australia. Whether they're in the Aboriginal community health sector or the public sector, these are workers who are in our remote and regional parts of Australia and in our capital cities.

I want to reach out to our Aboriginal and Torres Strait Islander health workers across the country – this is your day, and we certainly appreciate the work that you do, day in, day out – and, in particular, the National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners, who are there as an overall support for all of these workers across the country in the medical space. Throughout COVID, we saw the ATSICCHOs lead the way, along with NACCHO [National Aboriginal Community Controlled Health Organisation], in trying to ensure vaccinations were taking place, communication was taking place and information was going out right across the country.

On a very personal note, I'd like to acknowledge two women in particular: my aunties the Timothy sisters, who were our Aboriginal Health Workers in Borroloola as I grew up. My Auntie Mavis is still with us today, in retirement. I think of them and the role models they were to me and my brothers and sisters and cousins as we were growing up, not only in the Borroloola region but in Alice Springs. With their complete dedication, care and compassion and their belief in caring for one another, whether it's in the workspace or the health space – getting up every single day and getting out there and looking after your families – they certainly gave me something to aspire to. I congratulate all health workers across the country."

Careers day

As the advocacy body for the Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners, NAATSIHWP is committed to building the future of our workforce by encouraging the next generation of student to pursue a career in Aboriginal and Torres Strait Islander healthcare.

At Tagai State College Careers Day, we yarned with Aboriginal and Torres Strait Islander students in their final years of secondary education, taking the opportunity to promote the roles of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners through a Virtual Reality game about smoking cessation.

Our creative approach to Tagai State College Careers Day allowed our team to demonstrate the diverse roles that Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner professions play across different healthcare settings. At the same time, it served to deepen understandings, prospects and opportunities in an engaging and accessible manner, should students choose to undertake study to become a qualified Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner.

We look forward to coordinating a broader Aboriginal and Torres Strait Islander Health Careers Day in the 2024–25 financial year, alongside other national peak health organisations, and to continue to demonstrate the opportunities and rewards that these professions bring.

Strengthening the role of the workforce in Queensland's ATSICCHO sector

NAATSIHWP maintains strong working relationships with many national peak, state, territory and community-controlled health bodies to further support sustainable employment and retention of the workforce. This year, we have been grateful for the opportunity to partner with Northern Queensland Primary Healthcare Network to co-produce an extensive and comprehensive review of the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner professions within Queensland's ATSICCHO sector and provide recommendations on safe and effective ways of expanding and developing the professions.

The review seeks to strength the role of our workforce within Queensland's ATSICCHO sector by building on work already underway across Australia to strengthen and embed the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner professions as a vital and valued component of Australia's healthcare workforce. As every state and territory is distinct, NAATSIHWP is working closely with the Northern Queensland Primary Healthcare Network and Queensland ATSICCHOs to ensure that the recommendation and strategies emerging from the Review reflect the specific context, strengths and challenges faced by Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners in the Queensland ATSICCHO sector.

With initial phases of the project complete, we are looking forward to commencing consultations with key stakeholders over the next financial year. We are confident that completion of this Review will result in improved understandings of the skills, qualifications and roles of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners and suitable career pathways that support the uptake, retention and career progression of the workforce.

Developing equitable career pathways into nursing and midwifery

The transformative potential of the workforce to provide culturally responsive and effective care across a broad range of health roles is fully recognised by NAATSIHWP. We remain committed to ensuring the workforce are supported in their professional development journeys by having the opportunity to obtain further qualifications in a variety of other careers in the Aboriginal and Torres Strait Islander health sector.

This year, NAATSIHWP commenced work in partnership with other key stakeholders, including the Congress of Aboriginal and Torres Strait Islander Nurses and Midwives (CATSINaM) and the Australian Nursing and Midwifery Accreditation Council, to develop a nationally consistent career pathway in nursing and midwifery for Aboriginal and Torres Strait Islander Health Practitioners.

The project responds to key areas of actions identified in the Workforce Plan 2021-2031 and recommendations from the CATSINaM 'gettin em n keepin em n growin em' (GENKE II) report.

Through this project, the NAATSIHWP team conducted a comprehensive review of the core units, practicum hours and course duration of the Certificate IV in Aboriginal and/or Torres Strait Islander Primary Health Care Practice and Diploma of Nursing. The review identified several similarities and duplications between both qualifications, indicating that Aboriginal and/or Torres Strait Islander Health Practitioners with a Certificate IV in Aboriginal and/or Torres Strait Islander Primary Health Care Practice who choose to undertake further study into nursing and midwifery, have completed part of the requirements for an accredited qualification in nursing.

With this project continuing into the next financial year, we look forward to working with key stakeholders to advocate for a nationally agreed and consistent career pathway in nursing through recognition of prior learning.

Award fact sheet

NAATSIHWP recognises the critical importance of ensuring that Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners, and their employers, have up-to-date and accessible information about their workplace entitlements.

The Award Factsheet is a NAATSIHWP resource which outlines how job titles and qualifications correspond to minimum pay rates for all Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners working in private practice and community control. It highlights common entitlements such as overtime, travelling allowances and ceremonial leave. Through knowledge-sharing initiatives such as this, we endeavour to equip workplaces with the tools they need to effective employ Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners.

This resource is updated annually to reflect changes to the Aboriginal and/or Torres Strait Islander Health Workers and Practitioners and Aboriginal Community Controlled Health Services Award [MA000115], in order to continue to empower workforce and support their workplaces.

WORKFORCE SPOTLIGHT

Role Model for our Next Generation of Health Workers and Health Practitioners

Decovan Lane is a Gunanjudi man who grew up in the south side of Broome, and has been there for a majority of his life. As an Aboriginal Health Practitioner at the Broome Regional Aboriginal Medical Service (BRAMS), he finds joy in yarning with mob, building their confidence to speak to doctors, triaging and screening patients at the BRAMS medical clinic, and improving his community's overall engagement with the health system.

I started off as a casual driver at BRAMS, and when the opening came up for an Aboriginal Health Worker Trainee role, I was initially hesitant to start studying but I am so glad I did. After a few weeks of shadowing, I saw that this profession was a good way to help people in the community and be a good role model for mob. Rather than chasing money in other jobs, I chose to pick a career path which makes a difference in my community.

Yes money is good, but actually making an impact on people's lives and putting a smile on people's faces is more important to me. We're trying to give the best education to help people live healthier lives. If we're not living healthier lives, money is worthless.

The more I learnt through my studies, the more motivated I became to pursue my passion to help people live healthier lives through working in health at BRAMS.

After completing my Certificate III at Kimberley Aboriginal Medical Services, I went onto study my Certificate IV and became an Aboriginal Health Practitioner in 2022. Studying was daunting and there were challenging times, but the support I had from my colleagues and teaching staff got me through it, and being in a traineeship meant I could support myself while completing my studies.

And within a year of graduating, I was awarded BRAMS Employee of the Year in 2023. It was really nice to have that recognition but I'm not in this work for awards, I just want to make sure people live the best lives they can live – live good quality lives.

It's so rewarding to go out in community and have people wanting to yarn, they comment on how we make them feel more confident about engaging with our health service. Nurses and doctors come and go but the Aboriginal Health Workers and Health Practitioners stay within community. We yarn to patients, listen to their stories and make them feel comfortable and supported when seeing the doctors which improves their engagement with our services.

My community and a few young kids have told me that they want to follow in my footsteps, whether it's from sports or my work as an Aboriginal Health Worker. That is a reward in itself.

When we go out to the schools and explain what we do as Aboriginal Health Workers and Health Practitioners to Year 11 and 12 students, we are showing them, especially our young men, that there are is a rewarding pathway in being an Aboriginal Health Worker or Health Practitioner. At our school expos we are breaking the stigma around the health professions to assure our young boys in particular. We encourage them to consider careers in the health sector and to look beyond mining or labour jobs. We get to travel and getting that Certificate IV qualification is a big steppingstone to other career options. Even if you just do the course… getting that ticket and qualification under your belt opens up so many opportunities – and you'll have something to always fall back on.

Even now I'm looking into specialisation areas, either in emergency practice so community can be reassured by seeing a familiar face in times of crisis, or mental health so I can help address an area which has had an impact on my family and community. I look forward to building my clinical knowledge over the next few years as an Aboriginal Health Practitioner and would like to take up a management or leadership role in future.

My manager Delia Lawford and my team leader William Michael are both Aboriginal Health Practitioners as well, and they have been a big influence in my professional journey. They give me a listening ear and constructive feedback for me to learn and grow from. We have a real good team where we're not getting bossed around, but we work as a team, we all have the same goal. My parents have also played a big part in my journey, and they got me where I am – I thank them for always motivating me to be the best version of myself.

Governance and operations

As an Aboriginal and/or Torres Strait Islander national peak health organisation, NAATSIHWP is led and managed by Aboriginal and/or Torres Strait Islander people. Our Board consists of representatives from each state and territory, as well as the Torres Strait Islands/Northern Peninsula Area, who have experienced training and working as an Aboriginal and/or Torres Strait Islander Health Worker or Health Practitioner. Each Board member has extensive experience in primary healthcare and play a critical role in NAATSIHWP's decision making process, bringing unique insights and considerations from their jurisdiction.

NAATSIHWP Board

David Follent
Chairperson
New South Wales

Judith Parnham
Deputy Chair
Queensland

Suzanne Smith
Secretary
Tasmania

Antoinette Liddell
Treasurer
South Australia

Dawn Daly
Director
Northern Territory

Skyan Fernando
Director
Australian Capital Territory

Richelle Johnson
Director
Victoria

Yancy Laifoo
Director
Torres Strait Island/Northern Peninsula

Raeylene McKenna
Director
Western Australia

Left to right: Yancy Laifoo, Skyan Fernando, Raeylene Mckenna, Judith Parnham, Antoinette Liddle, Suzanne Smith, David Follent, Richelle Johnson, Karl Briscoe, Dawn Daly

Board update

The NAATSIHWP Board is committed to solidifying the role of NAATSIHWP as a national lead in the Aboriginal and Torres Strait Islander health sector by empowering the Aboriginal and/or Torres Strait Islander Health Practitioner and Health Worker professions. Over the past seven years, Board members have participated in annual governance and finance training, strengthening their practical decision-making, financial management skills, and strategic leadership. The Board continues to demonstrate progress and growth through the organisation.

This year, Dawn Daly and Skyan Fernando were welcomed to the Board as the representatives for the Northern Territory and Australian Capital Territory respectively.

With connections to the Dalabon language group at Weemol in the Nyirranggulung Ward on her mother's side, and to the Ngengiwumirri language group in the upper Daly region on her father's side, Dawn started her health career in 1987 at Nauiyu Nambiyu Community Health Centre. She went on to becoming the 203rd registered Aboriginal Health Worker in the Northern Territory and was the first Aboriginal and/or Torres Strait Islander Health Practitioner to register under the National Registration and Accreditation Scheme.

Skyan is a proud Gomeroi/Ngunnawal woman who lives and works in the Canberra/Queanbeyan area. With over 10 years of experience as an Aboriginal Health Worker, she has also undertaken further studies to become an Aboriginal Health Practitioner and recently completed a Graduate Diploma in Social and Emotional Well-being.

Both Dawn and Skyan are dedicated to improving Aboriginal and Torres Strait Islander health and wellbeing outcomes. We are grateful for their insights and expertise as members of the NAATSIHWP Board and look forward to working with them in the upcoming financial year.

International certification

In 2022, NAATSIHWP achieved ISO9001 certification, an internationally recognised standard for quality management systems. This certification demonstrates the organisation's commitment to continuous improvement and excellence in quality management. We are pleased to announce that we have successfully maintained ISO9001 across the financial year 2023–24 which involved refining our processes and quality management system, as well as conducting regular audits. This certification demonstrates to our partners, stakeholders and clients that NAATSIHWP is maintaining our delivery of high-quality products and services.

Consultancy

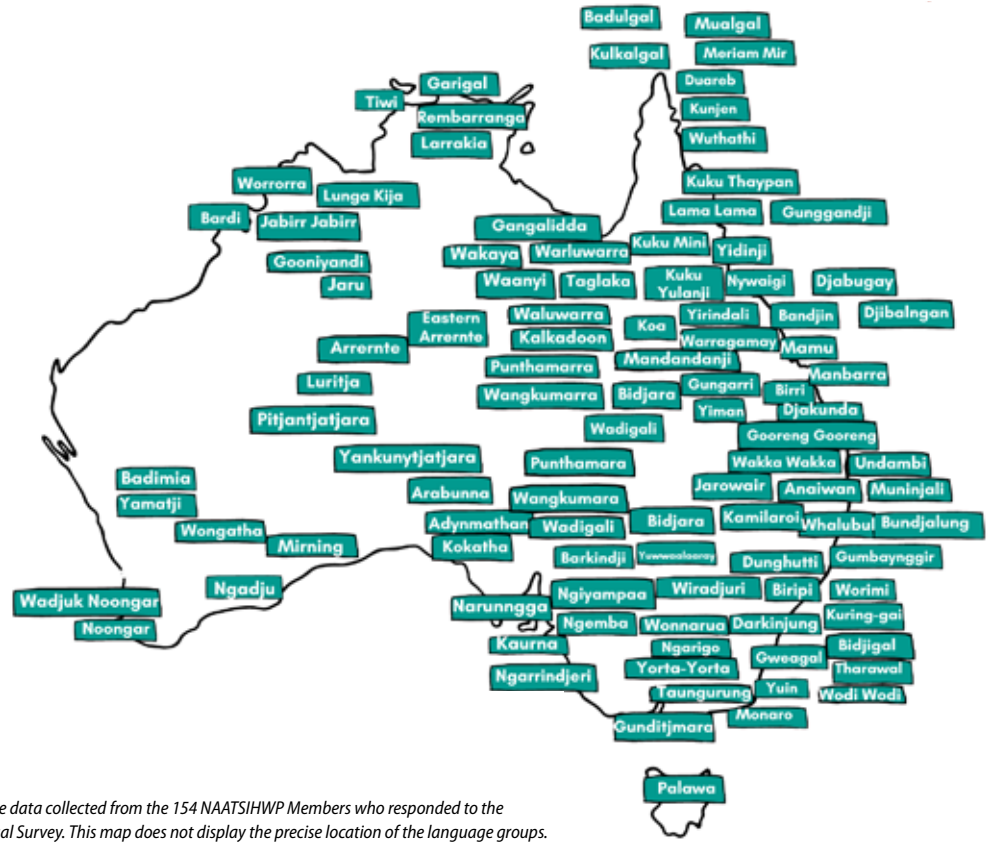
Our consultancy business has continued to grow over 2023–24, and we are now actively work with a range of organisations.

NAATSIHWP Consulting provides greater agency and self-reliance for the organisation, and has enabled us to leverage our specialised expertise, knowledge and industry insights to help drive reform and transformational change for Aboriginal and Torres Strait Islander people. We offer targeted advisory services to those looking to grow and embed the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce and provide advice to help address challenges that the workforce may be facing.

As a charity and not-for-profit organisation, all profits generated through NAATSIHWP Consultancy are reinvested to support and strengthen the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce. We welcome the opportunity to collaborate with diverse stakeholders and encourage you to reach out if you are looking to better understand the roles, skills, and training of the workforce, improve recruitment and retention, enhance career pathways, or implement Aboriginal and Torres Strait Islander-led models of care. If you would like further information, please contact us via email at: info@naatsihwp.org.au.

Annual survey

Each year, we encourage our Full and Student members to provide their feedback so that we are able to better understand their demographics as well as professional experiences, priorities and concerns. This year, we were pleased to see the highest response rate yet to the annual survey, with results gathered from the survey being used to inform our strategic direction, governance and operational decisions.



This map is based on the data collected from the 154 NAATSIHWP Members who responded to the NAATSIHWP 2023 Annual Survey. This map does not display the precise location of the language groups.

Key findings

Scope of Practice

Aligning with the understanding from a previous Gap Analysis, only 48% of respondents were satisfied or highly satisfied with their scope of practice, with a majority stating that they worked to a scope of practice determined by their workplace as opposed to jurisdictional standards. Additionally, 68% of Aboriginal and Torres Strait Islander Health Practitioners were not permitted to administer medicines and vaccinations in their role despite being trained to do so.

Whilst these responses are alarming, it demonstrates the alignment of current NAATSIHWP activities to the priorities of our members, as well as the significant effect that achieving national standardisation of scopes of practice, and the harmonisation of medicine authorities will have for our workforce.

Role satisfaction

It is evident that the workforce scopes of practice significantly impact on job satisfaction, with a significant proportion of respondents considering their role was undervalued. When asked to identify barriers to success in their role, the most common answer was 'limited opportunities to use their skillset'.

In contrast, when asked to reflect on the enablers for success in their role, the most common factor reported was 'support received from managers', closely followed by their 'cultural strengths being valued' and 'opportunities for training and education'.

Alongside our work to establish nationally consistent scopes of practice, NAATSIHWP is well placed to influence culture within workplace settings. The introduction of our supervisor training this year has provided a platform for managers to be equipped with

the with resources and direction to more holistically support the professional needs of their Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners, alleviating the workforce's responsibility in having to advocate for themselves.

NAATSIHWP Engagement

Overall, the survey responses demonstrated a high level of satisfaction with NAATSIHWP activities, with:

> 82% of respondents satisfied with how we represent the workforce

> 76% satisfied with our professional support and development

> 88% being aware of the services we provide.

We are grateful to all respondents for taking the time to provide their valuable feedback. The Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner roles were established by our communities, for our communities, and we remain committed to aligning our activities to the professional needs of the workforce. Together, we aim to uplift the health and wellbeing outcomes of Aboriginal and Torres Strait Islander peoples.

Annual Survey: At a Glance

Demographics

> **154** complete responses

> **71** nations, language groups or mobs, provided care in over **112** locations across Australia

> **79%** of respondents identified as female ,over **40%** were aged over fifty

> **52%** worked in government hospitals and health services

> **39%** worked in ATISCCHOs or Aboriginal Medical Services

Profession

> **29%** were Aboriginal and/or Torres Strait Islander Health Workers

> **63%** were Aboriginal and/or Torres Strait Islander Health Practitioners

> **8%** were students

Studies and Education

> **25%** were currently engaged in further study through a diverse range of RTOs and universities

> Majority of respondents finished their highest-level qualification within **12–18 months**

> Only **26%** of respondents applied or received financial support to complete their studies

> **22%** want to study further to become an enrolled or registered nurse

> **13%** want to study further to become an allied health professional

> **32%** want to participate in a leadership and/or management course

Role in the Workplace

> **54%** of respondents worked as a generalist Health Worker or Health Practitioner

> **46%** of respondents worked in a specialist area or had a specialisation

Scope of Practice

> **56%** of respondents worked to a scope of practice determined by their workplace,

> **24%** worked to state or territory scope of practice,

> **5%** negotiated an individual scope of practice using the NAATSIHWP guide

> **13%** indicated they were not working to a scope of practice, and **5%** said other

Administering Medicines

> **68%** of Aboriginal and Torres Strait Islander Health Practitioners did not handle vaccines or medicines

> **20%** administered medicines and vaccines, **7%** only administer medicines, and 5% only administer vaccines.

Medicare Provider Number

> **54%** had an MPN

> **46%** did not have an MPN

> **63%** of those who had an MPN were providing Medicare Benefits Schedule Services

The future

As the NAATSIHWP team reflects on the achievement of the past year, we remain optimistic about our future. The foundation we have built through innovation, collaboration, and commitment to our core values positions us well to navigate the evolving landscape of our sector.

We remain committed to advancing the recognition of the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner professions whilst being guided by the contributions and voices of our members and our workforce. Our ongoing work in ensuring that the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce is embedded safely as a vital, valued and professional component of Australia's healthcare system will always be underpinned by our commitment to ensure that healthcare services, workplaces, and educational institutions effectively meet the needs of and empower Aboriginal and Torres Strait Islander peoples.

We will continue to uphold our role in the implementation of the Workforce Plan 2021–2031 through the delivery our project to achieve greater national consistence for the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce. Following its completion in late 2024, we will continue to work with federal, state and territory governments to ensure all Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners are supported to work to a nationally consistent minimum scope of practice.

This year we significantly expanded the range of professional development opportunities offered to our workforce, with the success of our inaugural 2024 NAATSIHWP Leadership Masterclass. We are excited to embed this professional development opportunity as a key element of NAATSIHWP's operations. Alongside strengthening our existing involvements and professional development opportunities for our members, we look to building the capabilities of our future generations through the community-controlled administration of the Puggy Hunter Memorial Scholarship Scheme

As a leading Aboriginal and Torres Strait Islander national peak health body that operates across various sectors, we will continue to grow our voice and leadership across Aboriginal and Torres Strait Islander health policy, programs and practice. We are committed to raising awareness on the critical role Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners play in improving health and wellbeing outcomes. By working with our Indigenous brothers and sister around the world, we look forward to supporting the expansion of Indigenous led models of care and rights-based approaches.

As we move forward, we remain dedicated to our mission and vision, with a clear focus on growing our economic agency and self-reliance. We are optimistic that the work delivered by our consultancy wing and the bolstering of our charity arm in the year ahead will only further strengthen the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce.

We recognise that our success depends not only on our efforts but also on our stakeholders – employees, customers, partners, and the communities we serve. With your continued support, we are excited to continue this journey toward a brighter, more prosperous future.

Thank you for being part of our story.

National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners

ABN 61 138 748 697

Financial statements 2023–24

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NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH WORKERS AND PRACTITIONERS LIMITED
ABN 61 138 748 697

DIRECTORS' REPORT

Your directors present their report on the company for the financial year ended 30 June 2024

DIRECTORS

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

David Follent (Chair)	re-elected 16 November 2023
Judith Parnham (Deputy Chair)	
Antoinette Liddell (Treasurer)	
Yancy Laifoo	
Richelle Jackson	
Raeylene McKenna	
Suzanne Smith	
Harold Koops	casual resigned 27 September 2023
Dawn Daly	elected 16 November 2023
Skyan Fernando	elected 16 November 2023

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

OBJECTIVES

Objective 1: To increase recognition and use of the full range of skills and integration of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners into health services across all health sectors and jurisdictions.

Objective 2: To enhance the accessibility and quality of professional support, leadership and workforce development opportunities for our workforce.

Objective 3: To extend our leadership and advocacy across Aboriginal and Torres Strait Islander health policy, programs and practice relevant to our workforce.

Objective 4: To increase our influence in the development and implementation of effective workforce recruitment, retention and career pathway strategies for our workforce.

IMPACT INDICATORS FOR THE OBJECTIVES

Objective1:
Stakeholders from all sectors of the health system demonstrate:

- recognition of Aboriginal and/or Torres Strait Islander Health Workers' and Health Practitioners' full scope of practice
- support for and utilisation of Aboriginal and/or Torres Strait Islander Health Workers' and Health Practitioners' full range of skills in their work roles
- consistency in practice across jurisdictions.

NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH WORKERS AND PRACTITIONERS LIMITED
ABN 61 138 748 697

DIRECTORS' REPORT (CONTINUED)

Objective 2:
Members report that NAATSIHWP's range of professional support, leadership and workforce development options are:

- relevant to their professional needs and expectations
- high quality
- offered in accessible formats and/or locations
- valuable for skill development and pursuing new career pathways.

Objective 3:
NAATSIHWP's leadership and advocacy is influential in shaping better Aboriginal and Torres Strait Islander health policy, programs and practice at national and state levels.

Objective 4:
Stakeholders from the VET and health sectors report:

- NAATSIHWP is a respected source of expertise and support for recruitment, retention and career pathways for Aboriginal and/or Torres Strait Islander Health Workers and Practitioners
- they implemented NAATSIHWP's expert advice on recruitment, retention and career pathway strategies.

Principal Activity
The principal activity of the company during the financial year was to improve recruitment and retention of the workforce, scope and effective deployment of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners, as a vital and valued component of a strong professional Aboriginal and Torres Strait Islander health workforce needed to close the gap in health outcomes for Aboriginal and Torres Strait Islander Australians.

Effective 1 July 2020 the company was endorsed as a Health Promotion Charity with the following tax concessions: GST Concession, Income Tax Exemption and FBT Exemption. The Company has Deductible Gift (DGR) Recipient Status. As a consequence, the financial statements now must be prepared as required by the ACNC Act and ACNC Regulations and in accordance with the Australian Accounting Standards set by the Australian Accounting Standards Board (AASB)

On 22 October 2020, The Company changed its name from "National Aboriginal and Torres Strait Islander Health Workers Association" to "National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners Ltd".

NAATSIHWP is a party to a three year funding agreement with the Department of Health and Aged Care for the period 1 July 2023 to 30 June 2026. Under this agreement, NAATSIHWP has received funding of $2,205,900 (excl GST) to 30 June 2024. Grant expenditure was $2,328,500 to 30 June 2024.

NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH WORKERS AND PRACTITIONERS LIMITED
ABN 61 138 748 697

DIRECTORS' REPORT (CONTINUED)

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MEETINGS OF DIRECTORS

	DIRECTORS' MEETINGS	
DIRECTORS	**Number eligible to attend**	**Number attended**
David Follent (Chair) (re-elected 16 November 2023)	4	4
Judith Parnham (Deputy Chair)	4	3
Antoinette Liddell (Treasurer)	4	4
Yancy Laifoo	4	2
Richelle Jackson	4	3
Raeylene McKenna	4	4
Suzanne Smith	4	4
Dawn Daly (commenced 16 November 2023)	2	2
Harold Koops (casual until 27 September 2023)	2	0
Skyan Fernando (commenced 16 November 2023)	2	2

CONTRIBUTIONS ON WIND UP

The company is incorporated under the Corporations Act 2001 and is a company limited by guarantee. If the company is wound up, subject to provisions in the constitution each member maybe required to make a maximum contribution of $10.00 towards meeting any outstanding obligations. At 30 June 2024, the total maximum amount that members of the company maybe liable to contribute if the company is wound up is $13,310 (2023: $11,690).

The maximum amount that members of the company are liable to contribute if the company is wound up is now calculated for Full Members only.

NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH WORKERS AND PRACTITIONERS LIMITED
ABN 61 138 748 697

DIRECTORS' REPORT (CONTINUED)

A copy of the auditor's independence declaration as required under the *Australian Charities and Not-for-profits Commission Act 2012* is set out on page 9.

David Follent

Chairperson ..... Dated this 02 day of August 2024

Antoinette Liddell

Treasurer ..... Dated this 02 day of August 2024

RSM Australia Partners

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INDEPENDENT AUDITOR'S REPORT
To the Members of National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners Limited

Opinion

We have audited the financial report of National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners Limited (the Company), which comprises the statement of financial position as at 30 June 2024, the statement of comprehensive income, the statement of changes in equity and the statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies, and the directors' declaration.

In our opinion, the accompanying financial report of the Company has been prepared in accordance with Division 60 of the *Australian Charities and Not-for-profits Commission Act 2012*, including:

(i) giving a true and fair view of the Company's financial position as at 30 June 2024 and of its financial performance and cash flows for the year ended on that date; and

(ii) complying with Australian Accounting Standards – Simplified Disclosures and Interpretations issued by the Australian Accounting Standards Board ('AASB') and the *Australian Charities and Not-for-profits Commission Regulation* 2013.

Basis for Opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Report* section of our report. We are independent of the Company in accordance with the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 *Code of Ethics for Professional Accountants* (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

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

Other Information

The directors are responsible for the other information. The other information comprises the information included in the Company's annual report for the year ended 30 June 2024, but does not include the financial report and the auditor's report thereon.

Our opinion on the financial report does not cover the other information and accordingly we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial report, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial report or our knowledge obtained in the audit or otherwise appears to be materially misstated.

If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

Responsibilities of the Directors for the Financial Report
The directors of the Company are responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards – Simplified Disclosures and the Australian Charities and Not-for-profits Commission Act 2012 and for such internal control as the directors determine is necessary to enable the preparation of the financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error.

In preparing the financial report, the directors are responsible for assessing the ability of the Company to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the directors either intend to liquidate the Company or to cease operations, or have no realistic alternative but to do so.

Auditor's Responsibilities for the Audit of the Financial Report
Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with the Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this financial report.

A further description of our responsibilities for the audit of the financial report is located at the Auditing and Assurance Standards Board website at: http://www.auasb.gov.au/auditors_responsibilities/ar4.pdf. This description forms part of our auditor's report.

RSM

RSM AUSTRALIA PARTNERS

GED STENHOUSE
Partner

Canberra, Australian Capital Territory
Dated: 5 August 2024

RSM Australia Partners

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AUDITOR'S INDEPENDENCE DECLARATION

As lead auditor for the audit of the financial report of National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners Limited for the year ended 30 June 2024, I declare that, to the best of my knowledge and belief, there have been no contraventions of:

(i) the auditor independence requirements of the *Australian Charities and Not-for-profit Act 2012* in relation to the audit; and

(ii) any applicable code of professional conduct in relation to the audit.

RSM

RSM AUSTRALIA PARTNERS

Canberra, Australian Capital Territory
Dated: 5 August 2024

GED STENHOUSE
Partner

NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH WORKERS AND PRACTITIONERS LIMITED
ABN 61 138 748 697

DIRECTORS DECLARATION

In the director's opinion:

1. the attached financial statements and notes comply with the Australian Accounting Standards - Simplified Disclosures and Interpretations issued by the Australian Accounting Standard Board ('AASB') and the *Australian Charities and Not for Profits Commission Act 2012*;
2. the attached financial statements and notes give a true and fair view of the company's financial position as at 30 June 2024 and of its performance for the financial year ended on that date; and
3. there are reasonable grounds to believe that the company will be able to pay its debts as and when they become due and payable.

On behalf of the directors

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

Chair:.....

David Follent

Dated this……02……..day of ..... August 2024

Treasurer:.....

Antoinette Liddell

Dated this……02……..day of ..... August 2024

NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH WORKERS AND PRACTITIONERS LIMITED
ABN 61 138 748 697

STATEMENT OF COMPREHENSIVE INCOME
FOR THE YEAR ENDED 30 JUNE 2024

	Note	2024 $	2023 $
Revenue			
Grant funding	**2**	2,205,900	2,347,400
Other Income			
Interest	**2**	17,775	6,251
Sundry income	**2**	883,271	713,222
Merchandise	**2**	10,722	21,075
Total Revenue		**3,117,668**	**3,087,948**
Expenses			
Administration	**3**	(366,854)	(364,551)
Employee expenses	**3**	(1,712,759)	(1,555,116)
Governance	**3**	(162,678)	(262,758)
Members Support	**3**	(783,673)	(709,631)
Total Expenses		**(3,025,964)**	**(2,892,056)**
CURRENT YEAR SURPLUS		**91,704**	**195,892**
OTHER COMPREHENSIVE INCOME		-	-
TOTAL COMPREHENSIVE INCOME		**91,704**	**195,892**

The accompanying notes form part of this financial report.

NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH WORKERS AND PRACTITIONERS LIMITED
ABN 61 138 748 697

STATEMENT OF FINANCIAL POSITION
AS AT 30 JUNE 2024

	Note	2024 $	2023 $
CURRENT ASSETS			
Cash and cash equivalents	12a	1,605,268	1,508,941
Investment	12a	406,000	-
Trade and other receivables	4	70,954	27,155
Prepayments		146,011	68,531
Inventories	5	42,248	16,486
TOTAL CURRENT ASSETS		**2,270,481**	**1,621,113**
NON-CURRENT ASSETS			
Property, plant and equipment	6	128,380	104,303
Right of use assets	7	159,322	229,163
TOTAL NON-CURRENT ASSETS		**287,702**	**333,466**
TOTAL ASSETS		**2,558,183**	**1,954,579**
CURRENT LIABILITIES			
Trade and other payables	8	306,750	232,542
Lease liabilities	9	49,280	50,798
Deferred revenue	11	817,680	390,424
Provisions	10	264,832	190,631
TOTAL CURRENT LIABILITIES		**1,438,542**	**864,395**
NON-CURRENT LIABILITIES			
Lease liabilities	9	111,244	165,567
Provisions	10	61,310	69,234
TOTAL NON-CURRENT LIABILITIES		**172,554**	**234,801**
TOTAL LIABILITIES		**1,611,096**	**1,099,196**
NET ASSETS		**947,087**	**855,383**
EQUITY			
Retained earnings		855,383	659,491
Current year earnings		91,704	195,892
TOTAL EQUITY		**947,087**	**855,383**

The accompanying notes form part of this financial report.

NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH WORKERS AND PRACTITIONERS LIMITED
ABN 61 138 748 697

STATEMENT OF CHANGES IN EQUITY
FOR THE YEAR ENDED 30 JUNE 2024

	Retained Earnings	Total
	$	$
Balance at 1 July 2022	**659,491**	**659,491**
Surplus from operations	195,892	195,892
Balance at 30 June 2023	**855,383**	**855,383**
Surplus from operations	91,704	91,704
Balance at 30 June 2024	**947,087**	**947,087**

The accompanying notes form part of this financial report.

NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH WORKERS AND PRACTITIONERS LIMITED
ABN 61 138 748 697

STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED 30 JUNE 2024

	Note	2024 $	2023 $
CASH FLOWS FROM OPERATING ACTIVITIES			
Government grants received		2,809,947	2,769,731
Sale of merchandise		11,794	23,183
Sundry receipts		971,598	784,544
Interest received		4,260	6,251
Payments to suppliers and employees		(3,142,859)	(2,782,873)
Interest paid		(12,336)	(15,349)
Net cash provided by operating activities	12b	**642,404**	**785,487**
CASH FLOWS FROM INVESTING ACTIVITIES			
Fixed asset purchases		(94,060)	(94,955)
Net cash used in investing activities		**(94,060)**	**(94,955)**
CASH FLOWS FROM FINANCING ACTIVITIES			
Lease repayments		(59,532)	(65,534)
Interest received on term deposits		13,515	-
Net cash used in financing activities		**(46,017)**	**(65,534)**
Net increase in cash held		502,327	624,998
Cash and cash equivalents at beginning of year		1,508,941	883,943
Cash and cash equivalents at end of year	12a	**2,011,268**	**1,508,941**

The accompanying notes form part of this financial report.

NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH WORKERS AND PRACTITIONERS LIMITED
ABN 61 138 748 697

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2024

NOTE 1: SIGNIFICANT ACCOUNTING POLICIES

The principal accounting policies adopted in the preparation of the financial statements are set out below. These policies have been consistently applied to all the years presented, unless otherwise stated.

New or amended Accounting Standards and Interpretations adopted
National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners Limited ('NAATSIHWP' or 'the company') has adopted all of the new or amended Accounting Standards and Interpretations issued by the Australian Accounting Standards Board ('AASB') that are mandatory for the current reporting period.

Any new or amended Accounting Standards or Interpretations that are not yet mandatory have not been early adopted.

Basis of preparation
These general purpose financial statements have been prepared in accordance with the Australian Accounting Standards - Simplified Disclosures issued by the Australian Accounting Standards Board ('AASB'), the Australian Charities and Not-for-profits Commission Act 2012 and associated regulations, as appropriate for not-for-profit oriented entities.

Historical cost convention
The financial statements have been prepared under the historical cost convention.

Revenue Recognition

Grant revenue
Grant funding that contains specific conditions and enforceable obligations on the use of those funds are recognised per AASB 15, such that income is recognised as and when the Company satisfies its performance obligations stated within the funding agreements. For such grants it is the policy of the Company to treat grant monies as contract liabilities in the statement of financial position where the Company is contractually obliged to provide the services in a subsequent financial period to when the grant is received or in the case of specific project grants where the project has not been completed. General grants that do not impose specific performance obligations on the Company are recognised as per AASB 1058 where income is recognised when the Company obtains control of those funds, which is usually on receipt.

Interest
Interest revenue is recognised as interest accrues using the effective interest method.

Other revenue
Other revenue is recognised when it is received or when the right to receive payment is established.

Income Tax
As the company is a charitable institution in terms of subsection 50-5 of the Income Tax Assessment Act 1997, as amended, it is exempt from paying income tax.

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

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

NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH WORKERS AND PRACTITIONERS LIMITED
ABN 61 138 748 697

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2024

NOTE 1: SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Current and non-current classification (continued)

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

Deferred tax assets and liabilities are always classified as non-current.

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

Plant and Equipment
Plant and equipment is measured on the cost basis and is therefore carried at cost less accumulated depreciation and any accumulated impairment losses. In the event the carrying amount of plant and equipment is greater than its estimated recoverable amount, the carrying amount is written down immediately to its estimated recoverable amount.

Subsequent costs are included in the asset's carrying amount or recognised as a separate asset, as appropriate, only when it is probable that future economic benefits associated with the item will flow to the company and the cost of the item can be measured reliably. All other repairs and maintenance are recognised in profit or loss during the financial period in which they are incurred.

Depreciation
Depreciation of computer equipment assets is calculated on a diminishing value basis over the asset's useful life. Depreciation of other fixed assets is calculated on a straight-line basis to write off the net cost of each asset. The depreciation rates used for each class of depreciable asset are:

Class of plant and equipment	***Depreciation Rate***
Fixtures & Fittings	10-25%
Office Equipment	10-25%
Computer Equipment	33-50%

The assets' residual values and useful lives are reviewed and adjusted, if appropriate, at the end of each reporting period.

An item of property, plant and equipment is derecognised upon disposal or when there is no future economic benefit to the company. Gains and losses between the carrying amount and the disposal proceeds are taken to profit or loss.

Impairment of non-financial assets
At the end of each reporting period, the company assesses whether there is any indication that an asset may be impaired. The assessment will consider both external and internal sources of information. If such an indication exists, an impairment test is carried out on the asset by comparing the recoverable amount of that asset, being the higher of the asset's fair value less costs to sell and its value-in-use, to the asset's carrying amount. Any excess of the asset's carrying amount over its recoverable amount is immediately recognised in profit or loss.

NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH WORKERS AND PRACTITIONERS LIMITED
ABN 61 138 748 697

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2024

NOTE 1: SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Cash and Cash Equivalents
Cash and cash equivalents includes cash on hand, deposits held at call with financial institutions, other short-term, highly liquid investments with original maturities of three months or less that are readily convertible to known amounts of cash and which are subject to an insignificant risk of changes in value.

Trade and other receivables
Trade and other receivables are recognised at amortised cost, less any allowance for expected credit losses. Trade receivables are generally due for settlement within 30 days.

The company has applied the simplified approach to measuring expected credit losses, which uses a lifetime expected loss allowance. To measure the expected credit losses, trade receivables have been grouped based on days overdue.

Inventories
Inventory is stated at the lower of cost and net realisable value.

Stock in transit is stated at the lower of cost and net realisable value. Cost comprises of purchase and delivery costs, net of rebates and discounts received or receivable.

Net realisable value is the estimated selling price in the ordinary course of business the estimated costs necessary to make the sale.

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

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

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

Defined contribution superannuation expense
Contributions to defined contribution superannuation plans are expensed in the period in which they are incurred.

NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH WORKERS AND PRACTITIONERS LIMITED
ABN 61 138 748 697

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2024

NOTE 1: SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

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

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

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

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

	2024 $	2023 $
NOTE 2: REVENUE		
Operating activities		
Department of Health and Aged Care (DHAC) funding	2,205,900	2,347,400
Total operating activities	**2,205,900**	**2,347,400**
Interest received	17,775	6,251
Sundry income	883,271	713,222
Merchandise income	10,722	21,075
Total revenue	**3,117,668**	**3,087,948**

NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH WORKERS AND PRACTITIONERS LIMITED
ABN 61 138 748 697

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2024

	2024 $	2023 $
NOTE 3: PROFIT FROM OPERATIONS		
Profit from ordinary activities before income tax expenses has been determined after:		
Expenses:		
Administration and related		
- Merchandise related	58,693	45,544
- Depreciation and amortisation of property, plant and equipment	130,000	116,579
- Accommodation and office (including IT and Training)	172,966	197,608
- Leasing related expenses	5,195	4,820
	366,854	364,551
Employee benefits		
- Administration	528,825	366,534
- Program	1,183,934	1,188,582
	1,712,759	1,555,116
Governance and related		
- Training	8,337	23,763
- Board meeting travel	79,600	182,112
- Insurance	24,788	19,220
- Legal	600	8,402
- Audit	20,620	20,200
- Others	28,733	9,061
	162,678	262,758
Member support and related (including cost of forums representation and support of members)		
- General program	396,321	318,191
- Marketing	25,541	62,166
- Consulting	141,372	43,587
- Travel related	220,439	285,687
	783,673	709,631
Total expenses	**3,025,964**	**2,892,056**

	2024 $	2023 $
NOTE 4: TRADE AND OTHER RECEIVABLES		
Trade debtors	28,710	11,312
GST receivable	25,801	-
Cab charge bond	200	200
Rental bond	16,243	15,643
	70,954	**27,155**

NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH WORKERS AND PRACTITIONERS LIMITED
ABN 61 138 748 697

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2024

	2024 $	2023 $
NOTE 5: INVENTORIES		
Merchandises	42,248	16,486
	42,248	**16,486**

	2024 $	2023 $
NOTE 6: PROPERTY, PLANT AND EQUIPMENT		
Fixtures and fittings – at cost	71,972	71,189
Less accumulated depreciation	(66,386)	(64,166)
	5,586	**7,023**
Computer equipment – at cost	260,098	208,792
Less accumulated depreciation	(171,838)	(114,155)
	88,260	**94,637**
Office equipment – at cost	26,890	26,890
Less accumulated depreciation	(25,841)	(24,247)
	1,049	**2,643**
Motor Vehicle - at cost	35,455	-
Less: accumulated depreciation	(1,970)	-
	33,485	**-**
	128,380	**104,303**

Movements in carrying amounts

Movement in the carrying amounts for each class of property, plant and equipment between the beginning and the end of the current financial year.

	Fixtures and Fittings	Office Equipment	Computer Equipment	Motor Vehicle	Total
	$	$	$	$	$
Balance at 1 July 2022	**9,484**	**7,791**	**49,368**	**-**	**66,643**
Additions	5,455	-	89,500	-	94,955
Depreciation expense	(7,916)	(5,148)	(44,231)	-	(57,295)
Balance at 30 June 2023	**7,023**	**2,643**	**94,637**	**-**	**104,303**
Additions	1,496	-	57,109	35,455	94,060
Disposals	-	-	(504)	-	(504)
Depreciation expense	(2,933)	(1,594)	(62,982)	(1,970)	(69,479)
Balance at 30 June 2024	**5,586**	**1,049**	**88,260**	**33,485**	**128,380**

NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH WORKERS AND PRACTITIONERS LIMITED
ABN 61 138 748 697

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2024

NOTE 7: RIGHT OF USE ASSETS

	2024 $	2023 $
Right of use assets – at cost	265,536	314,056
Less accumulated amortisation	(106,214)	(84,893)
	159,322	**229,163**

	$
Balance at 1 July 2023	**229,163**
Disposals	(9,321)
Amortisation expense	(60,520)
Balance at 30 June 2024	**159,322**

NOTE 8: TRADE AND OTHER PAYABLES

	2024 $	2023 $
Trade creditors	81,135	17,059
Accruals	11,341	10,313
Other payables	214,274	205,170
	306,750	**232,542**

NOTE 9: LEASE LIABILITIES

	2024 $	2023 $
Current	49,280	50,798
Non-current	111,244	165,567
	160,524	**216,365**

Lease liabilities relate to the lease of office space, office equipment and a motor vehicle.

NOTE 10: PROVISIONS

	2024 $	2023 $
Employee benefits		
Annual Leave (current)	236,209	171,647
Long Service Leave (current)	9,639	-
Long Service Leave (non-current)	61,310	69,234
	307,158	**240,881**
Lease		
Make-good	18,984	18,984
Total provisions	**326,142**	**259,865**

NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH WORKERS AND PRACTITIONERS LIMITED
ABN 61 138 748 697

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2024

	2024 $	2023 $
NOTE 11: DEFERRED REVENUE		
National Symposium	138,022	18,182
Grants received in advance	679,658	372,242
	817,680	**390,424**

	2024 $	2023 $
NOTE 12: CASH FLOW INFORMATION		
a. Reconciliation of cash		
Cash on hand	600	600
Cash at bank	1,604,668	1,508,341
Investment in term deposit	406,000	-
	2,011,268	**1,508,941**

	2024 $	2023 $
b. Reconciliation of cash flow from operating activities		
Surplus:	91,704	195,892
Non-cash movements from ordinary activities:		
Depreciation and amortisation	130,000	116,579
Changes in assets and liabilities:		
(Increase)/decrease in receivables and prepayments	(121,279)	106,708
(Increase)/decrease in inventories	(25,762)	15,005
Increase/(decrease) in creditors	74,208	130,434
Increase/(decrease) in provisions	66,277	52,589
Increase/(decrease) in deferred revenue	427,256	168,280
Net cash provided by operating activities	**642,404**	**785,487**

NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH WORKERS AND PRACTITIONERS LIMITED
ABN 61 138 748 697

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2024

NOTE 13: RELATED PARTIES TRANSACTIONS AND KEY MANAGEMENT PERSONNEL DISCLOSURES

Transactions between related parties are on normal commercial terms and conditions no more favourable than those available to other parties unless otherwise stated.

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

	Salary & Fees	Superannuation contributions	Total
	$	$	$
Key Management Personnel Summary			
2024	828,501	99,420	927,921
Total compensation	**828,501**	**99,420**	**927,921**
2023	714,679	71,468	786,147
Total compensation	**714,679**	**71,468**	**786,147**

NOTE 14: DEPARTMENT OF HEALTH AND AGED CARE GRANT SPENDING

	New Funding 2023-2024 $	New Funding 2022-2023 $	Cumulative 2018-2022 $	Cumulative 2018-2021 $	Cumulative 2018-2020 $
DHAC grant received	2,205,900	2,347,400	7,682,713	5,742,509	3,802,305
Grant expenditure	2,328,500	2,374,343	7,722,402	5,747,255	4,133,982
(Overspent)	**(122,600)**	**(26,943)**	**(39,689)**	**(4,746)**	**(331,677)**

NAATSIHWP was a party to a one year funding agreement with the Department of Health and Aged Care for the period 1 July 2022 to 30 June 2023. Under this agreement, NAATSIHWP has received funding of $2,347,400 (excl GST) to 30 June 2023. Grant expenditure was $2,374,343 to 30 June 2023.

NAATSIHWP is a party to a three year funding agreement with the Department of Health and Aged Care for the period 1 July 2023 to 30 June 2026. Under this agreement, NAATSIHWP has received funding of $2,205,900 (excl GST) to 30 June 2024. Grant expenditure was 2,328,500 to 30 June 2024.

Included in Grant expenditure are amounts relating to purchased IT equipment in previous financial years but yet to be fully depreciated in this current financial year.

NOTE 15: CONTINGENT LIABILITIES

The company had no contingent liabilities as at 30 June 2024 and 30 June 2023.

NOTE 16: ECONOMIC DEPENDENCE

Economic dependence exists where the normal trading activities depends upon a significant volume of business. NAATSIHWP is dependent on grants from the Department of Health and Aged Care to carry out its normal activities. It is noted that NAATSIHWP has grant funding up to 30 June 2026 with an agreement executed on 3 July 2023.

NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH WORKERS AND PRACTITIONERS LIMITED
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 30 JUNE 2024

NOTE 17: COMPANY DETAILS

The principal place of business of the Company is:
National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners
Ground Floor, 31-37 Townshend Street
PHILLIP ACT 2606

NOTE 18: EVENTS OCCURRING AFTER THE REPORTING DATE

No matter or circumstance has arisen since 30 June 2024 that has significantly affected, or may significantly affect the company's operations, the results of those operations, or the company's state of affairs in future financial years.

NOTE 19: CONTRIBUTION ON WINDING UP

The company is incorporated under the Corporations Act 2001 and is a company limited by guarantee. If the company is wound up, subject to provisions in the constitution each member maybe required to make a maximum contribution of $10.00 towards meeting any outstanding obligations. At 30 June 2024, the total maximum amount that members of the company maybe liable to contribute if the company is wound up is $13,310 (2023: $11,690).

The maximum amount that members of the company are liable to contribute if the company is wound up is now calculated for Full Members only.

National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners Limited

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