Inclusiveness
Fairness
Harmony
Understanding and Agreement
Integrity and Loyalty
Promoting a positive attitude and sense of humour
Motivation and striving to achieve
Responsibility for action
Focusing on community
Respect and honesty
We aim to achieve our mission through:

VALUES

Influencing social issues that impact on health
Advocating for communities
Educating better
Increasing access to culturally appropriate services
Strengthening community control of health outcomes
Eliminating health inequalities
We aim to achieve our vision through:

MISSION

Strengthening our culture and regaining our spirit
Cape York communities own solutions to live long healthy lives
The vision of Apunipima Cape York Health Council is:

VISION
Chairman's Foreword

Welcome to the annual report for 2019/20.

Chairman's Foreword

We know that this will not be without its challenges and recognising that the dedication, commitment and health outcomes for the people of Cape York Communities.

In each of our Phase One Communities, we can achieve our vision and improve controlled health services in Cape York Communities, so we can achieve our vision and improve controlled health services in each of our Phase One Communities.

Our focus over the next year will be to embed good practice, governance and continue to develop community.

As a board, we will continue to work with the Queensland Government and our peak body, Queensland Grass Roots Government, to develop community and Queensland Grass Roots Governance.

We consolidated and documented our commitment to Continuous Quality Improvement across Cape York.

Our Senior Medical Officer, Dr Mark Wentworth, has also been recognised for his achievements over the year.

With 2019/20 being a period of outstanding achievement for Punipima, I am delighted to announce that two years of incredible growth have been followed by a year of continued success.

Not only has Mosman Grove Clinic, Punipima's first community controlled clinic, achieved accreditation under the General Practice Accreditation Limited (AGPAL) but the Queensland Government and Queensland Health Council, and the Queensland Department of Health have also been acknowledged with Quality Management System Standards for Mosman Grove.

As a board, we are working closely with the Queensland Government to embed good governance and continue to improve service delivery in the region.

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We consolidated and documented our commitment to Continuous Quality Improvement across Cape York.
Chief Executive Officer
Cleveland Fleming

Over the next year we will be focusing on developing the infrastructure to support similar models in other communities, particularly on those community models where we have already transitioned. The ultimate outcome is a health service that truly supports community-controlled health services.

The success of Massima Qeensland and the delivery of comprehensive primary health care through a family health service model is a priority for us.

Over the past 12 months, 49% of Aboriginals have received their annual health check and we have seen a real improvement in diabetes control because of better testing and more people being alerted to the change they can make. People are encouraged to check and have them managed.

Appropriate expertise is in place to develop their own health and help them manage their own condition.

We have continued to develop the comprehensive primary health care model delivered through a family health service model.

Work with local health services to develop the Primary Care Clinical Manual and the Australian College of General Practice's Primary Care Clinical Manual and Process Manual. The MJCC family health services use these guidelines to deliver quality primary health care.

This year the focus has been on the development of systems to improve integration and efficiency in chronic disease management.

Audit and evaluation of the Chronic Disease Management Program is ongoing with the aim of improving outcomes and reducing inpatient stays.

Following a period of incredible growth in 2009/2010, the Royal Flying Doctor Service is continuing to develop a more effective and efficient system to deliver health care services throughout a family health service model.

We have continued to develop the comprehensive primary health care model delivered through a family health service model.
that make up its membership.
and to fill gaps in services as promoted by the communities
with the mainstream health system to coordinate improved health service delivery.

Moving Forward Appunima has a committed investment to working
Cape York communities.

Appunima is a Cape York Indigenous Health Network formed to deliver holistic care and support to Indigenous people in Cape York.

Appunima also provides an increasing range of direct clinical support to Cape York primary health care workers.

On child and maternal health


By delivering a large health service program, Appunima is developing a leading role in population health


和服务 delivery.

However, with the growth in staff and need of the communities, Appunima has now implemented a program


A proportionate of primary health care delivery to the communities in Cape York via the Primary Health Unit and moved into


and communities in Cape York.

Consistently working to create an environment that will facilitate an improvement in the health of individuals

care and with local Cape York communities and regions.

Having stepped in size, the organization now has almost 100 staff located in premises at Mocoa Drive Street,

Representing the health needs of Cape Communities.

Appunima Cape York Health Council is the lead agency


Council and the then ATSI Regional Council, Representatives of Appunima Cape York Health
action to form an organization with a mandate to carry the health-related issues to both the Cape York and

The concern for the lack of improvement in the health status of the Cape York Aboriginal people prompted

since the early 90's health-related issues in Cape York have been a high priority for Cape York Aboriginal

ABOUT APPUNIMA
The second significant change was the change in board representation. Previously, each region had a male and female representative on the board, but now, the board representation is based on membership and population. The new boundaries were used to assign board representatives, ensuring that each region's representation was not reduced from four to four. The previous board representation did not reflect the membership of Ampitjima.

The geographical boundaries were considered not to be best fit and the outgoing board representation did not mean a governance system in place and our consultation is not of value. The previous process was not the health action teams in recognition of a bigger restructure that is still growing up, and the changes were made following a workshop between the outgoing board members and the chairman.

The changes for that representation were made in terms of the make-up of the board, election to the board, member representation and geographical boundary changes. In December 2020, it was agreed that a change to Ampitjima’s constitution was needed to make governance clearer.
Two in Region Three
Six in Region One

There were 22 successful candidates across all Regions.

To enhance the selection criteria to assess each of the nominees based on their skills, experience,

two independent assessments from care work or health

Health Action Team Chairs
Chairman of the Board

A sub-committee of the Board comprising
An independent nomination assessment panel was established as a

Elected to the board as they did not meet the selection criteria
One refused as they did not live in community
Two refused as they were not members
Overall 30 nominations were received

Regional Elections See New Board Elected

Region Two's Vincent Biju (Region Two) and Long Paul Gibson (Region Four),
Existing board members that resigned their position include Bernie Shipton (Region Three), Prescilla Mayor

to remain in their position for a further one year term, when their position will then go for election.

The final significant change is that one appointed Board Members were elected. Following a
The final significant change is that one appointed Board Members will now be elected. Following a

(Massman College, Hopkins, Welsh, Waukegan, Cooktown)

(Massman College, Hopkins, Welsh, Waukegan, Cooktown)

(Cornia, Loomis, Lockhart River)

(Cornia, Loomis, Lockhart River)

(Pomona, Mopan, Kemano, William, Weipa, Mopan, Kemano)

(Pomona, Mopan, Kemano, William, Weipa, Mopan, Kemano)

(Diocese, St Francis, Umungoro, Horn Island, New Ireland, New Ireland)

(Diocese, St Francis, Umungoro, Horn Island, New Ireland, New Ireland)


As a result of an analysis of the members register the representation on the board in each region is as follows:

<table>
<thead>
<tr>
<th>Region</th>
<th>Directors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Region Four</td>
<td>4</td>
</tr>
<tr>
<td>Region Three</td>
<td>2</td>
</tr>
<tr>
<td>Region Two</td>
<td>2</td>
</tr>
<tr>
<td>Region One</td>
<td>1</td>
</tr>
</tbody>
</table>

The percentage of members in each region was then used to decide how

/ the number of members in each community = representation in the region

Good Governance Sees Constitutional Change (cont)
Our Communities

Regional Elections: See New Board Elected (cont)
Doc and Hopevale Health Action Team

Standing Strong Leads To Awards For Auprimina

able to report on the work of each Phase One Health Action Team next year.

The aim of the project is to make sure that there is a consistent structured approach to the development of health action teams in each of the Phases so that they are all operating at the same level.

Each of the Cape York communities have been categorised as either Phase One, Phase Two or Phase Three.

We have seen before that a Cape Wide approach does not work and cannot be supported by a small team.

Our COMMUNITIES

Over the years, Auprimina has tried to establish health action teams in each of the Cape York communities.

When

What

Auprimina views health action teams as theynch in and key to community control. They are grass-roots

Health action teams are an integral part of Auprimina’s vision “Cape York Communities own solutions to

Without support and structured approach many of the health action teams were originally established

But with only a very small community engagement Team, sustainability has been a real issue.

And in recent years, determining what services should be delivered, and how they will be delivered and

Health and success, health action teams are an integral part of Auprimina’s vision “Cape York Communities own solutions to
Mossmann Makeover Complete

July 2010 saw work start on the Mossmann Golf Course refurbishment.

Our Communities
Director which included the migration of all patient data to the new systems.

Phones and Clinical Systems. These went an upgrade to the clinical systems - in particular Medical to the connection between the Clinical office and the Mossman Gorte office.

As part of the works, the IT infrastructure has also been improved with the work including major upgrades

The works also made sure that the clinic is compliant with the AGPAL standards expected by the Royal Australian College of General Practice.

The main part of the works involved a major electrical retell to bring the systems up to standard including

Mossman Makeover Complete (cont)
SHERRY ELLIONG, Practice Manager for the clinic said, "The people of Mossman Gorge deserve the best health care and holistic care we can provide and I am incredibly proud of my team for their achievement."

"Healthcare is difficult, but it's a privilege to care for our community in remote areas. We work hard to ensure our patients receive the best care possible."

Our mission at Mossman Gorge Clinic is to provide a full complement of allied health services and a visiting physician. We offer a range of services such as medical and dental care, allied health services, and mental health services.

"AGPAL Accreditation means that our high quality healthcare is delivered according to recognised national standards. It is the highest level of accreditation that can be achieved by any Aboriginal and Torres Strait Islander health service in Australia."

"We are proud to be one of the few clinics in Australia to hold this accreditation.

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"We are proud to be one of the few clinics in Australia to hold this accreditation."
Our services are clearly delivered through a comprehensive suite of services in Cape York. It is important to have a clear picture of where we deliver services in the Cape.

Reaching Far and Wide

Educators, Health Promotion Officers and Community Health Engagement Officers

The role of the Royal Flying Doctor Service in the advancement of health initiatives in Cape York.

The Royal Flying Doctor Service in Cape York. The service is the result of a collaborative effort between the Department of Health and Ageing, the Royal Flying Doctor Service, and local community organisations.

Primary Health Care Initiative

The funding for the transition to community control is now in place. The Royal Flying Doctor Service has been restructured to reflect the transition to community control of health services.

Promoting Community Control

The Royal Flying Doctor Service is a key provider of community services in Cape York. It has been proposed in other nations to improve health outcomes for Aboriginal people.

Promoting Community Control is a key principle of the National Strategic Framework for Aboriginal and Torres Strait Islander Health and is considered best practice for the planning of primary health care services.

Our Services

The Royal Flying Doctor Service of General Practice was also funded by the Department of Health and Ageing to deliver the Improved Primary Health Care Initiative and in January 2010, the Royal Flying Doctor Service was one of the providers delivering these services.
The delivery of comprehensive healthcare...
collaboration of health professionals to improve the health and well-being of aboriginal and Torres Strait Islander women

health in Cape York...
The importance of good nutrition during pregnancy

Our Services
Debra Lie, Julie Salmon, Dorotha Pascoe, Bernadine Collier, Sancy Wadler, Elain and RachelՍʒզղարաժ.

Particular acknowledgement must be given to the following staff for their contribution to the program.

School which is a total of 12 different programs rolled out from the beginning of 2010.

We (sponsors) have been successful with 268 children, 267 children distributed and delivered to all the programs regularly varying from once a week to twice a week in 36 districts.

From March through until August our education rolled out and delivered sessions regularly varying from once a week to twice a week.

The Health Education team have been veryactive in the past year delivering Core of Life workshops.

Future families will be promoting connectedness within each community.

Some communities have been very engaged for our Young and teen communities of prevalence and prevalence.

The problem of local communities needs for promoting awareness of the potential of the young and teen communities.

The largest group for Core of Life is primarily youth aged 14-17 years of age. This is often referred to as low to 17 years of age for the purpose of the National Program.

and Torres Strait Islander communities, our service begins at an early stage of the National Program.

and Torres Strait Islander communities, our service begins at an early stage of the National Program.

Our educators are able to assist and support teachers and offer a quality of education.

Incorporating all that is in place and be able to offer further evidence-based information that respectively

Amongst educators we are able to assist in providing prevention and parenting information throughly.

Although communities are experiencing connectedness with extensive services and questionable parenting.

especially in rural and remote Indigenous communities.

Healthy adult lifestyles.

The concept of Preventative Health, Breastfeeding and Parenting is a normal part of a

where Preventative Health is designed to encourage young people to discuss information. Challenge their

Core of Life is a unique education program developed by midwives by midwives, alongside other

OUR SERVICES
Congratulations to the Anurajima Cape York Health Council and Wuthuppueren Health Service. You are the support of great Aboriginal and Torres Strait Islander community-controlled primary health care in Queensland. Your dedication to providing quality health care services to the people of Cape York has been recognised by receiving the Queensland Aboriginal Health Council's award for excellence in primary health care.

In this way, it is my great pleasure to announce that this year, the Australian Medical Association's National Award for Excellence in Health Care has been awarded to Dr. Mark Werning. Dr. Werning has been recognised for his ongoing commitment to improving health care in Australia.

The award recognises outstanding contributions made by an individual who has made a significant contribution to the health of the community. Dr. Werning has been recognised for his work in improving health care in Australia.

Deadly Doc, Dr. Mark Werning has been awarded the highest honour among medical professionals - the Deadly Doc's Australian Medical Association's Excellence in Health Care Award 2020.

Celebrating Success

CEO certifiable: An organisation stands through quality audit...
Health workers, rather than just treating the person for the issue presented, and referred health promotion programs for the whole family, supported by a community-based family and a family-centred primary health care model that has now been adapted across Queensland by QIHC in their teen leader to indigenous health in Queensland.

Peer health education and service delivery through the development of community health plans helps to influence and shape service delivery through health promotion programs. Their success means that they are critical to improving health outcomes for Aboriginal and Torres Strait Islander peoples.

Dr Mark Wenitong was recognised because of his lifelong commitment to improving the health of Aboriginal and Torres Strait Islander peoples.

Health Services in Queensland

Individuals to the establishment and expansion of Aboriginal and Torres Strait Islander controlled community controlled health services, established under the Queensland Aboriginal and Torres Strait Islander Health Council (QAIHC), the peak body for Queensland’s Aboriginal and Torres Strait Islander Health Council.

A local doctor was inducted into the Queensland Aboriginal and Torres Strait Islander Health Council Hall of Fame.

Local Doctor Inducted into Hall of Fame

"We need to work with communities in the way that they want to work in indigenous health," said Dr Andrew Peace, the CEO of Cape York Health Council. "We are doing things right, and that’s why we are doing things right."

Dr Peace said, "We have developed an evidence-based primary health care model for Cape York."

Dr Peace said, "We are doing things right, and that’s why we are doing things right."

"We are doing things right, and that’s why we are doing things right."

Deadly Doc Wins National Award (cont)
and spearheading many of the reforms that we see come into fruition today.

Recognition of Work Behind the Scenes: The National Medal of Science was presented to Lester Rosenthal, a family in December each year when all team members return to work. Rosenthal has spent two years and nine years and nine years of service.

Recommends were mobile. Corps for each year's service and Laura Hernandez for five years' service.

The National Medal of Science Awards were presented to recognize outstanding contributions to science education and achievement at an event on behalf of the National Science Foundation's Science Education and Achievement Award.

Local Doctor Inducted into Hall of Fame (cont.)
Knowledge and desire to become highly effective and to know how to focus on what is truly important.

The content of the course and the interactive nature of the program will provide leaders with the skills, approach to leading themselves, their people and their organisations.

The executive program is designed to inspire leaders to become strategic in their thinking and in their

Our Senior Management Team also participated in a high impact two day Executive Development Program.

The group includes Donor Annette, Louise Alexander, Ben Crompt, David Sharp, Ellen Goss, Jason Fegan, Louise Pretit, Mary Spottis and Keryn Strott, A big congratulations to Mary, Donor and Keryn who have already

The program confirmed the need for a professional and productive workplace and aims to provide ways to

The problem confirms the need for a professional and productive workplace and aims to provide ways to

and potential, while recognising the experience they already have and offers a range of delivery options.

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...