Chairman’s Introduction

Welcome to the Annual Report for 2011/12. This year has been all about going back to our roots, living our vision and supporting self-determination in Cape York communities.

Our democratically elected board have had the opportunity to bed in and begin to understand the business at hand while providing valuable input and direction; our health action teams are beginning to flourish under the guidance and support of our community development teams and we continue to make great strides towards community controlled health services with the development of infrastructure and greater collaboration with our partners at Royal Flying Doctor Service and Queensland Health.

Over the course of the year I am pleased to report that the Health Action Team Chairs and the Board have met on a number of occasions and discussed topics that really matter to community members including:

1. Acknowledging and recognising the value of traditional medicine into the health service
2. Starting to explore community control of two communities next year
3. Developing a closer working relationship/partnership with Queensland Health and the Royal Flying Doctor Service

I am delighted to report that our newly refurbished, fully AGPAL accredited, community controlled clinic in Mossman Gorge was officially opened with great support and fanfare from community including a traditional smoking ceremony.

This is the model we want to deliver across the Cape and we welcome the additional investment from the Department of Health and Ageing that has allowed us to embark on an ambitious infrastructure program across five communities that will allow us to offer community more control over their health services.

As a Board we acknowledge that we are nowhere near where we want to be but recognise that 2011/12 has seen us take great strides towards achieving our goals.

Next year we want to take even further and we have plans in place to continue to support our Health Action Teams to make real decisions about the health of their communities. We have draft community health plans ready for consultation, Health Action Teams will have their own user manuals setting out their governance arrangements and reporting to communities via Health Action Teams on health outcomes for each community will begin, meaning grass roots governance will have a real grasp of what is happening to the health of their community.

Again, each of our ambitions brings its own set of unique challenges but as a Board we are confident that by working together, staff, community, the Board and our partners we can achieve what we set out to do - see Cape York communities own solutions to live long healthy lives and strengthen their spirit.

Bernie Singleton
Chief Executive's Foreword

2011/12 has really allowed us to sharpen our focus. No longer are we in a period of significant growth and change, but a more stable period of consolidation and development of better and effective business practices.

Partnership and collaboration has been a key theme for us this year, working with fellow health care providers in community to develop a framework and process to provide the best possible health outcomes for the people of Cape York.

By taking a collaborative approach, each of the service providers have come to respect, appreciate and admire the innate differences we have and come to combine our abilities, expertise and resources for the best possible health outcomes.

Central to this has been the work we have undertaken on the development and embedding of our model of care. Over the past few years we have been bringing staff together who have been exposed to and experienced in different models of care and this year we have been able to work with staff to explore and embed our family and community centred approach to the delivery of comprehensive primary health care.

Our primary health care teams are now established within the communities they serve, delivering programs and services to encourage healthy lifestyles, support families to develop and grow and care for those with a chronic disease, each of these elements recognised as contributing to a longer healthier life.

Our community development team continues to build the capacity and capability of community members through our health action teams to enable them to operate governance at a grass roots level and hold us to account for the health services we deliver empowering communities and their members through self-determination.

We are very pleased with the progress we have made this year, particularly around service delivery, infrastructure development and advanced use of technology in a remote setting for the benefit of community.

Next year we expect to face many challenges as a result of the changing political landscape, particularly in the fiscal arena, but believe that by working with the new Health and Hospital Boards and Medicare Local and our current partners we can continue to provide the people of Cape York their own solutions to live long healthy lives.
About Apunipima

Since the early 90's health related issues in Cape York have been a high priority for Cape York Aboriginal people. It was decided in 1994 to gather together the representatives from 17 communities of Cape York and associated Homelands at a four day health conference at the Pajinka Wilderness Lodge.

The concern for the lack of improvement in the health status of the Cape York Aboriginal people prompted action to form a Health Council with a mandate to carry the health-related issues to both the Cape York Land Council and the then ATSIC Regional Council. Representatives conceived Apunipima Cape York Health Council on 14th September 1994.

Apunipima Cape York Health Council is the lead agency representing the health needs of Cape Communities.

Having tripled in size, the organisation now has over 100 staff located in premises at McCoomee Street, Cairns and within the local Cape York communities of Hopevale, Mapoon, Coen and Mossman Gorge. The staff and the Board are constantly working to create an environment that will facilitate an improvement in the health of individuals and communities in Cape York.

When conceived Apunipima was established to provide leadership in health advocacy and consultation. However with the growth in staff and need of the communities, Apunipima has now implemented a program of primary health care delivery to the communities in Cape York via its Primary Health Unit.

The service has expanded to include Indigenous health workers who are based in Cape York communities, Outreach midwives and several doctors. One of the main priorities is to deliver services directly to Cape York communities in maternal and child health services that are appropriate culturally and are of high quality. The emphasis on maternal and child health reflects our four priority areas in health care, which include maternal and child health, chronic disease, social and emotional wellbeing and alcohol, tobacco and substance use and both our funding - New Directions (Federal) and Making Tracks (State-based).

By delivering a team health service program, Apunipima is developing a leading role in population health which encompasses adolescent and adult health screening and targeted health service initiatives focusing on child and maternal health.

Apunipima also provides an increasing range of direct clinical support to Cape York primary health care through these programs and an increasing emphasis on directly preventing and supporting excellence in adult health care delivery particularly as it relates to adult chronic non-communicable disease in remote Cape York communities.

Moving forward Apunipima has a committed investment to working with the mainstream health system to coordinate improved health service delivery, and to fill gaps in services as prioritised by the communities that make up its membership.
A year in review

Over the last 3 years Apunipima has achieved:
- A steady increase in access rates to health care services
- Improved comprehensive primary health care with increasing numbers of health checks, GP management plans and team care arrangements
- Better community engagement which is reflected in improved access to health care services.
- Increased staff members
- More than half of our current workforce identifying as Aboriginal and/or Torres Strait Islander.
- Increased and now steady funding

**Employment**

**Clinical Services**

**Funding**

Apunipima funding over time
Apunipima’s first community controlled clinic officially opened in Mossman Gorge

Mossman Gorge Clinic is Cape York’s first community controlled health service, providing primary health care to the residents of Mossman Gorge and surrounding areas. Gibson, Chair of Bamanga Bubu Ngadimunku Inc, Donna Henning, Chair of the Mossman Gorge Health Action Team and Bennie Singleton, Chair of Apunipima, the plaque unveiling was witnessed by around 100 community members, visiting dignitaries from partner organisations and Apunipima staff.

Mossman Gorge community member, Dan Fischer also undertook the traditional smoking ceremony of the building.

First established in 2009, the clinic has since undergone extensive refurbishment to become a health facility that the Mossman Gorge community can be proud of. Officially opened in June by community leaders, Karen
Investing in infrastructure

The Department of Health and Ageing has granted Apunipima $11.7 million under the Health and Hospitals Fund - 2011 Regional Priority Round for Services in Cape York for developing, enhancing and maintaining infrastructure in Cape York communities.

With five communities identified, Aurukun and Kowanyama are the key focus for 2012. The plan for Aurukun is to build a new primary health care centre. With Aurukun residents having aspirations of a health precinct in their community, the potential new site for the primary health care centre has been identified within the current health reserve in Aurukun.

Our vision is that this space will incorporate between four to seven consulting rooms for use by GP and other visiting services and will be large enough to accommodate relatives and students.

Meanwhile in Kowanyama, the proposed $300k upgrade and refurbishment of the mums n bubbs clinic took a step closer with the negotiation of an Agreement to Grant Lease (promise to lease in the future) between Queensland Health and Apunipima.

It is anticipated that this Agreement to Grant Lease will be finalised and signed by the end of August so work can begin in October before the next wet hits.

 Whilst taking responsibility for the refurbishment and ongoing repairs and maintenance, Apunipima has made it clear to community that the mums n bubbs clinic is to be a shared facility for the whole community to enjoy, not just a clinic.

Having Apunipima facilities in these communities will make a big difference to how we can deliver services and by engaging community in the development of these facilities we can ensure that once up and running they will be something they want to access.

Closing the Gap in Hopevale

Apunipima staff had a great time at Hopevale Closing the Gap day celebrations at Hopevale PCYC where staff had stalls and promoted healthy lifestyle message to community members.

We had a colouring in competition for kids (veggie man and veggie woman) with the best girl and boys picture winning them a sports bag with frisbee.

Alen made models of kids feet which the kids painted and Hina, Theeran and others helped prepare healthy food that the locals made into delicious dinners for everyone there.
Need for Feed Lockhart River Style

"Need for Feed" is a cooking program for Queensland students in years 7-10 supported by Diabetes Queensland, Education Queensland and Queensland Health. The program offers students a chance to cook, eat and share healthy foods.

Apuniqima recently secured funding for the first trial of the program in Lockhart River, a remote Indigenous community, to inform the changes needed to create an effective program in the Cape for the future.

There were many challenges to running a city-based program in a remote community... such as limited cooking facilities, lack of running hot water, high costs and limited availability of foods, diverse learning needs of students and the fact that no one had closed in shoes!...But we had lots of fun and learned heaps!!

Throughout the program we had the opportunity to cook and share food with community elders as well as with the younger kids at school. For Apuniqima, this was a great opportunity for building relationships and gaining insight into community needs.

As well as increasing community engagement, the program also resulted in increased school attendance and we are still receiving requests to come back and cook again!

At an organisational level the program resulted in increased understanding of the need to be flexible and adaptable to suit the cultural diversity amongst Indigenous communities when implementing top-down departmental style health education programs. Apuniqima and Diabetes Queensland have now secured funding for the program to be rolled out in another 10 communities across the Cape and are working closely to accommodate a flexible program structure to suit the needs of each community.

This provides Apuniqima with an opportunity to put our new processes for community engagement via Health Action Teams into practice. Whilst evidence suggests bottom-up style health education initiatives developed at the grass-roots level are most effective, the reality is that the government continues to offer substantial funding for top-down blanket style initiatives.

Evaluations from the roll-out of "Need for Feed" across the Cape aim to contribute to the body of evidence on effective health education initiatives in Indigenous communities as well as model how state and federal funding can be secured and adapted to suit the needs of individual communities.
Inaugural Health Summit a success in Aurukun

At the beginning of November the Inaugural mini Health Summit was held in Aurukun. The idea for the health summit derived from the need to build support for the Health Action Team, to promote the community controlled family centred approach, and to strengthen partnerships on the ground to support change management.

The summit was a catalyst to progress these matters in the community.

The Aurukun Health Summit was officially opened by the Mayor on Thursday 3 November, with the support of Apunipima Health Action Team chairperson Derek Walpo and Apunipima’s Community Development and Health Promotion Teams.

Promoting and encouraging community members to eat healthily, our Advanced Health Worker Nutrition Derfene Grey, provided a variety of tasty food such as muesli and low fat yogurt, mixed fruit salad and low fat yogurt, fruit platters, scrambled egg wraps, veggie sticks with low fat dips, fruit juice and water, roasted chickens, ham and garden salad.

Queensland Health workers from Weipa assisted Derfene with the cooking, serving and providing some of the healthy food that was served during the day. A big thank you to Queensland Health for the chicken, ham and salad they contributed and Royal Flying Doctor Service for providing ice, water and fruit juice.

Apunipima staff showcased Child and Maternal Health Baby Baskets, Women’s Health and AIDS, Health Promotion Living Strong Program and career pathways in health.

The Child Care Centre conducted a playgroup during the morning, and PCYC made healthy smoothies and promoted their services within the community.

Showcasing the health sector service delivery there were several stalls included Royal Flying Doctor Service staff from the clinic and Wellbeing Centre, promoting and raising awareness of the service they currently deliver in the community such as child and maternal health Iron Program, social and emotional wellbeing counselling workshop and jewellery making.

The Health Action and Community Development Team promoted and recruited new members for both Apunipima and the Health Action Team and also assisted with the community survey asking community of their knowledge and understanding of the purpose and role of Apunipima’s Health Action Teams.
People prepare to live strong in Pormpuraaw

Living Strong encourages people to make healthier food and drink choices and to participate in regular physical activity.

As you can see from the picture, the group used innovative ways to check what the right amount of foods from each of the five food groups is and what a serve of something might look like and how many serves from each food group you should have. They also talked about the importance of drinking plenty of water every day for good health.

Throughout the session the group looked at the Aboriginal and Torres Strait Islander Guide to Healthier Eating, portion control and eating the right amount of the five major food groups.

Health Action Team in Wujal generates real interest in health

Wujal Wujal community Health Action Team is steadily improving with a lot of interest being generated for health improvements in the community.

Project Officer, Kathi Gibson-Steffenson recently attended the Wujal Wujal Health Action Team with Dietician Richard Ball and Health Promotion Officer Fiona Millard along with staff from Queensland Health and Cooktown District Community Centre and a couple of men from the Wujal Wujal Men’s group who are interested in being members of the Health Action Team.

The Wujal Wujal Men’s group meet every Wednesday which they have invited Health Action Team members to come along with a presentation of what the Health Action Team is all about. Wujal Wujal Men are interested in becoming members and would like to advocate for Community people through this medium.
Coen sees fresh action on health

A revamped and revitalised health action team met for the first time in Coen with Lavinia Thomas taking the Chair supported by Rose Johnson as her deputy. Catherine Port took the role of secretary to support the team of 13 local Coen women.

Coen intend their Health Action Team to operate across the whole community with everyone being able to have their say but with a core group of members who will make the decisions.

Although in its infancy, the group are making great headway with engaging the cross section of people in the township and have already garnered support from the pub and the guesthouse.

Community health plans under consultation in community

June saw the first round of consultation on the draft Community Health Plans. Developed as a collaboration between Apunipima and the Health Action Teams, the plans set out the health profile of the community and the key action areas to tackle health challenges faced by community members.

Over a few weeks the Community Development Team was out in force consulting with community members on their individual community health plans. As part of the consultation, community members were asked their views on what is in the draft plan, whether the priorities contained within it match their own priorities and what else they would like to see in the plan.

Once the consultation is concluded, all the feedback will be collated and the draft community health plans changed to reflect the wishes of community. Once finalised and agreed by community, these plans will then be used to set the direction of service delivery to meet the greatest health need and identified priorities for each community.

Looking forward to a bumper harvest in Coen

Food shortages in the wet season are all too common in the town of Coen. To help combat that, Apunipima have established a couple of raised veggie patches at their offices in the township.

One filled with herbs and spices and the other with salad vegetables, the kids in community have been given the task of tending to the patches and growing their own grub, with the promise being that if these work out Apunipima will put more in.

Options are being looked to at potentially expand this program should it be a success in Coen.
Don't be a mug! Look after your feet

That was the message being given to the people of Napranum as Annabelle Saunders, Podiatry Health Worker ran a competition to encourage diabetics to get their feet checked.

As we know, it is vital that diabetics get their feet checked on a regular basis and Annabelle decided to come up with an innovative way of getting the community involved in spreading this message.

In February, she launched a competition to create a design that would be used to remind and encourage diabetics to get their feet checked. The winning design was announced in July and printed on mugs with all those diabetics who came and had their feet checked receiving a free mug.

The winner was announced at a BBQ in community with the winner of the first prize receiving a fishing pack and the runner up receiving a healthy food hamper.
Making Kowanyama kids healthier kids

More than seventy 5-14 years olds in Kowanyama receive health checks as part of the annual screening process.

The joint venture between Royal Flying Doctor Service and Apunipima took almost a week and saw each of the children receive their annual health check.

The numbers were down a bit on the previous year due to the grade 6 and 7's being on camp and the Cairns show but overall the session was a success.

RFDS praise Apunipima for their support with school screening

In a message of thanks from RFDS, Jo Garton and Kris Wallin were singled out for making school screening in Pormpuraaw a huge success with 81 completed health checks over the two days.

The under 8's day was great fun thanks to Jo Garton and her teeth cleaning and Mookalis fruit kebabs.

Lisa Smith of Royal Flying Doctor Service said, "Thanks once again for providing an exceptional audiologist in Kris Wallin, and Jo Garton who assessed the children's teeth better than anyone else ever done before and educated along the way".

"I am very confident that everyone who needs to see the dentist is on the referral list. School screening would not have been as successful without Jo and Kris. They were both a joy to work with!"
New Technology sees Apunipima bill its first Telehealth service

Apunipima is delighted to announce that it has successfully billed its first specialist Telehealth service to Mossman Gorge.

Performed by Dr Marnie Fraser and Julie Salam, Health Worker, the pair used the latest technology to have a consult with three patients.

Normally the journey from Cairns to Mossman Gorge takes around an hour and a half but with the Telehealth Service the consult could be held immediately benefiting both patients and professionals.

Pormpuraaw women's group played host to special guest

Pormpuraaw Women's group meets fortnightly to yarn, share stories and talk about health topics they are interested in.

At their last meeting they played host to special guest speaker Helen Walker, a nurse from Pormpuraaw Primary Health Clinic who spent time with the group talking Women’s Business.

Pormpuraaw women’s group works closely with Pormpuraaw Paanth, Apunipima and Queensland Health to make sure health issues stay on top of the agenda, helping to sustain a better community.
Apunipima’s patient transport service is really motoring

Apunipima’s Patient Transfer Bus Service has now been in operation for three months and in that time has helped 127 patients from Cape York communities when they come to Cairns.

The team behind the Patient Transfer Bus Service are Stefan Geisler, Coordinator and Richard Sewter, driver. Between them they take care of Cape York people when they come to Cairns, making sure they can get from the airport to their accommodation and then from there to their appointments.

The way the service works is that as appointments, travel to Cairns and accommodation is booked, referral for a pick up is faxed to Stefan who then arranges for Richard to pick them up and drop them off.

It is not only Apunipima staff that can refer, pick-ups can be arranged by Queensland Health, the Royal Flying Doctor Service and community clinic staff.

When asked about his role as driver, Richard explained that the service is more than just pick up and drop off, “I take people to their appointments and also do liaison work to help them with their accommodation and appointments”.

The service is unusual as it doesn’t operate on a nine to five basis, it is there whenever it is needed and follows the patients schedule rather than Apunipima’s.

When asked about how they felt about the service, both Stefan and Richard agreed that the service relieves stress on patients having to find their own way to and from the airport which can be very daunting. It also helps them not have to worry about money and availability for cabs too. Anecdotal evidence also shows how valuable it is to the patient.

With an average of 40 patients a month being transported by the service it is expected that by the end of the year over 300 patients will have benefited from this service.
Quality our priority - Patients say Mossman Gorge Clinic enjoys good health

Implemented in December 2011 Your Health Your Say is a customer service snapshot tool that identifies thoughts and feelings experienced by clients as they use our services in real time.

Those that complete the form are asked how their experience was, whether Apunipima could do something to make it better or if something has gone really well what it was or who was responsible.

The client's experience is measured on a Good, OK or Bad rating and the other questions require comments that are purely subjective to the client being asked.

The Your Health Your Say Patient Surveys are available in Mossman Gorge Clinic and are completed anonymously and posted into a comments box on the wall of the clinic.

Reception encourages clients to complete the forms when they have finished their consultation and post their comments.

At the end of each month, the comments box is emptied and all forms are posted to Communications in Cairns for analysis.

Once analysis is complete, a brief report is returned to the clinic with an overview of the comments and trends identified so the clinic manager can discuss the outcomes with their team and the Health Action Team.

Those completing the survey are asked whether there are things that Apunipima can make better and if there is something Apunipima has done particularly well.

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37 comments were received overall with the main themes being:

Things Apunipima could do better
- Waiting times and appointments (waiting times a bit long)
- Provide distraction materials in the waiting room (including tea, coffee & biscuits)

Things Apunipima is doing really well:
- Very helpful staff
- A doctor that listens
- Friendly and clean environment

A report is provided to the clinic each month on the outcome data with recommendations as appropriate.

This report is then discussed with the Clinic Team and the Health Action Team to agree on any actions that are required going forward.
Mapoon mob prove Apunipima still has it!

In early June, Apunipima underwent its first surveillance audit under ISO 9001:2008, with Judith Robson from IHAC (Institute for Healthy Communities Australia Certification) coming back to conduct it.

This was our first twelve month surveillance audit and after the two days we ended up with a very good result. Judith visited both the Cairns Office and the Mapoon office and the Mapoon mob really did us proud.

So what happened?
- Cairns Office and Mapoon Office were audited
- We maintained our ISO certification
- Our next surveillance audit will be in one year’s time - June 2013
- The Coen office will be added as a site to the scope of our certification
- There were no non-conformances
- Three Continuous Improvements (CI’s) were raised which need to be completed in the next 12 months

“We, the Mapoon Team, are all feeling quite proud of ourselves in doing well in the audit that was done on the 7th June, 2012”.

“A lot of hard work went into preparing for the Audit, but without the support of Roberta and Myra, we might’ve had a few hiccups. So a big thank you for the support and preparation”.

“Also a thank you to the organisation in providing training in how to do an audit and what’s involved, as it helped me (Lou Akenson), to prepare for the upcoming audit and conduct internal audits. Judith congratulated us on what we have achieved, our approach and the work we do nothing that Apunipima is moving quickly with good systems and processes. It was also recognised that staff are committed to providing a quality service with good outcomes”.

So as an organisation what are we doing well?
- The Continuous Improvement and risk management flow chart could be presented at any conference and we are encouraged to share this with the external environment
- The Business Performance Monitoring Tool is outstanding, congratulations on the thought processes and looking forward to seeing how this process matures
- Compliments of the Health Action Team user Manuals and roll out
- Reporting - in general the level of detail in reporting is very good and is the type of information that can inform decisions, for example the HR Monthly Report and the Mapoon Team Minutes

All we need to do now is to continue to build on what we have already achieved, and continually look to identify improvements where we can.
Our People

Over the past year, our workforce has increased by a further 18% reflecting the confidence of our funders in our ability to deliver primary health services for Cape York.

Over the past five years, our workforce has increased by over 600% (from 17 in 2007 to 113 headcount at 30 June 2012) and we have a turnover rate of 19% which is well below health industry benchmarks which trend significantly higher than this in rural and remote settings.

Our workforce profile continues to exceed key Australian health benchmarks. With 54% of our workforce identifying as Aboriginal and/or Torres Strait Islander compared with 1.6% of the national health workforce, it reflects Apunipima’s reputation amongst other community controlled health organisations, as an employer of choice for Aboriginal and Torres Strait Islanders.
Our people

We are proud to boast Aboriginal and/or Torres Strait Islander representation across all occupational groups, organisational functions and all levels within the organisation.

The age distribution of our workforce, combined with a significantly lower than average turnover rate, bodes well for our future and ability to achieve a sustainable and stable workforce, and a return on training investment - particularly the Aboriginal and/or Torres Strait Islander health workforce and developing local workforce capacity, compared with the national health workforce trends. Over 60% of our workforce is 45 years or younger whereas nationally, 20% of the health workforce is aged 55 years or older.

Workforce development and Aboriginal and/or Torres Strait Islander workforce capacity development remains a high priority with a key investment over the past year in supporting our health workers to achieve national registration. This builds on past generations of health workers who advocated and influenced health work as a recognised profession.

A number of our staff are children of the early health workers and recognise the significance as well as how this will continue to contribute towards health improvements. Apunipima is one of the few organisations to support this pathway for our Health Workers within the first year of national registration. The approach taken, and internal support provided, has contributed towards trending of 100% completion rate.

Apunipima has continued to strengthen relationships and reputation with the clinical training bodies and the vocational training sector. Over the last year, we have continued to increase the number of clinical trainee placements with approved registrar training runs and registrar placements, nutrition students as well as securing funding for two Indigenous business traineeships.

To continue to strengthen our reputation as an employer of choice, over the past year we initiated bargaining for an Apunipima Enterprise Agreement which will ensure that our employment terms and conditions continue to support Apunipima’s context, values and family centred primary health care service delivery philosophy and increasing the numbers and capacity of Aboriginal and/or Torres Strait Islander people entering and working in the primary health care workforce, and living and working in Cape York communities.
Apunipima health workers lead the way in registration

Apunipima is delighted to announce that 13 of its 27 health workers have submitted applications for national registration to become Health Practitioners.

This is the first time there has been a national registration of aboriginal health workers and it is a real step forward in acknowledging and recognising the role that aboriginal health workers play in improving the Health of Aboriginal and Torres Strait Islander people and most importantly Closing the Gap.

Finally the professionalism, skills and experience of health workers has been recognised, with registration requiring the same checks, evidence and continuing professional development requirements as nurses and other health professionals.

Over the last few months Apunipima's health workers have been preparing for registration including gathering together all evidence of qualifications and putting together professional resumes.

Apunipima fully supports its Aboriginal Health Workers and is proud to have supported them to achieve National registration, we are proud to say that we are one of the few organisations to support this pathway for our Health Workers.

Over the coming months we will continue to work with the remaining 14 health workers to support them to also achieve National registration. Apunipima is aiming to have another 8 Health Workers ready for National Registration by January 2013.

National Registration is something our Health Workers have been fighting for, for many years. We are excited about what National Registration is going to mean for Apunipima our Health Workers, our people and our communities.
Recognition of a job well done

December 2011 saw the second annual staff awards event to recognise the high calibre of service delivery by our staff. The awards were a huge success with 20 nominations received for seven awards. The categories included:

Living the Vision:
The person whose approach and way of working on a daily basis is consistent with our community control philosophy of ‘for the people by the people’ and who embodies the vision statement that ‘Cape York communities own solutions to live long healthy lives, strengthening our culture and regaining our spirit’.

Winners were:
Elaine McGreen, Kathi Gibson Steffenson

Team Player:
The person who works well with everyone and encourages others to work as a team; this person goes out of their way to make others feel comfortable and welcome in the team and the organisation, and is an inspiration to others around them.

Winners were:
Den Stanford, Rachel Sargent

Unsung Hero:
The quiet achiever of your team who just gets it done in a quiet way, and just seems to work through the challenges that face them on a day-to-day basis and gets the job done.

Winners were: Imran Durrani, Sandy Rasas

Innovation & Quality:
The person who is always looking for better and more effective ways of doing their work; is constructive to others when it comes to improvements; has developed/ initiated something new which has contributed to better ways of doing things.

Winners were: Roberta Newton, Leena West

Dignity in Service Delivery:
A member of staff who has shown they have gone the extra mile to ensure dignity and respect in any area of service delivery to patients and/or communities.

Winners were: Cath Nolan, Richard Ball, Ruth Bullen

Rookie of the Year: Recognising the contribution of a staff member in their first year working at Apunipima who is valued by others they work with and/or the services they provide to others; they make a difference, have the right attitude, work ethic and approach.

Winners were: Lorraine Ahmat, Theerae Pearson