

# ANNUAL REPORT 2021/22



**KIMBERLEY ABORIGINAL MEDICAL SERVICES  
12 NAPIER TERRACE, BROOME 6725 WA  
KAMS.ORG.AU**










# ACKNOWLEDGEMENT OF COUNTRY, CULTURE AND COMMUNITY

Kimberley Aboriginal Medical Services pays our deepest respect to all  
Traditional Owners across the Kimberley region.

We acknowledge the wisdom of all Elders, those who came before us,  
those we have today, and those that are emerging.

We also pay our respect to all First Nations people, and respect their  
knowledge systems, language, vibrant living culture, and continued  
connection to Country.





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# MESSAGE FROM OUR CHAIRPERSON

**On behalf of the Board of Directors, I present the Kimberley Aboriginal Medical Services (KAMS) Annual Report for the 2021/22 financial year. It's been an honour to serve as the KAMS Chairperson over the last 12 months.**

For many years, I have witnessed KAMS staff working at the frontline of primary healthcare delivery to our communities across the Kimberley and looking back over the last year, I'm proud of the way that our team rose to the challenges of the first COVID-19 outbreak across the region. KAMS and our Member Services worked in partnership with Aboriginal Community Controlled Organisations (ACCOs), Aboriginal communities, the WA Country Health Service (WACHS) and other key stakeholders in the Kimberley to keep our community informed and safe. Our collective efforts made sure that our communities had access to the resources they needed, such as COVID-19 vaccines, rapid antigen tests (RATs), personal protective equipment (PPE) and hand sanitiser.

The new Strategic Plan (2022-27) is the Board's vision for the future of KAMS. The past gives us our knowledge and experience to guide us in the present and in developing the Plan, the Board reflected on the decades of work by our Elders and predecessors in the fight for comprehensive, culturally safe health services for our families and communities in the Kimberley.

The Board has included new priorities which signal an ambitious new era to expand our influence by supporting Kimberley Aboriginal communities and ACCOs in our work to deliver culturally safe services across the region. I look forward to future reporting periods where we will provide updates on the progress against our strategic vision.



The work to expand the ACCHS sector in the Kimberley gathered momentum in the reporting period through our work alongside the Aboriginal Community leadership in Bidyadanga, Lombadina, Djarindjin and Ardyaloon to transition remote health clinics to Aboriginal community control and to build a dedicated primary healthcare service in Fitzroy Crossing. The Board is committed to strengthening our sector with our Treasurer, Mr Chris Bin Kali, included on the KAMS Transition Project Team.

The last year brought a significant milestone for the Broome Renal Health Centre who celebrated their 20th Anniversary in December 2022. This is an outstanding achievement for Australia's first Aboriginal Community Controlled Renal Health Centre and I would like to extend my congratulations to the staff and management of Kimberley Renal Services (KRS) Broome.



I would like to pay tribute to our CEO, Vicki O'Donnell, for receiving an Order of Australia Medal (OAM) in January 2022. Vicki has been a strategic leader in the ACCHS space for over 20 years and the OAM finally recognised her stellar career in Aboriginal Health in the Kimberley, across WA and nationally. She is a tireless and fearless advocate for Kimberley people whose leadership and advocacy gives KAMS a reach and influence unmatched in our history. I would like to thank her for her outstanding contributions to KAMS, our member services and more broadly, to Aboriginal health.



To all KAMS staff, thank-you for your dedication and commitment in the way that you cared for and supported our community over the last year. To our CEO, Medical Director and Executive Management Team, your leadership and advocacy throughout the COVID-19 outbreak gave the Board every confidence that we would meet the challenges thrown at us.

Finally, I would like to acknowledge and thank our Member Services, Kimberley ACCOs, Kimberley communities and other stakeholders who stood side by side with KAMS as we faced COVID-19 this year. Your strength and resilience was there for all to see.

*Raymond Christophers*  
*Chairperson*  
*Kimberley Aboriginal Medical Services*



# MESSAGE FROM OUR CEO

**I am pleased to provide the Annual Report as the KAMS CEO for the period 2021/22. What a challenging year it's been for all of us.**

We've been preparing our plans and responses since 2019, and when COVID-19 came into the region in March this year, we were ready. I must congratulate all staff, from our qualified and competent frontline clinicians in our Remote Clinics and Renal Health Centres, to the staff in the Rapid Response Teams who supported our frontline clinicians, to the critical support provided by program and administrative staff in Broome who worked across pandemic response teams such as logistics, workforce, internal / external communications and of course the support provided to everyone by our ICT and Social and Emotional Wellbeing (SEWB) colleagues. I give thanks to you all for never giving up or giving in when we had to stand firm in the face of adversity to support Kimberley Aboriginal communities throughout the outbreak.

The strength of our partnerships with our Member Services, remote Aboriginal communities, ACCOs and other stakeholders such as WACHS was demonstrated throughout the COVID-19 state of emergency. We welcomed new funding from the Aboriginal Health Council of WA (AHCWA) and the National Aboriginal Community Controlled Health Organisation (NACCHO) to assist in our efforts to support our community. We would not have been able to stand strong and put the health of our people at the forefront without our Member Services, Kimberley ACCOs and our colleagues at AHCWA and NACCHO.

As KAMS continues to give voice to the aspirations of Kimberley communities at the regional, state and national level, against the backdrop of Kimberley Aboriginal people caring for and providing healing to Kimberley Aboriginal people for tens of thousands of years, we must maintain the momentum provided through the priority reforms set out in the National Partnership Agreement on Closing the Gap and the WA Implementation Plan.

KAMS supports the implementation of the National Agreement and the WA Implementation Plan because the National Agreement is not just words on a page - It is a turning point in relationships between ACCOs and Governments to improve the health status of Kimberley Aboriginal communities.

The new Strategic Plan (2022-27) was launched on 17th June 2022 and it provides a clear roadmap for KAMS over the next 5 years. It introduces an exciting and comprehensive change agenda to align to the National Partnership Agreement to our work to implement the ACCHS Model of Care and make sure our people have access to culturally safe primary health care, renal services, SEWB services, disability services and training. We will prioritise the development of a regional workforce, create healthy futures by continuing to advocate for a health system that serves our community well, and by fostering and supporting shared learning across the health and wellbeing sector to support better outcomes for our communities.



Our Clinical Services team continued to discover new and innovative ways of caring for our community through the introduction of technology such as Visionflex which was rolled across our Remote Clinics during the period. With integration to our patient management system (MMeX), Visionflex allowed our GPs to complete consultations with patients from a distance.

A significant review of Remote Services was completed in July 2022 in partnership with the Nous Group to realign and reframe primary healthcare service delivery under the ACCHS Model of Care. The new Strategic Plan supports KAMS to continue to walk alongside Aboriginal communities in Bidyadanga, Lombadina, Djarindjin, Ardyaloon and Fitzroy Crossing to extend the ACCHS primary healthcare service footprint in the Kimberley through the transition and sector strengthening work in those locations.

KAMS received new funding under a partnership with the South Australian Medical Health Research Institute (SAMHRI) to reduce diabetes foot-related complications and amputations amongst Aboriginal people. The work of the new Kimberley Foot Initiative (KFI) team will result in improved shared care and integration of services, multi-disciplinary care and specialist services within the Kimberley region for all diabetes foot-related complications.



The Kimberley Aboriginal Health Planning Forum (KAHPF) continued a research moratorium throughout 2022 in response to the COVID State of Emergency and the inability of researchers to access Kimberley communities. The KAHPF commenced the work to develop a Kimberley Oral Health Plan and re-established the Kidney Health Action Group. In 2021, 10 Kimberley protocols were reviewed and in 2022, the KAHPF developed 2 new protocols and reviewed 6 protocols.



The Kimberley Aboriginal Health Research Alliance (KAHRA) moved into year two of their operations and established action focussed working groups on key priorities such as the development of a sustainable health research workforce, community engagement and knowledge translation. KAHRA also provided significant support to the KAHPF Research Sub-committee.

In recognition of our long and proud history of coordinating and delivering child and maternal services across the region, KAMS received new funding to support a partnership with the Australian Nurse-Family Partnership Program (ANFPP) and our Member Services to deliver the "Kimberley Healthy Mums, Healthy Bubs" Project.





The Population Health Team continued to provide outreach, liaison and strengthening of relationships between primary care services and Kimberley Aboriginal communities, to encourage health-seeking behaviours and healthy lifestyles through health promotion and preventative action. The Tackling Indigenous Smoking (TIS), Sexual Health and Hearing Health teams remain an important and vibrant part of remote community health landscape.

A new SEWB Welcome Guide was developed as a part of the Transforming Indigenous Mental Health and Wellbeing (TIMHWB) project to provide Aboriginal SEWB Workers with a standard introduction to the framework of SEWB to support and guide the holistic, strengths-based approach of SEWB service delivery.

In partnership with the Kimberley Aboriginal Law and Culture Centre (KALACC) and the Yiriman Project, KAMS supported a trial of the Jalngangurru Traditional Healing Pilot Program across the Kimberley. The Pilot is central to the ACCHS Model of Care in its support to healing and holistic care.

Our Kimberley Supports team continued to provide much needed services to our families living with a disability across the region. The Remote Early Childhood Services (RECS) program was the focus of a co-design workshop involving senior representatives from the Kimberley Supports Consortium and National Disability Insurance Agency (NDIA) in September 2022.

Our people and finance systems underwent planned reforms through the introduction of automated payroll services through Employment Hero. The new system supports efficiencies in our onboarding, leave approval processes and the new staff learning management system "Right Place".

It certainly has been a very busy year at KAMS. I'm excited about our future and am deeply committed to ensuring that KAMS continues to influence policy and health systems so that the programs we deliver to our community improve the lives of our families and communities across the region. I would like to close by thanking the Board for their guidance, knowledge, strategy and support over the past year. The Board's direction in the new Strategic Plan will set KAMS up for success over the coming years.

To my Executive Management Team and Staff - your commitment, compassion and hard work over the last 12 months makes me feel really proud to be leading such a professional and dedicated team.

*Vicki O'Donnell OAM*  
*Chief Executive Officer*  
*Kimberley Aboriginal Medical Services*



# OUR BOARD OF DIRECTORS

The KAMS Board are elected by Board members from each Member Service and they provide strategic leadership and direction which ensures that KAMS serves Kimberley Aboriginal people and communities with respect and integrity.



RAYMOND CHRISTOPHERS  
CHAIRPERSON



DESMOND HILL  
DEPUTY CHAIRPERSON | ORD VALLEY  
ABORIGINAL HEALTH SERVICE



CHRIS BIN KALI  
TREASURER | BROOME REGIONAL  
ABORIGINAL MEDICAL SERVICE



TARA SPRY  
SECRETARY | DERBY ABORIGINAL  
HEALTH SERVICE



MILDRED HILLS  
DIRECTOR | YURA YUNGI ABORIGINAL  
MEDICAL SERVICE



LOUIE BIN MAARUS  
DIRECTOR | NIRRUMBUK  
ENVIRONMENTAL HEALTH & SERVICES



KATHY WATSON  
DIRECTOR | MILLIYA RUMURRA  
ABORIGINAL CORPORATION



WILLIAM BANGU  
DIRECTOR | BIDYADANGA ABORIGINAL  
COMMUNITY LA GRANGE INC.



VACANT  
DIRECTOR | BEAGLE BAY COMMUNITY  
ABORIGINAL CORPORATION



IN 2021/22, THE BOARD MET 10 TIMES AND EACH MEETING INCLUDED A HALF-DAY SESSION WITH THE KIMBERLEY ACCHS CEO NETWORK.



KAMS held its Annual General Meeting (AGM) on 9th December 2021.

The Board represented KAMS at a number of forums and participated in various working groups in 2021/22 including:

Aboriginal Regional  
Governance Group

NACCHO  
Board of Directors

Kimberley Aboriginal  
Health Planning Forum

Aboriginal Health Council  
of WA Environmental Health  
Forum

Kimberley Aboriginal  
Regional Body

Dampier Peninsula  
Clinics Transition  
Working Group

Fitzroy Valley Health  
Wellbeing Working Group

West Kimberley Futures  
(Empowered Communities)

Binarri-Binyja Yarrawoo (BBY)  
Empowered Communities

The KRS Board of Directors held 10 board meetings during 2021/22 and their AGM was also held on 9th December 2021.



# OUR ORGANISATION ABOUT KAMS



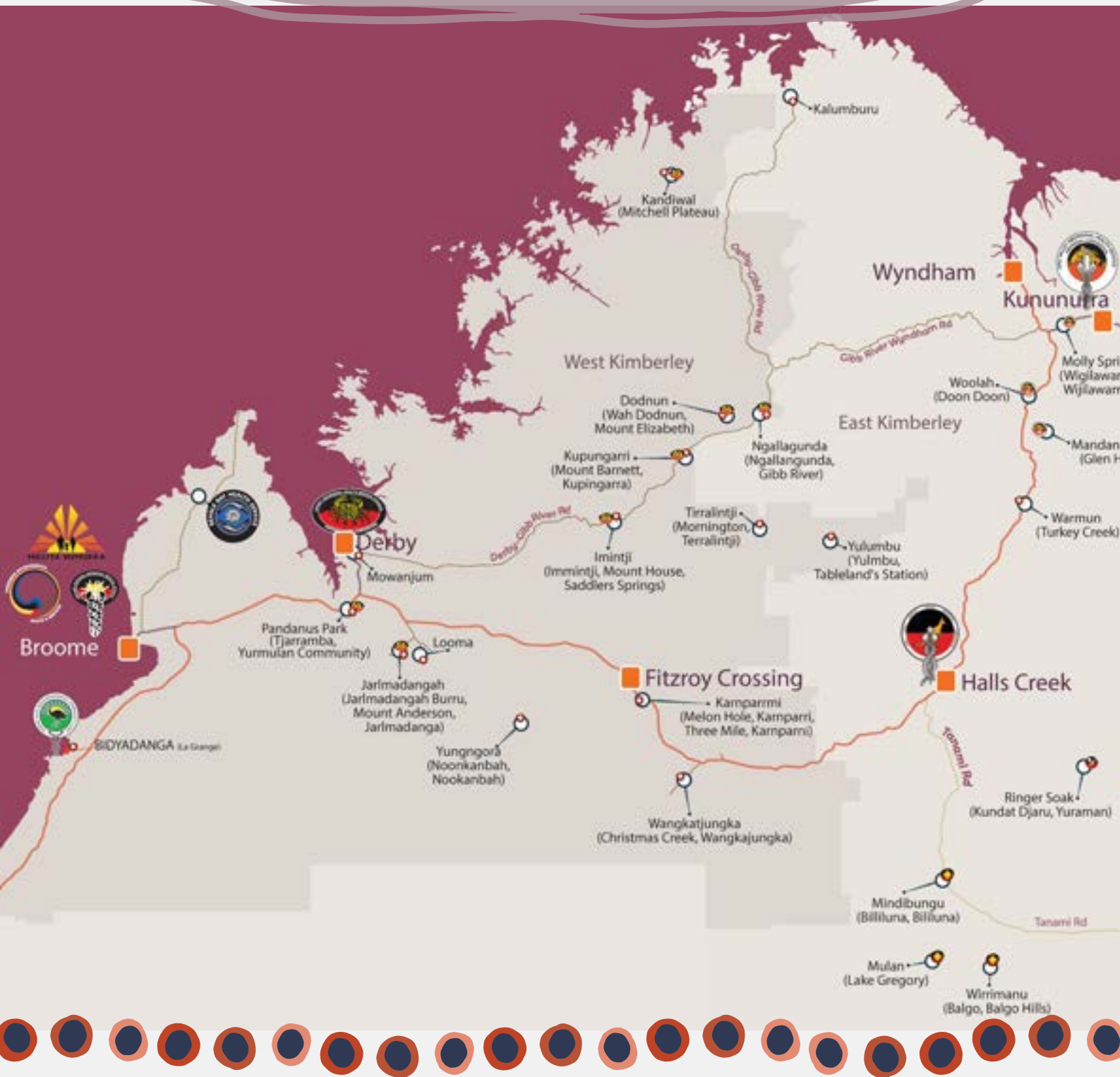
KAMS IS A MEMBER BASED, REGIONAL ABORIGINAL COMMUNITY CONTROLLED HEALTH SERVICES (ACCHS) PROVIDING SUPPORT AND REPRESENTING THE INTERESTS OF EIGHT INDEPENDENT ACCHS FROM TOWNS AND REMOTE COMMUNITIES ACROSS THE KIMBERLEY REGION OF WESTERN AUSTRALIA, AND KIMBERLEY RENAL SERVICES, WHICH IS A WHOLLY OWNED SUBSIDIARY.

KAMS was first established in 1986 as a cooperative between the Broome Regional Aboriginal Medical Service (BRAMS) and the East Kimberley Aboriginal Medical Service (EKAMS) now the Ord Valley Aboriginal Health Service (OVAHS) with membership expanding to Halls Creek health service committee and Fitzroy Crossing community representatives. These communities saw the benefit of sharing pooled resources and collective effort in the region.

KAMS is a member of AHCWA and of NACCHO.



# MAP OF KAMS & OUR MEMBER SERVICES





# OUR VISION, PURPOSE & VALUES

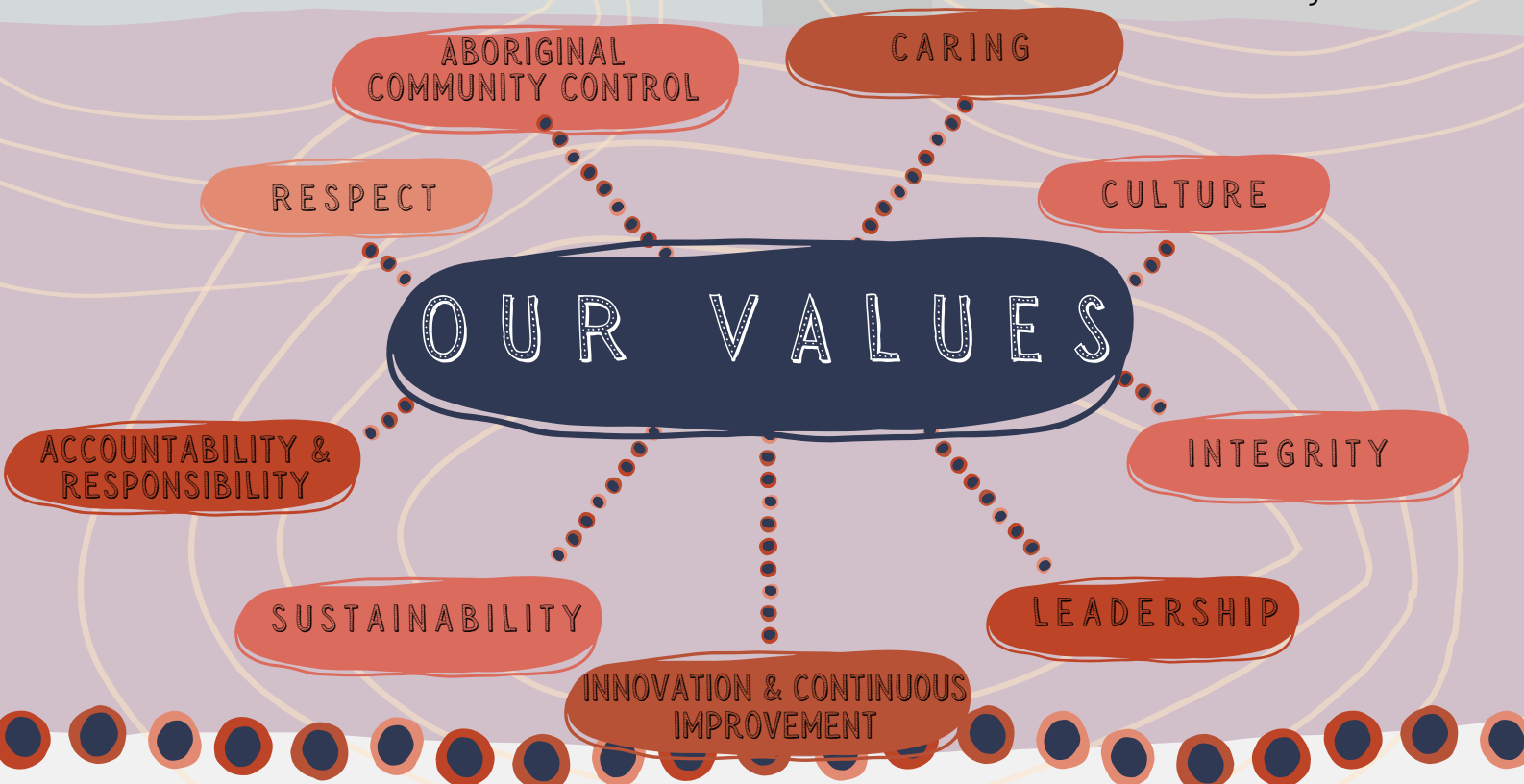


## OUR VISION

All Kimberley Aboriginal people are empowered to be strong, healthy and connected through Aboriginal community controlled services.

## OUR PURPOSE

To deliver holistic health and wellbeing outcomes to Kimberley Aboriginal people in partnership with Aboriginal led organisations that centres around Aboriginal culture and knowledge.





# KAMS STRATEGIC PLAN 2022-27

IN JUNE 2022, KAMS LAUNCHED ITS STRATEGIC PLAN 2022-27 (THE PLAN). THE PLAN HAS FIVE STRATEGIC PRIORITIES FOR ACHIEVING OUR VISION FOR ASSISTING OUR PEOPLE AND ORGANISATION.



## STRATEGIC PRIORITIES

### KIMBERLEY COMMUNITIES

Excellent health services and outcomes for Kimberley Aboriginal people

### ABORIGINAL ORGANISATIONS

Strong, sustainable and unified Aboriginal Community Controlled sector

### REGIONAL WORKFORCE

Skilled, supported and connected Kimberley Aboriginal health and wellbeing workforce

### HEALTH SYSTEM

Collaborative regional, state and national approach to improving Aboriginal health and wellbeing

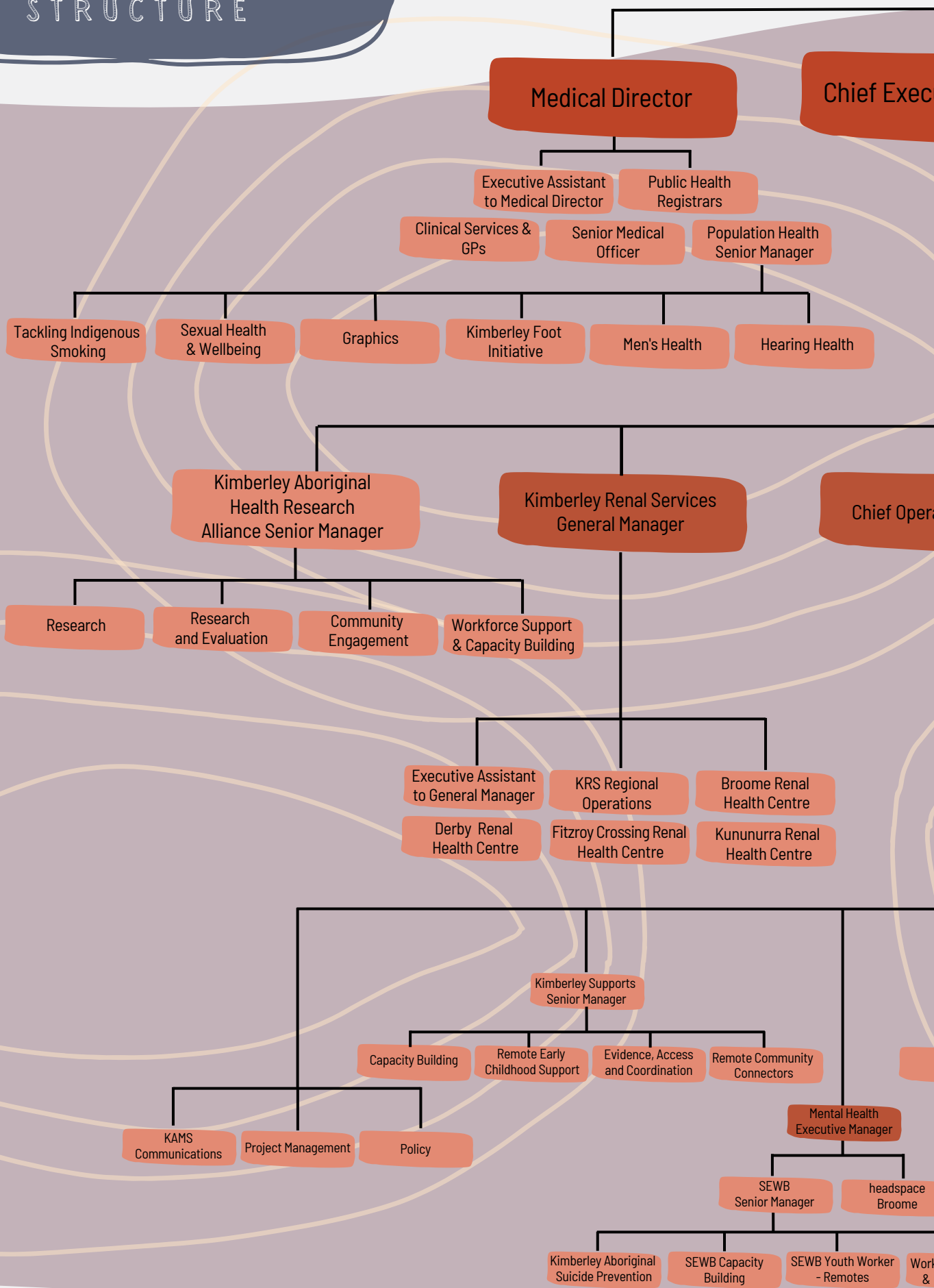
### SHARED KNOWLEDGE

Resourceful health system driven by research and innovation



# OUR ORGANISATIONAL STRUCTURE

KAMS Board





of Directors

Executive Officer

Executive Assistant



Communications Officer

Workforce  
Executive Manager

Chief Financial Officer

Travel

Payroll

Accounts Payable  
& Receivable

Accounting

Human Resources

Workforce  
Development

Registered Training  
Organisation

Occupational Safety  
& Health

ICT  
Executive Manager

Remote Services  
Executive Manager

ICT

MMEx

Health Informatics

Beagle Bay  
Health Centre

Bidyadanga  
Health Centre

Kutjungka  
Health Centres

ACCHS Model  
of Care

Administration  
Supports

Program Supports

Schools Health  
Nurse

Child Health  
Nurse

Corporate Services  
Executive Manager

Assets

Property

Quality

Workforce Learning  
Development





ACCREDITED HEALTH TRAINING  
AND EDUCATION

FINANCIAL &  
ACCOUNTING

CORPORATE SERVICES

INFORMATION COMMUNICATION  
TECHNOLOGY SUPPORT

REGIONAL POPULATION  
HEALTH PROGRAMS

KAMS PROVIDES A WIDE RANGE  
OF SERVICES INCLUDING:

RESEARCH

SOCIAL AND EMOTIONAL  
WELLBEING SUPPORT

HEALTH PROMOTION

While our major role is in regional advocacy and support for our Member Services, KAMS also provides comprehensive primary health care services in the remote communities of Beagle Bay, Bidyadanga, Balgo, Billiluna and Mulan.

In 2014, KAMS established Kimberley Renal Services Pty Ltd to manage the provision of regional renal support and dialysis services in Broome, Derby, Kununurra and Fitzroy Crossing.



# TRANSITION OF REMOTE HEALTH CENTRES TO ABORIGINAL COMMUNITY CONTROL

All Transition Projects gained momentum in this reporting period through the engagement of a Consultant Project Manager in August 2021.

A key feature of the transition landscape was the establishment of local governance structures through Working Groups, to support Aboriginal community-led processes, the implementation of a monthly schedule of Working Group meetings and the development of key project documents such as the Project, Implementation, Risk and Communications Plans

Transition meetings in all locations were suspended from March to May 2022 as the KAMS Board of Directors, Bidadanga Aboriginal Corporation La Grange Inc (BACLGI) Board and Working Groups enacted their Risk Plans in response to the Kimberley COVID-19 outbreak and the need for KAMS to oversee and manage outbreak planning responses across the region.

## Transition of the Bidadanga Remote Health Centre

Bidadanga is a community with complex health needs including high levels of chronic disease, acute and emergency care presentations and emergency evacuations. Around 75% of adults and 30% of children have a chronic disease. Bidadanga clinic services 526 regular clients, however acute and emergency care presentations are also high, accounting for 60% of the overall 10,000 annual occasions of service. The service is on-call 24-hours a day for accidents and emergencies and each year there are on average 1200 after-hours presentations and 120 emergency evacuations.

The project aim is:

To transition the Bidadanga Remote Health Centre from KAMS to BACLGI by December 2023.

The Transition Project Team continued to meet monthly with the BACLGI Board throughout the reporting period to build capacity and transfer skills and knowledge with respect to the management of comprehensive primary healthcare services under the ACCHS Model of Care. Additional governance documents, such as the Project, Risk and Communications Plans were approved by the BACLGI Board to guide transition actions as outlined in the approved Implementation Plan.

For the first time, the BACLGI Board went into negotiations with the Karajarri people, the Bidadanga native title holders, with the support of the WA Department of Premier and Cabinet (WA DPC), to agree on new land tenure arrangements to support the construction of a new Remote Health Centre. Bidadanga was selected as one of ten remote Aboriginal communities across the Kimberley and Pilbara regions for land tenure reform to create opportunities for renewed investment in essential and municipal services, based on strong community leadership, work opportunities, and the capacity for the community to be used as a service hub.

The WA Government's Land Activation Pilot Project saw the BACLGI leadership, Karajarri Traditional Lands Association (KTLA) and the WA Government agree to the proposed use of the existing Clinic site for a new Remote Health Centre. At the end of the reporting period, negotiations were ongoing with respect to an Indigenous Land Use Agreement (ILUA) to regularise and secure tenure for the clinic site by November 2022.


As a result of the Bidadanga Remote Health Centre building being more than 30 years old, with limited access for low mobility patients, no dedicated staff access and limited space to allow for the provision of comprehensive primary health care through the ACCHS Model of Care, KAMS lodged a significant Expression of Interest (EoI) application to the Australian Government for Capital Works funding for a new Remote Health Centre. As at 30 June 2022, the EoI had progressed to Stage 2.

BACLGI Board elections were held in late 2021 and resulted in a change of leadership in the BACLGI Chairperson role. Pastor William Bangu was appointed to the KAMS Board as the Bidadanga representative by virtue of his new role as the BACLGI Chairperson.

## Transition of the Remote Health Centres at Lombadina and Ardyaloon

With the support from Lombadina, Djarindjin and Ardyaloon community leaders, KAMS worked with WA County Health Services (WACHS) to establish a Working Group to oversee the transition of clinics to Aboriginal Community Control. The first meeting of the Dampier Peninsula Transition Working Group (DPTWG) was held on 29 October 2021 in Lombadina and was attended by the CEOs and Chairpersons of each of the communities. KAMS, WACHS, the WA Department of Health (WA DoH), the Australian Government Department of Health (AG DoH) and the Australian Government Department of Social Services (AG DSS) were also in attendance. At the request of community leaders, KAMS and WACHS Co-Chair the DPTWG and meetings were held monthly as per the requirements of the approved Terms of Reference.





## The project aim for the Transition of Remote Health Centres at Lombadina, Djarindjin and Ardyaloon are that:

- Clinical services be transitioned from WACHS to KAMS by December 2023
- Assets (including land and buildings) be transitioned from WACHS to KAMS by June 2024
- Along with the Beagle Bay Clinic, the Dampier Peninsula ACCHS be established by June 2029.

## The objectives of the Project Plan are to:

- Ensure the efficient commencement of service provision by KAMS and the orderly winding up of service provision by WACHS
- Ensure a smooth transition and continuation of current primary health care services
- Minimise any issues and/or risks including misinterpretation or miscommunication
  - Minimise the impact on patients, communities and stakeholders
  - Schedule and complete the transfer of records, information, equipment and assets
- Establish the relationships, systems and procedures that will be used for the ongoing governance and management of the new service arrangements.

In July 2021, “in-principle” agreement at officer level was reached between the WA DoH and the AG DoH that unspent Health Innovation Fund Stage One funding be used to progress the Dampier Peninsula transition and establishment of an ACCHS in Fitzroy Crossing. Prior to formal work on the transition commencing, the WA DoH and AG DoH needed to reach an agreement on a revised Project Agreement and have this approved by the Australian and WA Health Ministers. Ministerial approval was delayed due to the Federal Election in May 2022 and while the WA DoH and AG DoH remained very supportive of the Transition Project, as at 30 June 2022, neither a funding agreement nor letter of offer had been provided to KAMS and WACHS.

### Establishment of a new Aboriginal Community Controlled Health Service in Fitzroy Crossing

The Fitzroy Valley Health and Wellbeing Project (FVHWP) commenced in September 2020 following a community meeting where Fitzroy Valley residents expressed their concerns about the high levels of socio-economic disadvantage, poor health outcomes and lower life expectancy, which were exacerbated due to there being no access to a dedicated primary health care service in the Fitzroy Valley. The outcome of the meeting was an invitation to KAMS to work alongside the community to establish a dedicated primary health care service in Fitzroy Crossing.

A second community meeting was held on 18 August 2021, where the community confirmed that the project, now to be known as the ‘Fitzroy Valley Health and Wellbeing Project’, should proceed with a Working Group established and supported by KAMS.


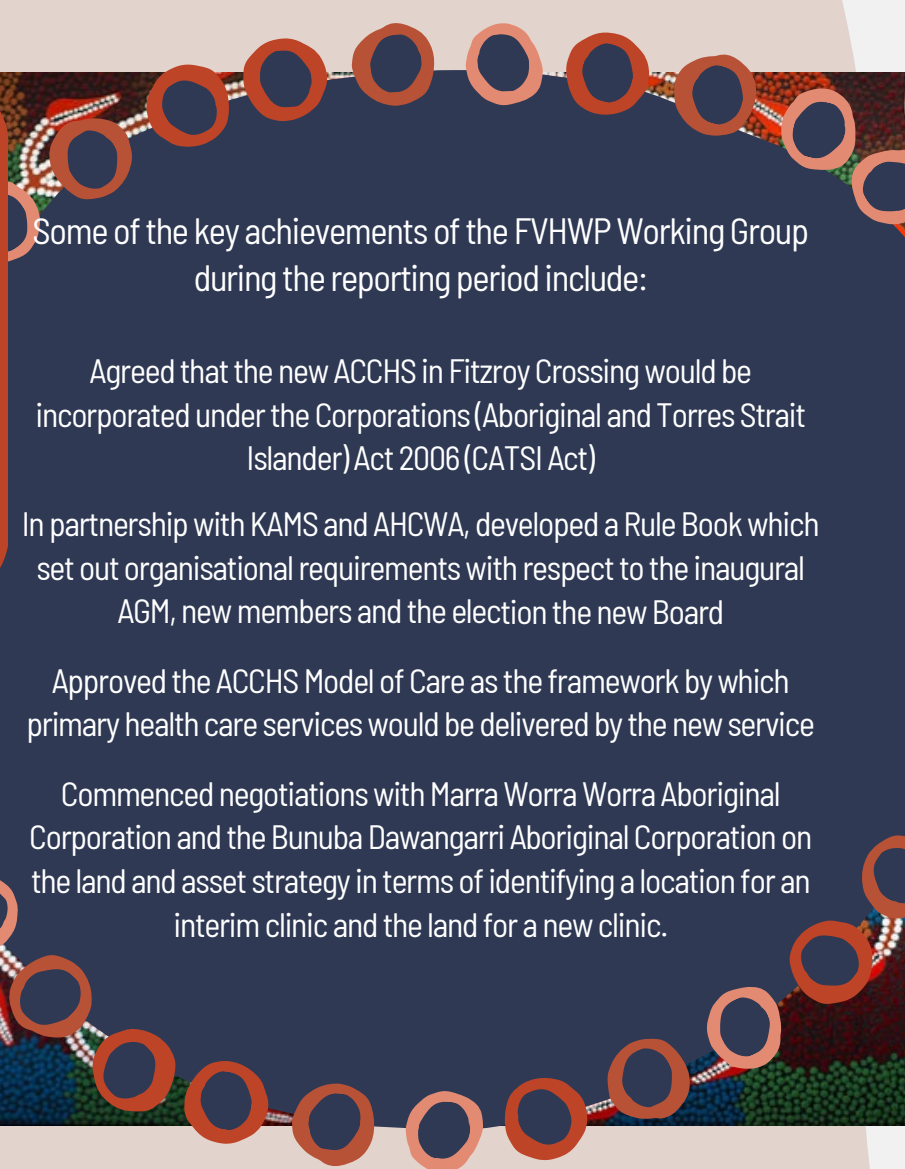
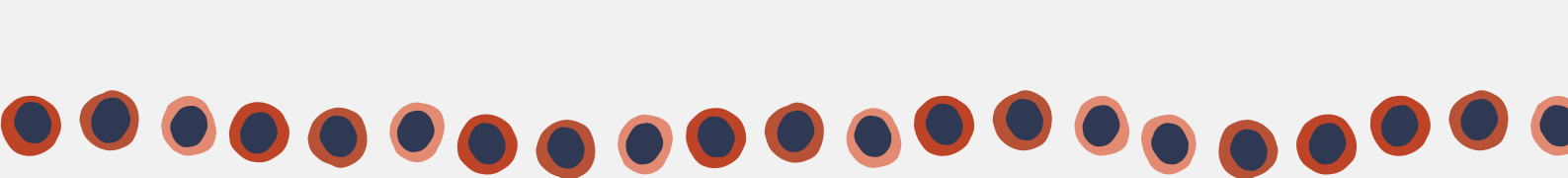
At the meeting, community members endorsed the following project aim:

A new ACCHS be established to deliver primary health care services in Fitzroy Crossing with an interim ACCHS to be operationalised by 2023 and a full ACCHS to be operationalised by 2026.

Through their Terms of Reference, the Working Group guides, directs, advises and makes key decisions until a Board of Directors is elected at its inaugural AGM. During this interim period, the KAMS Board endorsed key decisions of the FVHWP Working Group until legal frameworks were developed to support the incorporation of a new organisation and election of a new Board which could make binding decisions.

The Working Group is place-based, responsive to local needs and circumstances and is comprised of local Aboriginal and non-Aboriginal residents who possess critical insights and, for many, direct lived experience of the health needs of community members. The FVHWP Working Group is Co-Chaired by Mr Joe Ross and Ms Delvene Green. During the reporting period, it met monthly to develop its governance mechanisms and a land & asset strategy. WACHS, the AG DoH and the AG DSS attend every second FVHWP Working Group meeting as stakeholder members.





The FVHWP Working Group identified that Aboriginal community-led local decision making and community engagement would be essential to the success of the project. As such, a Communique, which summarised the important issues discussed and decisions made at Working Group meetings was circulated broadly to residents, local organisations and communities. The Working Group also sought to engage and partner with the network of local Aboriginal organisations in Fitzroy Crossing including Nindilingarri Cultural Health Services, Marra Worra Worra Aboriginal Corporation and the Bunuba Dawangarri Aboriginal Corporation.

Some of the key achievements of the FVHWP Working Group during the reporting period include:

Agreed that the new ACCHS in Fitzroy Crossing would be incorporated under the Corporations (Aboriginal and Torres Strait Islander) Act 2006 (CATSI Act)

In partnership with KAMS and AHCWA, developed a Rule Book which set out organisational requirements with respect to the inaugural AGM, new members and the election the new Board

Approved the ACCHS Model of Care as the framework by which primary health care services would be delivered by the new service

Commenced negotiations with Marra Worra Worra Aboriginal Corporation and the Bunuba Dawangarri Aboriginal Corporation on the land and asset strategy in terms of identifying a location for an interim clinic and the land for a new clinic.



# KIMBERLEY ABORIGINAL HEALTH PLANNING FORUM (KAHPF)

The Kimberley Aboriginal Health Planning Forum (KAHPF) is the peak regional health forum for improving health outcomes for Aboriginal people in the Kimberley through coordinated planning and delivery of health care and related services.

The core members of KAHPF are currently:

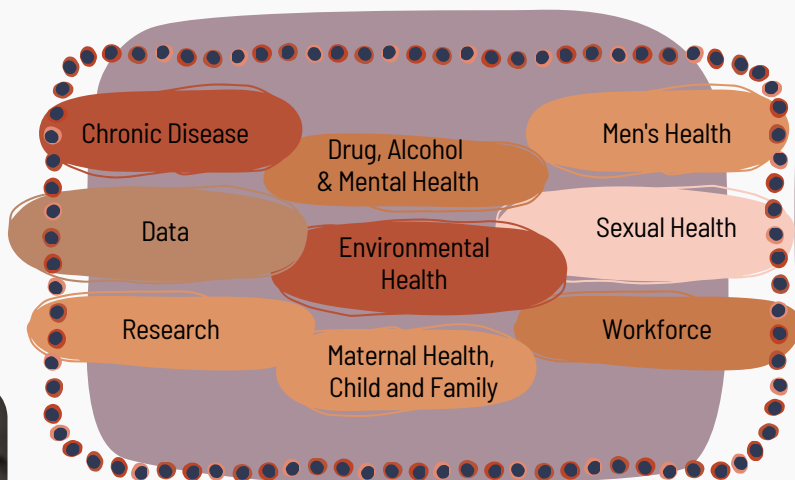


KAMS leads the KAHPF and provides support to ensure the members continue to meet and maintain collective investment, partnerships and accountability.

Five KAHPF meetings were held in the 2021-2022 period.

The KAHPF Strategic Plan 'Together in Wellness' outlines the key priorities that will drive KAHPF's vision for Kimberley Aboriginal people, families and communities to lead strong, self-determining and healthy lives.

The KAHPF have established sub-committees in consideration of regional health needs and as at the end of the reporting period, there are currently 9 sub-committees all with Terms of Reference and memberships drawn from KAHPF member organisations



The KAHPF sub-committees are responsible for managing the KAHPF Clinical Protocols. The protocols were developed to standardise the screening for, and management of, health conditions prevalent in the Kimberley region.



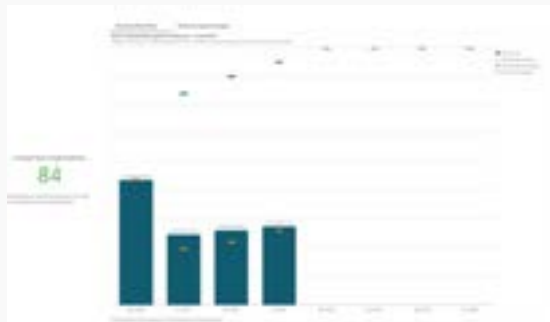
**Kimberley  
Aboriginal  
Health**  
Planning Forum





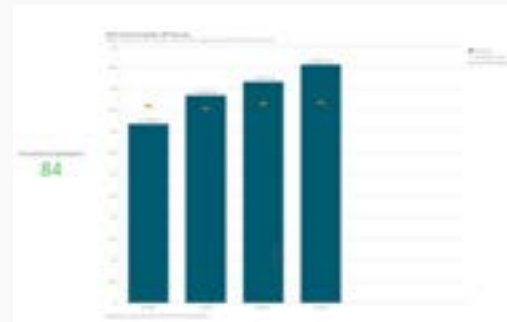
# KEY PERFORMANCE INDICATORS

PI14 –Influenza Vaccinations



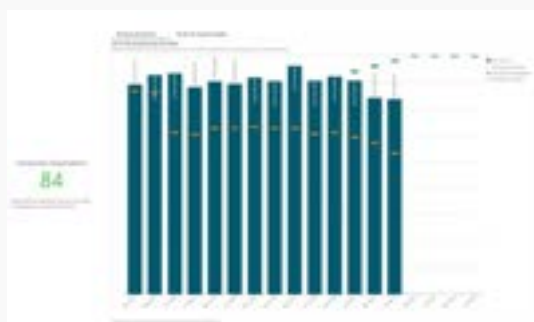
Although there appears to be a decrease from December 2020 to June 2021 data, there is a steady increase which coincides with the arrival of the COVID-19 vaccine resulting in a marked increase in vaccination rates.

PI22 – Cervical Screening



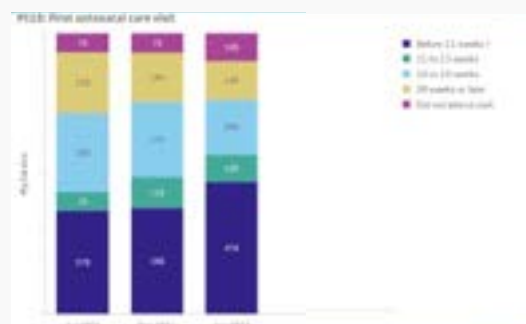
We show an increasing trend in testing and outperform the national average for our comparative group, delivering a 4% increase in performance in one milestone period.

PI23 –Blood Pressure chronic disease patients



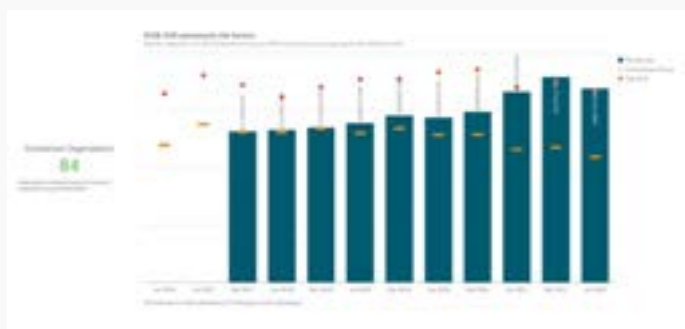
The green line is what we set ourselves as an organisational target to work towards as per our activity plan. It is important to note that we have kept increasing in performance against the national comparative average trend.

PI13 – 1st Antenatal care visit



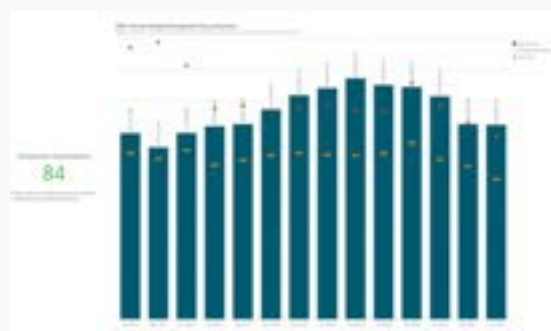
We show an increase in engagement for women attending their 1st Antenatal visit within the first 11 week returning a 9% increase for the last milestone period.

PI20 – CVD Risk Assessments



The trend is upwards against the current comparative national trend and we performed in the top 25% of the national comparative group.

PI07 – Chronic Disease Management Plans



The results remained stable and we performed consistently ahead of the national comparative group when you reflect on the trending data and consider with COVID-19 at the forefront.



# COVID-19 RESPONSE

## COVID-19 Rapid Response Team

On 24th February 2022, Bidadanga community went into lock down as a result of the first confirmed cases of COVID-19. At the time, 17 people tested positive in Bidadanga with positive cases also being reported in Beagle Bay.

KAMS stood up its Incident Management Team (KIMT) and directed that all Broome based staff would Work from Home (WFH) from 28th February with offices at 12 and 27 Napier Street in complete lock down with the exception of Stores. With the WFH directive in place, all program work involving travel to remote communities and towns were also suspended.

The CEO and Medical Director attended daily (and sometimes twice daily) Public Health Emergency Operations Centre (PHEOC) and Regional Emergency Operations Centre (REOC) briefings to ensure that there was clear communication and coordination of information and resources to support incident management responses within KAMS, its Members as well as stakeholders such as WACHS and communities across the Kimberley region.

Rapid Response Teams were deployed to KAMS Remote Clinics and Renal Centres to assist Clinic and Renal staff with the critical work to complete whole of community testing, distribute Rapid Antigen Tests (RATS), swab patients or distribute COVID care packs to positive patients. The Rapid Response Teams were in place to assist with staff fatigue.



The Clinical Services team trained non-clinical KAMS staff to complete these tasks and KAMS partnered with its Members and ACCOs to train community representatives on the Dampier Peninsula to don and doff PPE, swab and distribute RATS across affected communities. This resulted in the development of a new role called Community COVID Support Officer.

A full organisational chart was in play for the duration of the 2022 outbreak which saw KAMS Broome based staff working across Internal or External Communications teams, SEWB, Logistics, ICT or Rapid Response teams.

KAMS staff worked in other roles within Logistics and Stores teams to support the surge in service delivery. These tasks included picking up / delivering medication, picking up and delivery of food supplies, half-way meets between Bidadanga and Broome and packing COVID-19 care packs while ensuring that RATS supplies were consistently on hand for members such as Nirrumbuk Environmental Health Service who would deliver to community.

The Senior Management Team (SMT) was re-established to assist with the distribution of clear communications across all Broome based program teams.

It was a true team effort by all KAMS staff and while the initial cases in Bidadanga and Beagle Bay were false positive results, the logistical efforts early on in the 2022 Outbreak ensured that Rapid Response Teams, Communications and Logistics were ready and prepared to support our Clinic and Renal teams on the front line in later outbreaks.



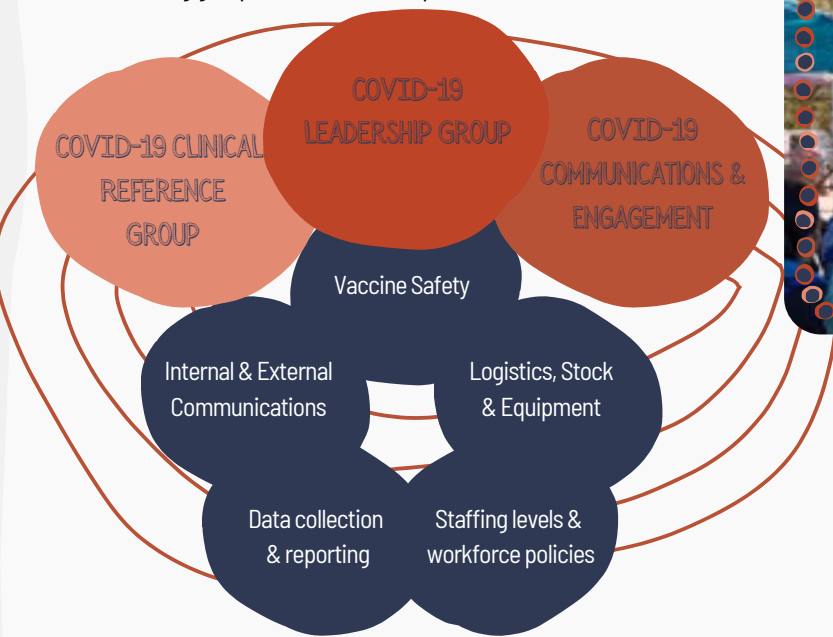




### COVID-19 Vaccine Program

Over the period of 2021-2022, the KAMS COVID-19 Vaccine program included a broad range of targeted activities and initiatives to ensure COVID-19 vaccines were available and accessible to Aboriginal people and communities across the Kimberley region.

As part of KAMS COVID-19 Vaccine program, a number of governance groups were established to guide the implementation of the vaccine within KAMS Remote Clinics, headspace Broome, Kimberley Renal Services, as well as KAMS Member Services. This included the following groups with the focus topics:



The KAMS COVID-19 Vaccine Team collaborated with WACHS and RFDS to distribute COVID-19 vaccines to the main towns and remote communities across the Kimberley region. This partnership worked together on several initiatives along with local ACCOs, Aboriginal Medical Services and other local organisations.



The KAMS COVID-19 Vaccine team took a community-led approach by engaging with Aboriginal community leaders to develop place-based initiatives. Communication materials were adapted to reflect the needs of each community through the use of local language speakers to ensure that key public health messages were conveyed in culturally safe ways.



KAMS Remote Clinic staff, including Aboriginal Health Workers, Doctors, Drivers, Nurses and administration staff, worked together to support COVID-19 vaccine activities in remote communities and the towns, providing information sessions, school in reach services, door to door engagement, and mass vaccination clinics.

11 Vaxathons were held in the towns across the Kimberley, with a total of 4197 vaccines administered to people 5 years and over (adult and paediatric COVID-19 vaccine). Some residents took the opportunity to receive their annual influenza vaccination in conjunction with their COVID-19 shot.



A number of vaccine events took place in remote communities with the support of KAMS Remote Clinics, including community information days and vaccine events in Bidyadanga, Beagle Bay, Balgo, Billiluna and Mulan. Vaccine communications were developed in partnership with remote communities to suit the needs of the community, with incentives selected by the community in the form of food vouchers, power cards, and phone credit.

In July 2021, KAMS identified the need for regional COVID-19 vaccine information to be responsive to, and reflective of, the needs of Kimberley community members. KAMS engaged with Rhythm Content based in Perth, Western Australia, to develop the concept and content for a KAMS COVID-19 Vaccine Campaign and posters. The target audience for the COVID-19 vaccine campaign was Aboriginal people aged 12 years and over, specifically in regional / remote WA. The campaign ran for a total of 10 weeks (end of 2021 to Feb 2022) and aired during the AFL Finals series (including Grand final), and other targeted shows to increase viewing numbers. The vaccine campaign was supported by NACCHO.

In October 2021, KAMS received funding support from the National Indigenous Australians Agency (NIAA) to undertake COVID-19 vaccine initiatives, working with local health care providers and community organisations to facilitate vaccine events across the Kimberley. KAMS collaborated with our member services and other stakeholders such as WACHS, RFDS, Kimberley Pharmacy Services, and other organisations, to lead mass vaccination clinics (Vaxathons) which were adapted to meet the needs of the local community.





# HEADSPACE BROOME

During 2021-2022, headspace Broome provided 2,139 Occasions of Service of which 44.5% identified as Aboriginal & Torres Strait Islander people:

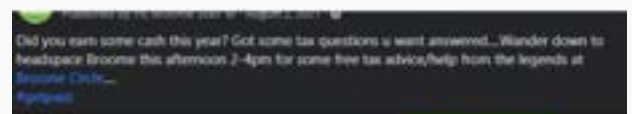
- 39 young people (of which 74.5% identified as Aboriginal & Torres Strait Islander people) were serviced through the Individual Placement Support (IPS) vocational trial with 440 occasions of service in this program. IPS is funded by the Department of Social Services, Australian Government (DSS).
- 115 Group Occasions of Service have been completed during this financial year. System Restore, a co-designed group for socially isolated young people has consistently engaged isolated young people run by a peer worker and makes up the majority of these. Healthy hoops-an initiative co-designed with a former Indigenous Youth engagement Trainee aims to provide a soft access point to a GP and work and study opportunities through a yarn, basketball, and a feed for young Indigenous men 17-25 years of age. Healthy Hoops is funded by a grant from Rio Tinto.
- 21 Peer work sessions were completed with Social and Occupational Functioning Ratings (SOFA) showing increased scores for anyone who has used this service. This is a new service to headspace Broome and is funded by Lotterywest.

Social and Emotional Wellbeing (SEWB) support delivered through Footprints to Better Health funding delivered 117 occasions of service. SEWB support was severely impacted by COVID-19. Take a Step funding from headspace National provided care and communications packages to Indigenous young people who were moving to digital service delivery affected them.

The Million Minds Mission Research Project partnership with Curtin University – “Our Journey Our Story” – is a project linking headspace Broome staff with Elders and young people to progress and co-design service improvements for Aboriginal and Torres Strait Islander young people. This has positively impacted service delivery with a greenspace out the back of the headspace Broome clinic, as a culturally appropriate area for young people and their families.

A headspace Day grant provided a great opening for our therapeutic greenspace which was opened by local Elder Uncle Kevin.

headspace Broome Youth Advisory Council (YAC) continues to provide solid advice and recommendations on all things headspace and have a positive contribution to the centre.



## TAX-space 2021 @ headspace Broome

Don't let a little confusion about your taxes stop you from getting the help you need. Get some tax questions answered... Wander down to headspace Broome this afternoon 2-4pm for some free tax advice/help from the legends at Broome Clinic...

Did you earn some cash this year? Got some tax questions u want answered... Wander down to headspace Broome this afternoon 2-4pm for some free tax advice/help from the legends at Broome Clinic...

Monday 13 August 2021  
2pm-4pm @ headspace Broome

What you will need:  
your Taxfile 101 and personal  
your income phone to receive your taxfile 101  
your bank account details (BANK and account  
number)  
your 2020-21 tax return (if you  
are eligible for a refund of overpayment)  
If you are not eligible for a refund, you can still  
claim a refund on your 2020-21 tax return  
If you are not eligible for a refund, you can still  
claim a refund on your 2020-21 tax return

Don't miss this chance to get your tax questions answered and get your taxfile 101 and personal  
your income phone to receive your taxfile 101  
your bank account details (BANK and account  
number)  
your 2020-21 tax return (if you  
are eligible for a refund of overpayment)  
If you are not eligible for a refund, you can still  
claim a refund on your 2020-21 tax return  
If you are not eligible for a refund, you can still  
claim a refund on your 2020-21 tax return





#### Good news stories:

- IPS - A long-term IPS participant, who was supported into her first job 12 months ago, achieved a massive goal of obtaining her first rental apartment. A job and a house from where this young person has come are simply inspiring and a great reason why we have IPS in our centre.
- Peer Work - Our peer worker has been a massive asset to the organisation, always advocating for what's best for young people. This new addition to our program suite feels right and a testament to this young person who bravely shares his lived experience of mental health.
- System Restore - This group is the essence of co-design. A consistent at headspace for over 3 years, this group provides social inclusion for those isolated and into gaming. It has provided a vehicle for those experiencing disadvantage to step up into leadership roles amongst their peers.
- YAC had an impromptu opportunity to be guests of the Governor General-his excellency David Hurley and his wife. The YAC highlighted what it is like in a regional centre and some of the struggles youth face - but it was the positives that stood out to the Governor General.



#### Service promotion and education snapshot:

- July 7th 2021- NAIDOC stall courthouse markets
- 21st July Clontarf centre visit
- 27th July Stars Presentation school -focus on nutrition
- 2ns August TAXSPACE-initiative with Broome circle
- 4th August RAC Road safety workshop
- 6th August Stall Roebuck Family picnic day
- 10th August year 7 and 8 life skills chat Clontarf
- 16th August Take a step Campaign Launch
- 9th September RUOK Day -Broome Senior activity, TAFE activity, headspace activity
- 16th September Governor General web catch-up with YAC
- 6th October headspace day
- 12th OJOS historical Broome tour
- 13th Chamber of Commerce Sundowner event
- 14th healthy hoops @ town beach wheelchair basketball event
- 20th October Pinakara @ Nirumbuk headspace presentation
- 2nd November St Marys Clontarf visit
- 16th December Headspace Xmas QUIZ
- 9th and 10th June Take a step session
- 14th June- Clontarf year 210 visit
- 17th June- NRL centre visit
- 21st June Naidoc event at TAFE & BSHS
- 24th NAIDOC day Reconciliation March



# SOCIAL AND EMOTIONAL WELLBEING (SEWB)

## Workforce Support and Development Unit

KAMS Workforce Support and Development Unit (WSDU) have a purpose to develop and support the capacity, confidence and responsiveness of the Aboriginal and Torres Strait Islander Social and Emotional Wellbeing (SEWB) and Alcohol and other Drug (AOD) workforce, inclusive of frontline staff, supervisors and managers, to address the significant and increasing need for SEWB, mental health and AOD assistance for Aboriginal and Torres Strait Islander individuals, families and communities in the Kimberley.

Key tasks in performing this operation include;

- Service mapping for SEWB/AOD specific roles, programs and activities
- SEWB workforce annual forums
- Monthly SEWB Manager meetings
- Involvement and contributions to SEWB research
- Completing a regional training needs analysis for the workforce
- Membership with SEWB workforce working groups nationally and state-wide
- Provision of Mental Health education, training and awareness
- Networking and sharing of SEWB, AOD and mental health information
- SEWB mentorship, support and guidance.



The major achievements and successes for the SEWB WSDU team in the reporting period include:

- 2021 Annual SEWB Regional Forum – the forum was held on Miriung and Gajerrong Country (Kununurra) with around 40 attendees from across the region.
- 2022 Annual SEWB Regional Forum – the forum was held on Nyikina Country (Derby) with around 40 attendees from across the region.
- Training Needs Analysis 2021/2022 – conducted with SEWB/AOD service providers across the region to inform workplans aligning to workforce support, development and capacity building.
- WSDU Monthly Manager Meetings 2021/2022 – regular meetings to keep up to date with workforce operations.
- SEWB Induction Guide 2022 – the development of a culturally appropriate SEWB workforce guide to assist the Aboriginal workforce in understanding and fulfilling their roles.





## Kimberley Aboriginal Suicide Prevention Trial

2021-22 saw the Kimberley Aboriginal Suicide Prevention Trial (2018-2021) reach completion and transform towards what is now described as the transition phase of the WA Primary Health Alliance (WAPHA) funded trial. For the past 12 months, KAMS Social and Emotional Wellbeing – Suicide Prevention Team have been supporting the work under the transition by way of the following programs:

### Julgungurru Healing:

In partnership with the Kimberley Aboriginal Law and Culture Centre (KALACC) and the Yiriman Project, KAMS has supported the trial of a Traditional Healing Pilot Program. The Pilot utilises bush medicines and the practice of Mabaarn to support healing in both mental and physical ailments. The Pilot has worked with clients and will continue through to 30 June 2023.

## No Wrong Door Project

The No Wrong Door project is an initiative with the collective organisational commitment to work together to meet the needs of community, including young people, through cultural and clinical healing and coordinated partnership to prevent deliberate self-harm and suicidal behaviors in the Kimberley region. The initiative highlights three areas of priority being;

- Develop and implement a 'No Wrong Door' approach to ensure that those in need can access support at multiple points;
- Foster and support safe places for youth, including family and community level resources and services;
- Build capacities through training and support, including family, community and service providers.

### LIYAN Young Mob Training

The LIYAN Young Mob Training is a training package based around the LIYAN Suicide Prevention Training developed by KAMS. This is a version for young people that was workshopped with the Kimberley Empowered Young Leaders.





### Wirnan Creative Project

The Wirnan Creative Project brings together five Kimberley Art Centres to continue a successful regional collaboration established in 2008/09 focused on promoting and sharing the diversity and richness of Aboriginal art, language and identity of the Kimberley region.



### Wot Na, Wot Kine Media campaign

The Wot Na' Wot Kine youth media campaign was codesigned by Goolarri Media with Empowered Young Leaders and launched in October 2019. The campaign has since been an important resource in continuing to encourage conversations around help seeking.

### Cultural Security Framework

The Cultural Security Framework for Kimberley Mental Health / Social and Emotional Well-being and Alcohol and Other Drugs Services was developed by the Drug Alcohol, and Mental Health Sub Committee (DAMH SC) of the Kimberley Aboriginal Health Planning Forum (KAHPF). An agreement was signed by all KAHPF member agencies in December 2019, committing to the implementation of the Framework and the continuous quality improvement of cultural safety.

### Community Liaison Officers

In addition to these projects, 2.0 FTE Community Liaison Officers also support the East and West Kimberley regions through driving Social Emotional Wellbeing and suicide prevention activities in community.





# KAMS REMOTE HEALTH CENTRES

**All KAMS Remote Health Centres strive to provide culturally safe primary health care with funding provided by the Commonwealth Department of Health under the Indigenous Australians' Health Program (IAHP).**

Along with clinical services, KAMS Remote Health Centres also deliver a number of preventative health programs, including: Women's Health, Men's Health, Chronic Conditions, Child Health, School Health, Sexual Health, and Maternal Health. The program champions are all Aboriginal Health Workers with support from other clinical staff. This approach ensures that services are delivered in culturally appropriate ways that are proving to be successful and are gaining momentum and popularity.

Staff regularly visit patients in their homes to deliver medications, administer injections and to check wellbeing.

Each Remote Health Centre operates a 24-hour accident and emergency service and clinical staff work closely with the RFDS when patients require evacuation from the community. Our clinics provide vital transportation services for patients who need to travel to Broome, Halls Creek or Kununurra for specialist appointments. Staff also assist patients to access the Patient Assisted Travel Scheme (PATS) when travel to Perth for tertiary care is required.

## COVID-19 Response

During the COVID-19 outbreak, Broome based clinical staff were deployed to assist our Clinics with testing, contact tracing and COVID-19 check-ins. All clinics provided daily check-ins with all high risk COVID-19 positive patients, while also delivering primary health care to the communities so as to continue to meet the health needs of the whole community. This meant many hours for our staff in full PPE in very hot conditions

Our remote clinics have been preparing for a COVID-19 outbreak since 2019 and some of the preparatory actions included:

- Set up a dedicated isolation room for patients with respiratory symptoms or fever
- Trained staff in proper hygiene and use of Personal Protective Equipment (PPE)
- Provided regular updates to the local Community
- Staff assisted the community in developing the Local Pandemic Plan
- Prepared for Point of Care Testing
- Started GP telehealth services

All remote Aboriginal communities closed during the COVID-19 outbreaks in March 2022 when the remote community leadership enacted their Local Pandemic Plans.





## KAMS REMOTE CLINICS PATIENT DATA 2021-22

BEAGLE BAY

BIDYADANGA

KUTJUNGKA

OCCASION OF  
SERVICE

6,420

8,894

11,468

NO. OF  
REGULAR  
CLIENTS\*

405

932

1215

NO. OF EMERGENCY  
PRESENTATIONS

235

164

591

NO. OF EMERGENCY  
EVACUATIONS

35

30 RFDS,  
5 VIA ROAD

37

715 HEALTH  
CHECKS

60

85

55

FLU  
VACCINES

283

246

372

\*A regular client denotes someone who has been seen in the clinic at least three times in the past 24-months

## THE FOLLOWING VISITING SERVICES ARE PROVIDED AT KAMS REMOTE HEALTH CENTRES:

SPECIALIST	FREQUENCY		
	BEAGLE BAY	BIDYADANGA	KUTJUNGKA*
Diabetes Education	Monthly	Monthly	4x Annually
Physiotherapist, Occupational Therapist	Monthly	Monthly	4x Annually
Child and Adolescent Mental Health	Monthly	Monthly	Every 6 weeks for 1 week
Dietician	Monthly	Monthly	4x Annually
Cardiology and Echo	Bi-Annually	Bi-Annually	Bi-Annually
Physician	Monthly	Monthly	3x Annually
Mental Health	3x Annually	3x Annually	Every 6 weeks
Renal Team	Every 8 weeks	Every 8 weeks	4x Annually
Paediatrician	5/6 times per year	5/6 times per year	Bi-Annually
Podiatrist	Monthly	Monthly	4x Annually
Psychiatrist	4x Annually	4x Annually	4x Annually
Optometrist	4x Annually	4x Annually	Bi-Annually
Dentist	4x Annually	4x Annually	-
Renal Physician	-	-	4x Annually

\*These services were impacted due to COVID-19 restrictions and visits were converted to telehealth wherever possible.



## Beagle Bay Health Centre

Beagle Bay is a small Aboriginal community located on the Dampier Peninsula approximately 130 km north of Broome.

New Directions funding from the Commonwealth Government employs a dedicated Midwife to provide services to the Dampier Peninsula communities of Beagle Bay, Lombadina and Ardylaoon. Healthy Country Kids, WA Government funding employs a School Health Nurse and a Child Health Nurse to visit the clinic and school regularly.

The Beagle Bay Remote Health Centre has hosted clinical placements for 3 Aboriginal Health Worker students.

### Primary Health Care Focus

Staff in the Beagle Bay Clinic ran several health promotion days in community, including a child health sports day during school holidays to encourage children and their families to have their annual health checks. Lots of fun was had by everyone who participated in the sports day.





## Bidyadanga Health Centre

Bidyadanga is the largest remote Aboriginal community in WA, located 180 km south of Broome.

A Community Liaison Officer is employed to improve cultural safety and Traditional Healers work in the Clinic when requested by patients. Strengthening Aboriginal Health funding from the WA Government provides a full-time GP in the clinic. Healthy Country Kids funding from the WA government employs a School and Child Health Nurse to visit the clinic and school regularly.

The Emergency Telehealth Service (ETS) was established in December 2019, and continues to provide verbal assistance, guidance and logistical support with presentations. The specialist service has been used for the assessment and treatment of acutely unwell people. It has been well received by community members and means some people can remain in community rather than being evacuated to Broome.

Bidyadanga Health Clinic hosts clinical placements for Aboriginal Health Worker students, nursing and medical students. This provides aspiring health professionals with an introduction to KAMS and our Model of Care and fosters a greater understanding of remote health care

There are currently 2 patients in Bidyadanga who self-dialyse in the Home Dialysis room in the clinic. Home Therapies are coordinate by Fresenius and 1 patient successfully underwent a kidney transplant during the reporting period.

### Primary Health Care Focus

A welcome consequence of the COVID-19 outbreak and associated pandemic response planning was a marked increase in telehealth across all KAMS Remote Clinics.

A key achievement in this area for the clinic is the implementation of Visionflex, which allows staff and patients to converse with a medical officer on the screen, and is designed so that the medical officer is able to hear and see what the health worker in the clinic is hearing and seeing.

Several health promotion days were held in community, including a foot health day which was organised at the oval with the local football team. This community event received positive feedback as well as a positive outcome of a client presenting to the clinic the next day to have his feet examined after the information he received at the event. The client required hospitalisation but had a good outcome due to prompt treatment.





## Kutjungka Health Centres

The Kutjungka Health Services are comprised of the three remote clinics in the communities of Wirrimanu (Balgo), Billiluna and Mulan. These communities are home to approximately 1,000 people and are located on the edge of the Tanami Desert, approximately 1,000 km east of Broome and 300 km south of Halls Creek.

Population Health employs a sexual health nurse who regularly travels to the Kutjungka to provide clinical support, screening and education. Healthy Country Kids funding from the WA Government employs a School Health Nurse and a Child Health Nurse to visit the clinic and school regularly.

A Community Liaison Officer is employed by Balgo Health Centre to improve cultural safety and is a valuable resource for both the clinic and the community.

The Kutjungka Clinics have hosted clinical placements for 2 Aboriginal Health Worker students. This year has also seen the introduction of Notre Dame nursing students undertaking a five week clinical placement in Balgo, with excellent feedback from both the students and the clinic staff on the experience.

## Primary Health Care Focus

### Community Engagement

Community engagement was a vital tool to start the recovery after the COVID-19 outbreaks. From May 2022, there was a marked increase in community engagement activities to support a shift back to a primary health care focus. In Balgo, monthly stakeholder meetings have commenced as an opportunity for collaboration between service providers and a feedback mechanism for community members to provide feedback, advice and direction to the clinic. The clinic trialled adjusting its opening times as a response to direct feedback from several community members.

In preparation for Men's Health Week, which was held in July 2022, the clinic was able to engage one of the local male Elders who shared amazing insights and great suggestions for getting the men involved in caring for their health and how the clinic could better engage with the men in community. These ideas will be put into action for future health promotion events.

### Health Checks

Due to the efforts dedicated towards planning, education, immunisation and outbreak response during COVID-19, primary health care measures including health checks became more difficult to provide. Patients did not present to the clinic as frequently, and when they did, they did not want to stay for an extended period of time. Our strategies to meet these targets were unsuccessful as we were not able to hold any campaigns due to COVID-19 restrictions. Despite this, the increased use of telehealth made it possible for our GPs to provide Health Checks and GP Management Plan services remotely. Towards the end of this reporting period, this practice started becoming a standard.

### Sexual Health

Staff were provided with training on the screening and treatment of Sexually Transmitted Infections (STIs). The Population Health team employed a Sexual Health Nurse during the reporting period to assist with staff training, community education and screening / testing across all 5 Remote Health Centres.

### Influenza campaign

In May and June 2022, significant efforts went into a community education campaign with respect to the expected impacts of flu season and the need for community to get a flu vaccine. The campaign was very successful and resulted in the Mulan community having a 100% flu vaccination rate for their population.





# KIMBERLEY RENAL SERVICES

## (KRS)

KRS provides haemodialysis at Renal Health Centres in Broome, Derby, Fitzroy Crossing and Kununurra, for 163 patients in the Kimberley, equating to 22,757 episodes of care for 2021/2022. Support Services education delivered by Chronic Kidney Disease Educators provided 398 education sessions and Pre-Dialysis Educators delivering 318 sessions. The ability to engage with remote communities has been impacted by COVID-19 with the inability to travel to communities, however presented an opportunity to deliver more one-on-one education.

2022 has identified improvements in service delivery with a focus of Support Services support, with emphasis on prevention and education of chronic kidney disease progression and awareness. A Support Services delivery plan has been developed to increase attendance to community events, primary health care providers and schools to capture a larger audience for education delivery and aims to increase collaboration with AMS' and key stakeholders.

### COVID-19 Management

Managing COVID-19 positive patients required additional support to ensure the safe management of patients and staff. This included additional surface cleaning of equipment and transport vehicle following the collection and drop off of a patient. Additional support staff were provided by KAMS to ensure the patient vehicles and centres met infection control standards. Several registers were managed to ensure full oversight of all aspects of COVID-19 management, including patient vaccination rates, Staff vaccinations register, RAT register, close contacts registers, COVID-19 patients' registers and PPE registers.

KRS developed an intensive dialysis training program to upskill all clinical staff in the service which included employees appointed to Support Services roles. This was implemented in preparation of staff shortfalls impacted by COVID-19. Patient Care Assistants were also involved in additional training sessions in preparation for aiding on the clinical floor. The Mobile Dialysis Unit was prepared in standby mode and was key in KRS' COVID-19 Response Plan for dialysing patients at Broome Renal Health Centre.

These proactive measures meant little disruption to normal operation and the ability to continue dialysing at 1:4 nurse to patient ratio.



### Planning Weeks

The KRS Leadership Group membership consists of KRS Renal Services Manager, General Manager, Business Regional Operations Manager and Senior Medical Officer. Additional expert positions including Infection Prevention Control and Quality Coordinators meet on a quarterly basis to provide strategic direction, review operations, analyse performance and processes as well as streamlining service delivery across all KRS sites. Meetings are held and rotated throughout the Kimberley on a quarterly basis.

Focuses this year included:

- NSHQ Standard 1 Clinical Governance review
- 2-day ISM Workshop focusing on: funding, KPI's, MOICDP, accreditation, direct report's role breakdowns, review of CKD stages in the Kimberley and need for prevention
- Clinical Practice Review Committee review of clinical policies
- Development and implementation plan of Support Services calendar
- KRS workforce planning
- Document index review finalisation and ongoing review process
- KRS Meeting Schedule review





Patient education is delivered in partnership with the Transplant Coordinator and transplanted patients to share experience and knowledge of their journey. This style of engagement has thus far attracted attention with several patients continuing participation in further education and providing an opportunity to hear about other experiences and what is involved in work up for waitlisting. In addition, transplant suitability education sessions are being provided to patients who have completed a suitability assessment but deemed contraindication to learn how they are able to make changes to be considered for transplant waitlisting.

## Transplant

Transplant coordination has seen an increase in activity in the last 12 months with transplanted patients at a record high for the Kimberley. In the reporting period, 12 patients received transplants with 26 patients actively being worked up and 8 patients currently active on the waitlist.

This includes additional support with post-transplant care which involves liaising with clients for medications, bloods and regular attendance to their GP and attendance at regional nephrology clinics. Prior to their return to the Kimberley, the Transplant Coordinator delivers education to primary health care providers on routine pathology, signs and symptoms of rejection, common complications and required checks at each appointment. This approach provides tailored support for the patient, despite their location of residence and improved chances of intervention in the event there are signs of kidney transplant failures.



## Rebranding

In response to Australia-wide nursing shortages, KRS implemented a marketing strategy to attract and retain nursing staff which included engaging an external employment agency to develop a marketing campaign to increase the number of nurses working in remote locations. This campaign has included a marketing video that showcases attractions, the people, and facilities available and provides an insight into living in the Kimberley.

Coupled with this is a rebranding project currently underway to revamp KRS image and seeks to provide a fresh colour pallet to make the service brand more attractive. Utilising a dialysis patients' artwork to create a new design that will be applied to uniforms, stationary, signage and the Mobile Dialysis Unit.





# RURAL HEALTH WEST MEDICAL OUTREACH

KAMS is contracted by Rural Health West to provide Rural Health Outreach Services that aim to increase access to effective high quality, comprehensive, culturally appropriate, primary health care services for Aboriginal and Torres Strait Islander peoples across WA.

The Medical Outreach Indigenous Chronic Disease Program (MOICDP) aims to improve access and range of medical services and allied health professionals in remote communities to prevent, detect and manage chronic disease more effectively.

KAMS receives MOICDP funding for Renal outreach teams to travel to remote communities and; Psychiatry services provided by telehealth and one-to-one basis.

The Renal specialist team includes Aboriginal Care Coordinator, Chronic Kidney Disease Educator, Allied Health Worker, Pre-Dialysis Coordinator and a General Practitioner. A number of remote communities benefit from this visiting team including Balgo, Bidyadanga, Billiluna, Dampier Peninsula, Fitzroy Crossing, Halls Creek, Kalumburu, Kununurra, Ringer Soak, Warmun and Wyndham.

Psychiatry services are provided by a Psychiatrist or a Mental Health Nurse to residents of Balgo, Beagle Bay, Billiluna, Broome, Derby, Halls Creek and Kununurra.

The Healthy Ears – Better Hearing, Better Listening Program aims to increase access to a range of health services for Aboriginal children and youth (0-21 years) for the diagnosis, treatment and management of ear and hearing health.

The Hearing Health team is comprised of a Ear, Nose and Throat (ENT) Physician, Audiologist, Aboriginal Health Worker and a Care Coordinator. The team visits across the East and West Kimberley including Balgo, Beagle Bay, Bidyadanga, Billiluna, Broome, Derby, Halls Creek, Gibb River Road Communities, Ringer Soak and Mulan.

COVID-19 outbreaks across the Kimberley impacted on the ability of Specialists to travel to remote communities, but visits were reinstated once remote communities opened up.



# WORKFORCE

## Regional Training Organisation

The year commenced with the graduation of the Regional Training Organisations (RTOs) 2021 cohort of students who managed to come through despite the interruption of the COVID-19 pandemic seeing a shift to a blended learning approach. 2021 was the second year we delivered the highly contextualised Certificate IV Mental Health in the Kimberley. Our students come from all communities and towns across the Kimberley to receive this accredited training. In 2022, we made the decision to rest the Certificate IV Mental Health. This was due to low numbers expressing interest in this qualification. It is our intention to deliver this qualification again in 2023.

During 2021-2022, KAMS participated in and led the ongoing review of the Aboriginal Health Worker Packages with Skills IQ. This two-year review has finally finished with a new Certificate IV being certified that demonstrates a clear pathway for students that scaffold towards a higher clinical practice.

KAMS RTO is participating in the national community of practice to build and strengthen the community-controlled RTO sector.

### PARTICIPANTS 2022

7x Certificate III in Aboriginal and Torres Strait Islander Primary Health Care

22x Certificate IV in Aboriginal and Torres Strait Islander Primary Health Care Practice

5x Certificate IV in Mental Health (deferred 2021, returned to complete 2022)

### GRADUATES 2021

1x Certificate III in Aboriginal and Torres Strait Islander Primary Health Care

6x Certificate IV in Aboriginal and Torres Strait Islander Primary Health Care Practice

6x Certificate IV in Mental Health

## Learning and Development Coordinator

In 2021, KAMS made the decision to invest in a new role of Learning and Development Coordinator. This role was filled in October 2021 and was directly responsible for implementing the new online learning system for staff. In May 2022, we went live with the new learning management system. We named the new system "RIGHT PLACE" learning hub! Right Place is a Kimberley term meaning, you're really succeeding, congrats on finding your place on the earth, don't change anything, you're killing it!





# KIMBERLEY SUPPORTS

Kimberley Supports provides a suite of disability support programs to Aboriginal communities across the Kimberley as well as supporting the work of the Kimberley Supports Consortium. The Consortium is comprised of Kimberley ACCHS and ACCOs such as Kununurra Warringarri Aboriginal Corporation, Marninwarntikura Women's Resource Centre and Winun Ngari Aboriginal Corporation.

## Remote Community Connectors (RCC) Program

The Remote Community Connector (RCC) program is delivered by a consortium of ACCOs to ensure there is culturally appropriate connection between the National Disability Insurance Agency (NDIA) and community. The Program enhances communication and engagement with Aboriginal people living in the Kimberley with the aim to improve access to information about the National Disability Insurance Scheme (NDIS) and assist individuals to complete NDIS plans.

Program to date:

- Engaged with over 800 individuals, raising awareness about NDIS
- Assisted 155 people receiving their first NDIS plan
- Supporting 200 participants per month around the Kimberley with NDIS related questions and actions



## Evidence, Access and Coordination of Planning (EACP) Program

The Evidence, Access and Coordination of Planning (EACP) Program assists people with disabilities to test eligibility to the NDIS, navigate the NDIS access process and to assist with coordination of the NDIS plan development process. This includes gathering information and evidence required for eligibility/access. If access eligibility requirements are met the participant will be supported through the coordination of planning meetings between the NDIA and the participant. If NDIS access eligibility requirements are not met, the person will be connected with other services, supports or pathways.

Program to date:

- No. of Applications to NDIS: 316
- No. of people met Access to NDIS: 235

**Estimated total NDIS funding brought to the Kimberley economy: \$17,766,000 per annum**  
(figure based on average NDIS plan in Kimberley \$75,600pa)





## Remote Early Childhood Supports (RECS) Program

The aim of the Remote Early Childhood Supports (RECS) Program is to approach, engage and support children under 7 years of age with developmental delay or disability through timely access to early intervention supports. The approach is designed to support and assist Kimberley Aboriginal families and children to gain and use functional skills to participate meaningfully in their daily activities and achieve the best possible outcomes throughout their life. The team consists of Aboriginal Family Support Workers, Child Health Nurses, Occupational Therapists, Speech Pathologists, and a Physiotherapist.

- Total No. of Children currently involved in RECS program: 246
- Carried out a total of 459 individual developmental assessments

## Community Capacity Building (CCB) Program

The Community Capacity Building (CCB) Program consists of two grants, the Individual Capacity Building grant from DSS and the Communications grant from NACCHO. The team works to:

- Increase access to community workshops and social events for people with a disability
- Create culturally specific resources for communities around the NDIS
- Provide linkages within the disability sector between organisations, service providers and communities (website and roundtables)
- Create simple pathways for people and providers to be able to access the different services in the region (map)
- Ensure Kimberley Supports maintains its cultural accountability and commitment to person-centred care through a cultural reference group.

This year the team developed and refined culturally safe and accessible NDIS resources for our communities; facilitated regular meetings between Kimberley disability organisations and providers; facilitated workshops and support groups in remote communities where KAMS has clinics.





# POPULATION HEALTH PROGRAMS

## Hearing Health

The KAMS Hearing Health Program provides a screening service to 10 remote and very remote communities throughout the Kimberley. The service is delivered in schools and is designed to detect, diagnose, and treat middle ear disease and conductive hearing loss in children and young people aged between 0 to 21 years of age.



The KAMS Hearing Health Team consists of an Ear, Nose and Throat (ENT) Physician, Audiologist, Aboriginal Health Worker, and a Care Coordinator. During early 2022, the COVID-19 outbreak in the Kimberley impacted on the delivery of the ear health service throughout the region. Despite the limited access to remote communities, hearing health trips recommenced and screened children from June 2022. This included a high number of children being referred for further treatment after consultation with the child's parent or carer.



Increasing knowledge and understanding of ear health care and diagnostic skills is an important part of the program. The KAMS Hearing Health Team were able to deliver education sessions to school children, parents, carers, teachers, and clinical staff.

Our Hearing Health Team travelled to remote community clinic and schools:

- Beagle Bay (Sacred Heart Catholic School)
- Bidyadanga (La Grange School)
- Derby (Derby, Kupungarri and Pandanus Park)
- Kutjungka (Luurnpa Catholic School, Balgo; Kururrungku Catholic School, Billiluna; John Pujajangka-Piyirn Catholic School, Mulan)
- Dampier Peninsula (One Arm Point School and Djarindjin/Lombadina Clinic)



The Hearing Health Team work closely with the schools and provide immediate feedback to teachers to enable timely support in the classroom to children experiencing conductive hearing loss.

This is an outreach program which is embedded in the primary health care clinics of each community visited. In May 2022, the Hearing Health Team provided professional development in-service session on ENT skills update and audiology tympanometry to 22 attendees.



## Tackling Indigenous Smoking

The Kimberley Tackling Indigenous Smoking program (KTIS) aims to improve the health of Aboriginal and Torres Strait Islander people by reducing the rates of smoking and to support them to be the healthiest they can be.

The program provides:

- School and community education programs on smoking and its harmful effects
- Facilitation of quit support groups
- QUITLINE referral
- Smoke-free events
- Support for workplaces and community spaces to become smoke-free
- Advocate for smoke-free places at a regional and national level.

There has been plenty of exciting additions to the KTIS Team in 2022 including a trailer which has increased our capacity to provide services in remote Kimberley communities. The trailer allows us to camp in or near communities that do not have accommodation for service providers, while also increasing our capacity when attending larger communities. It has a large BBQ for these events as well as all of our educational resources needed to spread awareness on the harmful effects of smoking.

The KTIS Team have used the trailer to attend many events including, Bidadanga – Women's on Country health camp, Men's health promotion session for the Bidadanga Emu's Football Team and Beagle Bay – School holiday basketball / football community event. Balgo – Men's Health Week and a West Kimberley Football League round 11 Her Rules Her Game promotional event where players and supporters were surveyed on the rise of vaping in the Kimberley.





## Men's Health

Like other services within KAMS, the Men's Health Coordinator was seconded into the KAMS COVID-19 Rapid Response Team, providing on the ground testing, contact tracing and community support during the initial outbreak period across the Kimberley.

Despite the challenges of COVID-19, the Men's Health Coordinator continued to work closely alongside our Population Health Programs, the remote clinics and the SEWB Team to deliver key health messages to community.

A significant achievement for 2022 was the Men's Health Event in Balgo, Mulan and Billiluna during August which incorporated the gathering of men in the community to present their ideas on what they believe is the best way to improve health outcomes for men. These sessions were integral to building community engagement and relationships with young men and Elders in the community. It also created a space for men to receive health education and receive their 715 Health Checks with 15 health checks completed over the two days.

The Men's Health Coordinator is planning to emulate similar health events for Men across the Kimberley in 2023.









## Sexual Health Program

"The Sexual Health program consists of 5 staff, including a Regional Sexual Health Facilitator, a male and female Sexual Health Project Officer, an STI / BBV Project Officer and a Regional Sexual Health Nurse. The program is funded through KAMS core funding, NACCHO and the WA Department of Health.



During the Kimberley COVID-19 outbreak, the Sexual Health team was seconded into KAMS COVID-19 Rapid Response Team, providing on the ground testing, contact tracing and community support during the initial outbreak period.



Despite the impact of COVID-19, the team has achieved positive outcomes across the Kimberley region, delivering both clinical services, quality improvements, clinical and community education and health promotion initiatives.



During the reporting period, the Sexual Health team achievements include:

- Community led camps and health weeks - community engagement, providing education and improving testing data
- Health promotion campaign with Dallas Woods and Molly Hunt in the East Kimberley
- Upskilling and delivery of protective behaviours education in community settings
- Upskilling of clinical staff - Contraceptive Implant and Core of Life training.
- Development and delivery of a parent education workshop
- Development and implementation of online clinical orientation module
- Development of engaging localised resources





## Kimberley Foot Initiative

The Kimberley Foot Initiative (KFI) aims to improve the gaps within the health system for diabetes foot-related complications by reducing the amputation rates in the Kimberley region. The South Australian Medical Health Research Institute (SAMHRI) has been funded by the Department of Health to assist a number of regions, including KAMS, to reduce diabetes foot-related complications and amputations for Aboriginal and Torres Strait Islander people. The funding supports the implementation of regional evidence-based initiatives through the Kimberley Foot Initiative project, which has improved the shared care and integration of specialist services within the Kimberley region for all diabetes foot-related complications.

In phase 1 of the project, a gap analysis identified that the Kimberley region had no high-risk foot services in a hospital setting for over 10 years. KAMS Kimberley Foot Initiative seed funded WACHS (Broome Hospital) to recruit and employ a Senior Podiatrist. The appointment of a Senior Podiatrist in the Kimberley region will support high-risk patients with a dedicated foot service.



Providing cultural security to all appointments was identified as a priority and this having been achieved by the KAMS KFI program employing an Aboriginal Health Practitioner to work alongside the Podiatrists. This arrangement has provided a hands-on experience and upskilling for our KFI Aboriginal Health Practitioner in this specialised area and improved patient outcomes with a significant decrease in did not attend (DNA) rates.

KAMS KFI team has also provided several face-to-face education sessions to primary health care staff upskilling in wound management, dressings, referral pathways, and screening tools in the region, as well as providing education to a targeted group of patients to enhance awareness and prevention of diabetes foot concerns and complications.



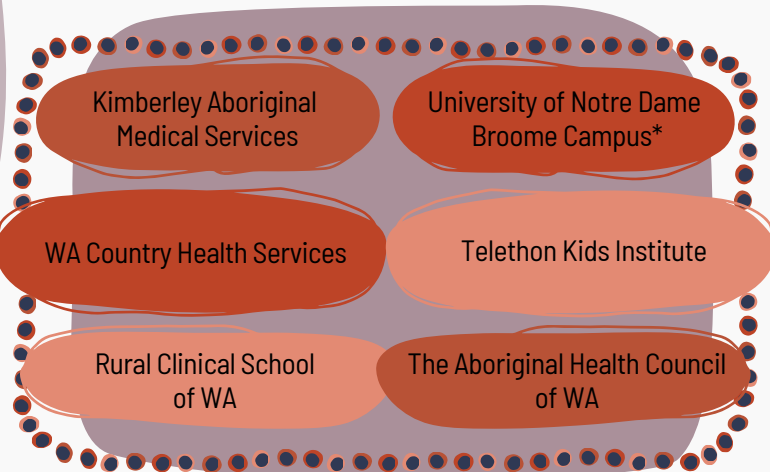


# KIMBERLEY ABORIGINAL HEALTH RESEARCH ALLIANCE (KAHRA)

The Kimberley Aboriginal Health Research Alliance (KAHRA) received almost \$3 million seed funding from Lotterywest to fundamentally change how research is conducted in the Kimberley, under the management of KAMS. Its vision is to put Aboriginal people in control of Aboriginal research to improve Aboriginal health and wellbeing in the Kimberley.

KAHRA brings together Aboriginal communities, ACCHS and government health services, and research institutes.

The founding members are:



Founding Members contribute \$50,000 per organisation per year. All member services of KAMS are also included in KAHRA.

In Year 2 of operations (aligned with 2021-22 financial year), the KAHRA team continues to support and develop health research in the Kimberley, despite playing a role in preparing for and helping with the COVID-19 outbreak in the region, which was a constant disturbance throughout this financial year. The KAHRA Team have assisted in establishing internal processes for KAMS and provided substantial support to the KAHPF Research Sub Committee, through the secretariat position.



During the reporting period, KAHRA completed key establishment tasks in Year 1 of operations. Substantial progress to achieving its objectives have been made in the following areas:

- Aboriginal leadership of health research
- Community ownership and participation
- Coordination and collaboration
- Creating change
- Cultural integrity and research rigour
- Health services improvement
- Workforce development

This has occurred through the KAHRA Team and other key staff from founding member organisations undertaking planned activities under the direction of the KAHRA Board, with robust governance processes in place. Chaired by Mr Mick Gooda, the KAHRA Board is comprised of a majority of Aboriginal people. Shifts in KAHRA's stated purpose and principles indicate greater emphasis on Aboriginal control. There have been many indications that health service members greatly value the existence of KAHRA.

In Year 2, working groups have been established to focus on some of KAHRA's key priorities, development of a sustainable health research workforce, community engagement and knowledge translation. These groups are action-focussed and bring together KAHRA Founding Members to work towards shared goals in workforce, community engagement and knowledge translation as the KAHRA team moves to develop the Kimberley Aboriginal Health Research Model.





# RESEARCH

2022 has seen the KAMS Research team come under the management of KAHRA. This supports the alignment of KAMS research with the overall approach and principles of KAHRA.

The KAMS Research team continues to work across a range of SEWB, mental health, diabetes, and chronic disease prevention projects.

## Diabetes

### Be Healthy

Be Healthy is a partnership with Derby Aboriginal Health Services (DAHS), Djarindjin Aboriginal Corporation (DAC), KAMS, the Rural Clinical School of Western Australia, Stan Perron Charitable Foundation and Diabetes WA. This project aims to implement culturally secure programs for obesity and chronic disease prevention (including Type 2 diabetes) with remote Aboriginal communities and families.

The current focus for the project includes supporting DAHS to scale up the Program, community awareness in Djarindjin, and setting up systems for data sovereignty, data collection, reporting, working groups and recruiting for project staff in each of the sites.

### Orchid Study

The ORCHID study is a state-wide project aims to simplify screening for hyperglycaemia in pregnancy and reduce adverse birth outcomes relating to high glucose levels during pregnancy. The current focus is auditing the implementation of tubes that give accurate glucose measurements, using HbA1c early in pregnancy to screen for pre-diabetes, and validating an alternative screening pathway at 24-28 weeks gestation (instead of the sugar drink test). The Kimberley has a long and proud involvement in the ORCHID Study, working across the Kimberley ACCHS and some WACHS sites to recruit women into Phase One (186) and Phase Two (89), a total of 275 women, into the study. Phase Three of the ORCHID study was successfully funded this year to support implementing previous ORCHID Study findings and co-designing prediabetes in pregnancy management strategies from the previous findings into practise. This project represents a partnership between the Rural Clinical School of Western Australia, University of Western Australia, KAMS and Member Services.





## Social and Emotional Wellbeing

### Transforming Indigenous Mental Health and Wellbeing

This year the Transforming Indigenous Mental Health and Wellbeing (TIMHWP) project staff worked closely with KAMS SEWB Workforce Support and Development Unit to develop a Welcome Guide for Aboriginal SEWB Workers. This work came out of interviews undertaken with Aboriginal SEWB staff in 2021 in which staff identified the need for information on SEWB that could complement their ACCHS workplace inductions. The guide is in the process of being turned into an interactive online package that can be rolled out to all KAMS and Member Service SEWB teams.

Other highlights from the TIMHWP project for 2022 include working with DAHS to support their work with the ACHWA SEWB Service Model Pilot. Specifically, the Research team are supporting DAHS to develop an SEWB register within MME to best manage the flow of SEWB clients coming into the service and the ongoing case management and interdisciplinary care of SEWB clients.

The preparation work for the register build has been an extensive project involving KAMS ITC, KAMS Research, and KAMS SEWB, working alongside DAHS SEWB and the DAHS CEO. The project will progress to the build and supporting DAHS with staff training and the completion of related policies and procedures related to the register build.

This project has published on the role of mental health care in remote Aboriginal health services in the Kimberley region of Western Australia. This publication provides an understanding of the patients presenting for care, their needs, and the clinical response. Optimising patients' recovery and wellness through service improvements, including an enhanced mental health model of care, is an important next step.





# GP TRAINING

The Kimberley GP Aboriginal Health Training Program is a joint initiative of Western Australian General Practice Education and Training Ltd (WAGPET) and KAMS and is funded through the Australian General Practice Training (AGPT).

The General Practice (GP) Training Program aims to provide opportunities and experience in Aboriginal Health and remote areas to increase the medical workforce.

The Senior Medical Officer and Program Support Officer coordinate the recruitment, placement and employment of GP Registrars in ACCHS across the Kimberley.

In 2021-2022, KAMS coordinated 12 GP Registrars to complete 22 training terms in Kimberley ACCHS:

- 5 GP Registrars were placed at KAMS
- 4 GP Registrars were placed at BRAMS
- 2 GP Registrars were placed at DAHS
- 1 GP Registrar placed at OVAHS.

GP Registrars often move between the AMS to complete their training terms, and 3 graduates of the program commenced work as a GP's at DAHS, OVAHS & BRAMS start of 2022.





# QUALITY & CONTINUOUS IMPROVEMENT

KAMS (including KRS) uses LogiQC as the organisation wide quality management system. The ISO 9001:2015 Quality Management Standard (QMS) guides KAMS' management and integration of quality assurance and improvement as part of everyday business. KAMS has maintained ISO 9001:2015 certification since 2012. A post-certification audit was conducted by Global Mark in August 2022 and no non-conformances were found. This was an outstanding result and is a testament to the robust quality systems but most importantly, the consistent efforts of all KAMS and KRS staff across the Kimberley.

All five KAMS Remote Health Centres and headspace Broome are accredited against the Royal Australian College of General Practitioners (RACGP) Standards for General Practices 5th edition. The RACGP Standards have been developed to protect patients from harm by providing clear standards for the quality and safety of health services, and to support health services to identify and address opportunities for improvement to their systems and processes.

All KRS Renal Health Centres continue to be licensed to Conduct a Day Hospital (Class C) by the Licensing and Regulatory Unit (LARU).

KRS was accredited for the first time with the National Safety and Quality Health Service (NSQHS) Standards in May 2021. The accreditation assessment was conducted by Global Mark and found no non-conformances. KRS is continuing to work on areas identified for further improvement as guided by the NSQHS Standards.

The KAMS SEWB and headspace Broome teams were accredited for the first time with the National Standards for Mental Health Services in May 2022. This confirmed the new accreditation for its full term to 2025. No non-conformances were found.

In addition to accreditation requirements, KAMS progressed a number of quality improvement projects including:

- Implementation of streamlined audit system across core business areas, including revision and standardisation of audit tools. Resulting in increased audit completion rates and clarity of management review/outcomes processes
- Implementation of revised risk and incident management systems to more appropriately respond to organisational versus clinical risk
- Implementation of annual Quality Improvement Plans across key service areas and updated in the Quality Framework
- New HR system and training software live and subsequent updates to policies/processes for qualification management
- New induction resources and processes for remote services staff
- Implementation of expanded water testing in renal services
- Achievement of accreditation under the National Standards for Mental Health Services and establishment of Quarterly Mental Health Quality Meetings
- Improvements to Vaccine Preventable Disease management and oversight
- Development of quarterly Safety & Quality reporting, including final step of communicating summary data to staff and patients in poster form
- Establishment of formal processes and reference group for consumer input/cultural security advice
- Improvements to our patient information software MMEx, including automatic live graphing of observations







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