

Annual Report

**Kimberley Aboriginal
Medical Services Ltd
and Kimberley Renal
Services Pty Ltd**



**2024
–2025**



An organisation of Aboriginal people, for Aboriginal people, controlled by Aboriginal people



This photo of Georgia Carter was taken at Galaru Gorge while on outreach for the Enhanced Response SEWB Program.

Cheyenne Carter, ER SEWB Community Connector and Outreach.

Warning

This report may contain images and/or names of people that have passed away.

Organisational Information

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ABN (KAMS) 67 169 851 861

ABN (KRS) 62 600 079 687

Terminology

Within the Kimberley Region of Western Australia (WA), the term Aboriginal is used in preference to Aboriginal and Torres Strait Islander, in recognition that Aboriginal people are the original inhabitants of the region. No disrespect is intended to our Torres Strait Islander colleagues and community.

Cover image Mulla Mulla by Jasmine Phillips, SEWB Capacity Building Officer

The mulla mulla plant can be found in harsh environments where it can easily thrive. This symbolises resilience and survival which shows the strengths of Aboriginal communities in the region who have maintained their Culture and identity. It also has connection to Country as its roots run deep in the ground just like our identity and our partnerships with local communities.



Acknowledgement of Country, Culture and Community

We pay our deepest respects to all Traditional Owners across the Kimberley region of WA.

We acknowledge the wisdom of our Elders, those who came before us, those that are here today and those that are emerging. We pay our deepest respects to our Elders for their leadership over generations – their wisdom and courage in caring for and protecting our ancient lands, living Culture and our vibrant languages.

We also pay our respects to all Aboriginal people, and respect their knowledge systems, language, vibrant living Culture and continued connection to Country.

Image: Billiluna, April 2025

This photo was taken in Billiluna when our Kimberley Foot Initiative and Hearing Health teams were unexpectedly stuck after the Tanami Road was closed due to weather. We stayed longer than planned, but everyone remained positive and flexible. We used the time to keep working – adding clinic days, engaging with clinicians, other stranded services, and community members – and we connected as a team in a new way.

The story behind this image says a lot. To me, it shows that even when challenges strip things back, like the bare tree, we can adapt and stay strong like the green ones beside it. The road symbolises moving forward with purpose, and the clouds and sunset remind us that tough times can also bring good opportunities. It's about resilience, flexibility, and finding the best outcome.

Jodie Millroy, Hearing Health Program Coordinator

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Image: Yardoogarra

This photo was taken at Yardoogarra (Eco Beach). Marjadee Edgar was doing the Welcome to Country for our Rising Leaders group. This picture shows connection and community which mirrors our goals of fostering strong relationships within Aboriginal communities. The students are relaxed and engaged, reflecting a sense of wellbeing and empowerment in a culturally safe environment.

Trenna Wadge, Leadership Development Coordinator

What We Stand For



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 centre around Aboriginal Culture and knowledge.

Our Values



Caring

We care about our patients, our staff and our stakeholders.



Aboriginal Community Control

We are an organisation of Aboriginal people, for Aboriginal people, controlled by Aboriginal people.



Respect

We are respectful, and we treat each other, our clients and our stakeholders with dignity.



Integrity

We are transparent, honest and we do what we say we will do.



Culture

We respect the diversity of Aboriginal people and endeavour to embed the Culture of all Kimberley Aboriginal people.



Accountability and Responsibility

We set goals and we hold ourselves to account.



Leadership

We strive for excellence and encourage our staff to achieve great results.



Innovation and Continuous Improvement

We seek to push the boundaries and we do not accept mediocrity.



Sustainability

We are here for the long term and will leave a positive legacy for future generations.

Report from our Chairperson

Raymond Christophers



Raymond and
Bethwyn Christophers

I am pleased to present the 2024–2025 Annual Report for Kimberley Aboriginal Medical Services Ltd (KAMS) and Kimberley Renal Services Pty Ltd (KRS).

This report demonstrates how we are achieving our purpose: delivering holistic health and wellbeing outcomes for Kimberley Aboriginal people, in partnership with Aboriginal-led organisations, grounded in Aboriginal culture and knowledge.

As Chairperson, I am proud to report on the significant progress and accomplishments across KAMS and KRS over the past year.

Our New Brand

This year we proudly launched our new KAMS logo and brand. It reflects who we are, where we have come from and where we are heading. For almost 40 years, we have been a strong voice for Aboriginal health, always true to our identity as an organisation of Aboriginal people, for Aboriginal people, led by Aboriginal people. Our new brand honours our past and supports us to move forward with strength and purpose. Thank you to everyone who contributed, especially our designer, Kitty Bin Rashid, for her outstanding work.



About Our New Logo

Designed by Katidjah Bin Rashid, the new KAMS logo places the Kimberley at its centre, alongside the snakes from the original logo. The colours are red, yellow and black to recognise Aboriginal colours, our connection to our old logo, and the logos of our Member Services. The lines on the map represent water, hills and the long roads of the Kimberley landscape – a visual story of connection, care and the journeys we take in health.

“While developing concepts for the KAMS logo, I considered the identity challenges we’ve faced over the years, especially the confusion with other Member Services’ logos and sizing issues on resources.

I decided to make the Kimberley map the central design element, alongside the snakes. My aim was to design a simple yet recognisable logo. The lines on the map symbolise the water, the hills of the Kimberley landscape and the long roads associated with working in health in the region.”

Katidjah Bin Rashid, Graphic Design Officer

Our Board of Directors

In the past year we've had some changes to the Board which comprises representatives from each of our Member Services. Coming off the Board, I acknowledge and thank Millie Hills, former Deputy Chair and Director representing Yura Yungi Medical Service (YYMS) and Timothy Garrett, Director representing Broome Regional Aboriginal Medical Service (BRAMS). It has been a significant undertaking to represent their respective service.

I recognise and thank our respected Board of Directors. As representatives of our Member Services, their guidance and strategic direction are essential, and I am grateful for their expertise, dedication and service.

This year the Board hosted visits from special guests including:



Image source: Sabine Winton

- Hon Sabine Winton MLA Minister for Preventative Health and Divina D'Anna MLA Member for Kimberley



Image source: Divina D'Anna

- Senator the Hon Sue Lines President of the Senate, Hon John Quigley MLA Attorney General, Divina D'Anna MLA Member for Kimberley and Hon Mark Dreyfus KC MP Attorney-General



*Lorraine and Steve Anderson
at Parliament House at the
Stronger Medicare Awards*

Our Staff

Under the leadership of Chief Executive Officer (CEO) Vicki O'Donnell and the Executive Management Team, our staff have continued to deliver high quality health and wellbeing services to Kimberley Aboriginal people. Their commitment to our Strategic Plan and the Aboriginal Community Controlled Health Service (ACCHS) Model of Care has been central to our success.

Vicki's leadership and dedication to Aboriginal people in the Kimberley, across WA and nationally, have been invaluable. Her experience and knowledge have greatly contributed to our achievements this year. As CEO of KAMS and KRS and Chair of the Aboriginal Health Council of WA (AHCWA), Vicki is an outstanding leader who balances direct engagement with staff – always with an open door – with representing our sector at national and state forums with senior ministers and public servants. She commands respect and ensures our voice is heard. We all owe her a debt of gratitude beyond measure.

I extend my heartfelt gratitude to our staff, who have worked tirelessly to serve Kimberley Aboriginal communities and support our Member Services. Later in this report you will read about the many staff and teams recognised this year for their contributions across clinical care, leadership, community engagement, and innovation. These acknowledgments highlight the commitment and excellence at the heart of our work.

I would like to acknowledge our Medical Director, Dr Lorraine Anderson, who was awarded the prestigious title of Medicare Champion in the Stronger Medicare Awards and received the Public Health Association of Australia's Aboriginal and Torres Strait Islander Public Health Award. These honours recognise her outstanding contribution to improving the health of Aboriginal people. Since joining KAMS in 2019, Lorraine has made an exceptional contribution to KAMS, KRS and our Member Services, as well as influencing Aboriginal health at both state and national levels.

Our Member Services

Our Member Services are locally based and led by Kimberley Aboriginal people. They succeed because they are grounded in Culture, community and accountability to the people they serve.

In 2024–2025 we worked together to develop the Kimberley ACCHS sector's priorities for the 2025 WA State Election. These priorities were presented to political candidates in the lead-up to the election on 8 March and focused on investment in regional health infrastructure, growing the sector for the future, and supporting Kimberley community priorities. We were pleased that some of these priorities received commitments from the Cook Labor Government, namely:

- \$11 million for the BRAMS Health Hub (election commitment)
- \$8.8 million towards the construction of the Derby Aboriginal Health Service (DAHS) Wellness Centre (State Budget 2025–26)
- \$3.4 million to KAMS as part of the agreed transition of the Lombadina/Djarindjin and Ardyaloon clinics from the WA Country Health Service (WACHS) to KAMS (State Budget 2025–26)
- \$2 million towards planning and engagement with service providers to establish a Broome Withdrawal Service (State Budget 2025–26).

We have a strong network of CEOs across our Member Services. I acknowledge and congratulate Shelley Kneebone, CEO of DAHS, who received the Derby NAIDOC Award in June for Caring for Country and Culture. This award recognises her leadership and commitment to embedding traditional healing, cultural knowledge and connection to Country across health and wellbeing services in Derby and surrounding communities.

Hon Amber-Jade Sanderson MLA
former Minister for Health; Mental Health
and Divina D'Anna MLA Member for
Kimberley and the DAHS Board
Image source: Amber-Jade Sanderson



2025 Derby NAIDOC
Award recipients
Jane Edwards, Lena
Buckle Fraser and
Shelley Kneebone
Image source:
Walalakoo Aboriginal
Corporation

NACCHO Membership

KAMS is a proud member of the National Aboriginal Community Controlled Health Organisation (NACCHO) and our CEO is a Board Director. In May 2025, NACCHO members voted in favour of a new constitution, reflecting the strength and unity of the membership and their ongoing commitment to Aboriginal community-control.

I extend warm congratulations to Pat Turner AM, who was awarded an Honorary Doctor of Letters by The Australian National University (ANU) in July. Pat's exceptional contribution to public service, leadership and advocacy on Aboriginal health, and academic achievements in Australian Studies are deeply valued across our sector.

We also acknowledge the result of the federal election and support NACCHO's call for strong leadership from the re-elected Labor Government on the National Agreement on Closing the Gap (National Agreement).



Closing the Gap Assembly
Image source: Coalition of Peaks

In April, we joined others from across the Kimberley, WA and nationally at the Closing the Gap Assembly. This was a powerful opportunity to inform the Independent Aboriginal and Torres Strait Islander-led Review of the National Agreement. At the Assembly, our Deputy CEO Jenny Bedford shared examples of the collective efforts of our sector to Close the Gap, which have since been reinforced in the report of the Independent Review.

It was also pleasing this year to see NACCHO reconvene the Ochre Day Men's Health Conference. The conference provides a national forum for Aboriginal and Torres Strait Islander men to share knowledge and strengthen relationships that support better health outcomes. We were proud to see strong representation from Kimberley Aboriginal men at this event.

AHCWA and CASWA Membership

In WA, we are members of AHCWA and the Council of Aboriginal Services WA (CASWA).



Vincent Carter
Image source: NACCHO

Vicki O'Donnell continues to serve as Chairperson of AHCWA and I represent the Kimberley region on the Board. This year we welcomed Vincent Carter to the Board as the youth representative. Vincent is our Senior Manager Communications at KAMS and Chair of the AHCWA Youth Committee. It is great to sit alongside him and to have the voice of young people represented, as we know they are our future.

It's no secret that environmental health is my passion, and in my other role I am proud to serve as CEO of Nirrumbuk Environmental Health and Services (NEHS). This year saw the release of the Aboriginal Environmental Health Model of Care, co-designed by AHCWA and the WA Department of Health (WA DOH). The Model responds to the Aboriginal Environmental Health Program Review (2022) and builds on the ACCHS Model of Care.

Grounded in prevention, primary health care, community engagement and capacity building, the Model calls for expanded and consistent funding and proposes a defined scope of service to ensure program sustainability and equity. Through AHCWA, we continue to urge the State Government to fund implementation of the Model and invest in community-led capacity building.

This year, AHCWA and CASWA jointly advocated for the State Government to address Aboriginal workforce needs and to recognise Aboriginal Community Controlled Registered Training Organisations (ACCRTOs) as part of its Jurisdictional



Kimberley representatives at Ochre Day
Image source: NACCHO



Action Plan under the five-year National Skills Agreement (NSA). The NSA reinforces the National Agreement, where governments have committed to enabling investments that support Closing the Gap, including recognition that this work must be delivered through, and be consistent with, partnership arrangements between Aboriginal people and governments in each jurisdiction.

Through our own ACCRTO, and others in the Kimberley including Nirrumbuk Aboriginal Corporation's Djaringo and Goolarri Media Enterprises, we look forward to the outcomes of this advocacy and lobbying being co-led by AHCWA and CASWA.

Regional Collaboration

For decades, Kimberley Aboriginal people have called for a regional body to speak with one voice to governments. The Kimberley Aboriginal Regional Body (KARB) Design Group is working to design this body, building on the work of the Crocodile Hole report. KAMS is a member of the Design Group, along with the Kimberley Land Council, Kimberley Aboriginal Law and Cultural Centre, Kimberley Language Resource Centre, West Kimberley Futures – Empowered Communities, Aarnja, Binarri-binyja yarrowoo and Empowered Young Leaders.

Through our Kimberley ACCHS sector's priorities for the state election, we reinforced the call of other Kimberley peak bodies, as announced in the Gumbanan Statement, that governments support the development of a KARB to work directly with them on matters affecting Kimberley Aboriginal peoples' lives, rights and futures.

At a regional level, KAMS is also a member of Binarri-binyja yarrowoo (Empowered Communities East Kimberley) and West Kimberley Futures – Empowered Communities.

In closing, this year has demonstrated the strength of our Aboriginal community-controlled sector, our communities and our partnerships. Guided by our Strategic Plan and the ACCHS Model of Care, we have continued to strengthen our services, advocate for Kimberley priorities and support our Member Services to deliver for their communities. I thank our Board, CEO, staff, Member Services and partners for their commitment and dedication. Together, we have remained focused on our vision: empowering all Kimberley Aboriginal people to be strong, healthy and connected through community-controlled services.

Raymond Christophers

Chairperson

Kimberley Aboriginal Medical Services
and Kimberley Renal Services

Report from our Chief Executive Officer

Vicki O'Donnell OAM

In 2024–2025 we continued to expand our services and programs to improve health and wellbeing outcomes for Kimberley Aboriginal communities. Our focus remained on delivering sustainable, long-term outcomes while responding to both immediate and evolving community needs. This year was marked by growth and resilience as we built capacity, strengthened our partnerships and reinforced the critical role of the ACCHS sector.



Our Board

Our progress this year would not have been possible without the leadership and guidance of the KAMS and KRS Boards. Their stewardship has empowered us to expand our reach, foster innovation and deliver services and programs that respond to the needs and aspirations of Kimberley Aboriginal people and communities, including our Member Services.

I would like to particularly acknowledge Raymond Christophers, Chairperson of KAMS and KRS. Raymond provides steady leadership and plays a vital role in guiding the Boards and supporting me in my role as CEO. His commitment and counsel ensure we remain focused on our vision and strategic priorities.

National Agreement on Closing the Gap

Our advocacy efforts, informed by our Member Services and Kimberley Aboriginal people and communities, continue to play a central role in improving health care across the region. This year, we continued to press that the National Agreement remain central to government policies and programs, advocating for the full implementation of the four Priority Reforms:

1. **Formal partnerships and shared decision making**
2. **Building the community-controlled sector**
3. **Transforming government organisations**
4. **Shared access to data and information at a regional level**

We are fully committed to the National Agreement, and we know that our sector is doing much of the heavy lifting to put it into practice. The *Final Report of the first Independent Aboriginal and Torres Strait Islander-led Review of the Agreement* asked a critical question: are we changing structures or just adding voices to systems that stay the same? The review confirmed that the Agreement is the right tool for change, but the real challenge is ensuring it is implemented as intended. Its findings reinforced those of the Productivity Commission's Review, released in February 2024, which emphasised the need for genuine commitment and tangible action from government partners.

"We now have two independent reports telling us the same thing: where our organisations lead and are properly supported, we see progress. But when governments fail to meet their commitments, the gap doesn't just remain, it widens."



Pat Turner AM, Lead Convenor of the Coalition of Peaks, quoted in Croakey Health Media, *"Governments urged to address their systemic racism and other roadblocks to reform"*



NEHS at Pembroke Road Broome

At a national and state level, I acknowledge the re-elected Labor governments. In WA, Labor is now in its third term and has a real opportunity to make a difference. As the richest state in Australia, it faces the challenge of a vast land mass and the extraordinary costs of delivering essential services to remote communities. I am hopeful that the new government will heed the findings of the two Independent Reviews of the National Agreement and shift the pendulum. One clear example is our call for the Aboriginal Environmental Health Model of Care to be fully funded, and another for progress to be made on transitioning government-run primary health care clinics to the ACCHS sector.

Our Member Services

Our Member Services are achieving great things across the Kimberley. We come together regularly through the Kimberley ACCHS CEOs Network to collaborate and share decision-making. Collectively, we provide more than half of all primary health care services in the region. This is significant and demonstrates the strength of Aboriginal community-led care with Aboriginal health in Aboriginal hands.

Some of the great work being led by our Member Services includes the establishment of the Kimberley Remote Aboriginal Community Leaders Network (KRACLN) which is being supported by NEHS. The Network brings together representatives from 19 of the largest remote Aboriginal communities in the Kimberley to address common challenges, improve economic opportunities and strengthen socio-cultural connections. I was pleased to attend the launch of their Strategic Business Plan in September – this Network will be a strong collective voice to influence government policy and decisions.

I also extend a huge congratulations to NEHS on the opening of their new office at 24 Pembroke Road, Broome. This is a strong example of our sector's self-sustainability. While many of our services and programs are government funded, capital and infrastructure needs – particularly for administration buildings and fit-outs – are rarely considered. NEHS have achieved this building on their own property, demonstrating their determination to strengthen autonomy, health and wellbeing for Aboriginal people.

This year we partnered with YYMS to advocate for implementation of the WA Labor Government's 2021 commitment of \$24 million to develop a renal health centre in Halls Creek, together with a renal hostel and staff accommodation. This commitment followed years of advocacy from the Halls Creek community and our sector. We raised concerns about the lack of progress and engagement and have since received reassurance from the State Government that the project will proceed and that we will be involved. We look forward to seeing the completion and implementation of this much-needed service.

KAMS was established in 1986, with our founders recognising the benefit of pooling resources and working collectively across the region. As a member-based organisation, a significant part of our role is supporting our Member Services, including through the growth of the Aboriginal health workforce. As members of NACCHO, we are part of the First Nations Health Worker Traineeship Program and, through our ACCRTO, we have trained and graduated 15 new Aboriginal Health Workers. Many of these graduates are now working within our sector. These graduates are the future of culturally safe care in the Kimberley, bringing knowledge, lived experience and cultural strength that no textbook can teach.



Raymond Christophers, Christine Hoy and Benedicta Pindan at the launch of the KRACLN Strategic Business Plan



Aboriginal Health Worker graduates



In July we partnered with DAHS to deliver dance parties in Broome and Derby with a simple objective – to have fun. Each town hosted two events, one for primary school children and one for high school young people. Entry was free, with food and drinks provided, and great prizes on offer. Toots was our special guest performer, whose dance moves wowed the crowd, and there was DJ Agapantha and DJ Rene, while the BPAC Dance Crew showcased local talent in Broome. The magical Green Fairy provided face painting, Jessica James brought energy as the host, and there were chill-out spaces and a sausage sizzle for all. Both events were a tremendous success, with vibrant youth engagement and two epic nights of music and dancing.

These events were only possible through the dedication of the staff, who worked late into Friday night and again on Saturday, and the generous support of volunteers and collaborators. I extend my appreciation to everyone who organised, set up, worked during the events and packed down afterwards. Their commitment ensured the success of these events, which created safe, joyful spaces for children and young people to come together.



*Watch this showreel of the
Broome and Derby Dance
Parties*



Regional Collaboration

In July we celebrated the launch of the Kimberley Aboriginal Health Planning Forum's (KAHPF) Strategic Plan and its 26th year of operations. Formed in 1998 as a Steering Committee to develop an Aboriginal health plan, the KAHPF has grown to become the leading regional health and wellbeing forum in the Kimberley. While its initial focus was on primary health care, its scope has expanded to include disability and aged care, recognising that a holistic approach is essential to achieving the best outcomes.

KAHPF is a genuine partnership between organisations working in primary health care for Kimberley Aboriginal people. Today it represents 13 core and 13 associate member organisations spanning the ACCHS sector, government and non-government partners. The new Strategic Plan, *Together in Wellness*, aligns with the National Agreement and sets out key priorities to drive improvements in health outcomes for Aboriginal people in the Kimberley. I Co-Chair the KAHPF alongside the Executive Director of WACHS Kimberley, and I acknowledge the support of my Co-Chair and the contribution of all members to forum.



*Chris Hart and Vicki
O'Donnell cutting the
cake to celebrate 26
years of the KAHPF
and the launch of the
new Strategic Plan*

Our Sector's Impact – COVID-19

The broader national, state and regional contexts are critical to advancing our strategic priorities. Drawing on the expertise of our Member Services, partners and Kimberley Aboriginal communities, we provide policy advice to governments and advocacy for the health and wellbeing of Aboriginal people. Our recognised leadership makes us a trusted voice.

To demonstrate the impact of our sector, we need only look to our role in COVID-19. In 2024–2025 we contributed to evaluations and reviews reflecting on all phases of the pandemic – preparedness, response and recovery. We prioritised this work because it is important to show the evidence of the impact made by KAMS, KRS, our Member Services, Aboriginal Community Controlled Organisations (ACCOs), Aboriginal communities and Aboriginal people. During the pandemic we built strong partnerships with all levels of government, but it is too easy for governments to slip back into business as usual and forget about shared decision-making.

Within KAMS and KRS we reviewed our direct response to the pandemic across our clinical services. This was an important opportunity to reflect on the incredible efforts of our staff and Member Services, whose passion and tenacity to protect and care for people across the Kimberley saw them go above and beyond. The review has provided valuable learnings that we are now putting into practice for future pandemic planning. It also highlighted the strength of our partnerships with Member Services, remote Aboriginal communities, ACCOs and other stakeholders, supported by our peak bodies AHCWA and NACCHO.

In June, AHCWA released its COVID-19 Response Review, providing a detailed account of the pandemic from our sector's perspective. The report highlights the challenges of being excluded from decision-making, the failure of statewide fixes for remote Aboriginal communities, and the extraordinary strength, ingenuity and agility of Aboriginal communities and our sector in delivering safe, accessible care. It makes clear that ACCHS support was vital to the success of the response and calls on both the State and Federal Governments, as well as the sector itself, to ensure lessons are not lost and that strong partnerships are maintained for future health emergencies.

In 2024, NACCHO commenced a national evaluation of our sector's COVID-19 response, with KAMS, KRS and our Member Services contributing evidence of our effective work. Alongside our service delivery, we highlighted the critical role of communications in supporting Kimberley communities during the pandemic. Our Communications Team provided timely, accurate updates through social media and newsletters, promoted trusted community leaders receiving vaccinations, countered misinformation with respectful engagement, and ensured clinical questions were answered by local clinicians. They also translated rapidly changing public health information into multiple mediums, enabling accurate and accessible communication across the region.

Our Staff

I also want to highlight the remarkable commitment of our staff across KAMS and KRS. From delivering day-to-day health and wellbeing services to ensuring compliance during accreditation processes, their dedication has been unwavering. Our staff consistently demonstrate respect, treating each other, clients, patients and stakeholders with dignity.

I extend particular thanks to our Deputy CEO, Jenny Bedford, whose outstanding leadership, operational oversight and guidance have been critical to our progress. I also acknowledge our Executive Management Team for their collective leadership, expertise and commitment in driving our strategic priorities, supporting our staff and ensuring the effective delivery of services and programs across the region.



In 2024–2025 we undertook several accreditation and licensing exercises across KAMS and KRS. These included licensing inspections of our renal health centres in October 2024 in line with WA DOH Licensing and Regulatory Unit requirements, the ISO 9001 post-certification audit in May 2025, and the audit of our Mental Health, Social and Emotional Wellbeing (SEWB) and headspace Broome services against the National Standards in Mental Health Services. Our remote health centres and headspace Broome also continued to maintain accreditation against the Royal Australian College of General Practitioners (RACGP) Standards for General Practices.

These requirements are important in demonstrating how we maintain clinical and corporate governance across KAMS and KRS, alongside our sphere of cultural governance. I extend a huge thank you to all staff for their efforts in preparing for and engaging with the audits. Their hard work, including addressing quality management tasks and supporting site visits, ensured compliance with the highest standards and reflects our strong commitment to excellence in service delivery.

A final highlight this year was the launch of our refreshed brand, including a new logo and Style Guide. The new branding is being phased in across the organisation and will be fully implemented by the end of 2025. This milestone marks an important step forward for KAMS, and I am proud of the work that has gone into making it a reality.

As we look ahead, I extend my heartfelt gratitude to the Board, Member Services and all staff for their invaluable contributions. Your efforts continue to shape our path forward as we strive to improve the health and wellbeing of Kimberley Aboriginal people. We remain committed to achieving our strategic goals, driven by our shared vision. Thank you for your unwavering support.

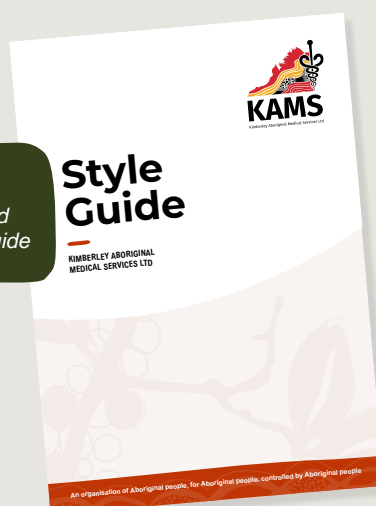
Vicki O'Donnell OAM

Chief Executive Officer

Kimberley Aboriginal Medical Services
and Kimberley Renal Services



KAMS
Logo and
Style Guide



About Us

Our History

For tens of thousands of years, Kimberley Aboriginal people have cared for and provided healing to Kimberley Aboriginal people. We are building on the work of those who came before us.

In the Kimberley region, BRAMS was first established in 1978, and this was followed the East Kimberley Aboriginal Medical Service (now Ord Valley Aboriginal Health Service (OVAHS)) in 1984. A regional vision for a unified voice, to provide centralised resources and collective advocacy for the ACCHS sector, was achieved in 1986 with the establishment of the KAMS Council. Since our inception, KAMS and KRS, along with our Member Services, have evolved immensely, and our vision and purpose have remained strong.

Our Member Services

We are a member-based, regional ACCHS. We provide support to and represent the interests of eight independent Aboriginal organisations:

- Beagle Bay Futures Indigenous Corporation (BBFIC)
- Bidyadanga Aboriginal Community La Grange (BACLG)
- Broome Regional Aboriginal Medical Service (BRAMS)
- Derby Aboriginal Health Service (DAHS)
- Milliya Rumurra Aboriginal Corporation (MRAC)
- Nirrumbuk Environmental Health and Services (NEHS)
- Ord Valley Aboriginal Health Service (OVAHS)
- Yura Yungi Medical Service (YYMS)

Our Services and Programs

Kimberley Renal Services is a wholly owned subsidiary of KAMS that delivers dialysis, prevention and support through a Mobile Dialysis Unit and renal health centres in Broome, Derby, Fitzroy Crossing and Kununurra.

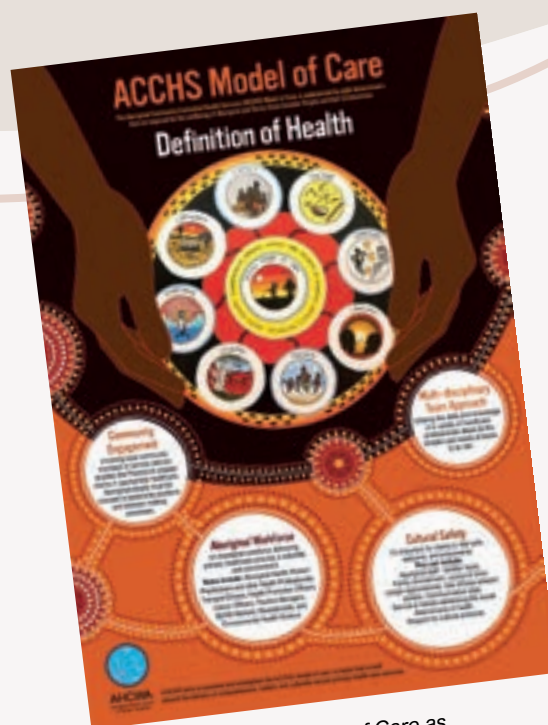
We provide a broad range of services and programs to support our Member Services and improve health and wellbeing outcomes for Kimberley Aboriginal people and communities, in line with the ACCHS Model of Care. These include:

- **Advocacy and Leadership** – relating to Aboriginal health and wellbeing at regional, state and national forums, in line with the National Agreement on Closing the Gap
- **Remote Services** – delivering comprehensive primary health care in the remote Aboriginal communities of Balgo, Beagle Bay, Bidyadanga, Billiluna and Mulan
- **Mental Health and SEWB** – supporting individuals and families through clinical and culturally informed programs, including auspicing headspace Broome
- **Integrated Support Services** – providing disability, allied health and aged care services/programs and delivering population health programs tailored to community needs
- **Kimberley Aboriginal Health Research Alliance (KAHRA)** – leading and supporting Aboriginal-led health research and evidence translation
- **Workforce and ACCRTO** – building a strong, skilled and culturally safe Aboriginal health and wellbeing workforce through accredited training, mentoring and professional development
- **Corporate and clinical support** – including finance, Information and Communication Technology (ICT), communications, human resources (HR), work health and safety, medical services, public health, policy, and sector strengthening



Our Model of Care

We have adopted the ACCHS Model of Care as developed by AHCWA. This holistic model recognises that primary health care is not just about treating a patient's physical illness with medication, but rather it is about getting to the root of the issue by talking and listening, and considering clients' and patients' emotional, spiritual and social needs in addition to what they may present with.



ACCHS Model of Care as developed by AHCWA

Our Boards

Our Boards comprise a chairperson and delegates from our Member Services. Our directors are responsible for overseeing the overall governance, management and strategic direction of KAMS and KRS and for delivering accountable corporate performance in accordance with our Strategic Plan.

The KAMS Ltd Board and KRS Pty Ltd Board convened six times this year, and consecutive meetings of the Member Service CEOs meetings were also held.

Additionally, the 2023–2024 Annual General Meetings took place on 19 December 2024.





Raymond Christophers
Chairperson



Mildred Hills
Deputy Chairperson
(to December 2024)
Director representing YYMS
(to December 2024)



Louie Bin Maarus
Secretary
Director representing BBFIC



Iris Prouse
Treasurer (to December 2024)
Deputy Chairperson
(from December 2024)
Director representing DAHS



Candice Peart
Treasurer
(from December 2024)
Director representing OVAHS



William Clements
Director representing NEHS



William Bangu
Director representing BACLG



Kathleen Watson
Director representing MRAC



Edith Skeen
(from February 2025)
Director representing YYMS



Timothy Garrett
(to December 2024)
Director representing BRAMS



Diann Britton
(from December 2024)
Director representing BRAMS

Our Organisational Structure

Our Executive Management Team

Our Executive Management Team are responsible for the planning, implementation, monitoring, review and continual improvement of our services and programs. Their areas of responsibility are reflected in the KAMS and KRS organisational charts and described briefly below.



Chief Executive Officer

Our CEO, **Vicki O'Donnell**, oversees the overall management of KAMS and KRS, providing advice and support to the Boards. Her role involves negotiating with funding agencies, developing policies and advocating for Members Services' needs at various levels. She is also responsible for implementing our strategic goals, guiding the direction of both KAMS and KRS, and helping the Boards fulfill their governance duties.

KAHRA, under Vicki's leadership, unites Kimberley health services, Aboriginal communities and local health research organisations. Its goal is to blend cultural wisdom, regional health service knowledge and research expertise to drive evidence-based improvements in health outcomes.



Deputy Chief Executive Officer

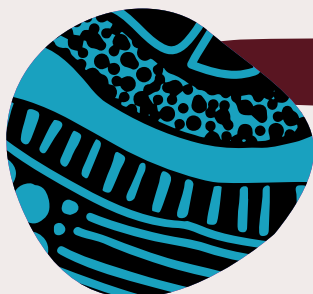
Jenny Bedford, Deputy CEO, is responsible for the day-to-day management of KAMS and KRS, working closely with the Boards, CEO and Chief Financial Officer to achieve our strategic goals. She leads and guides staff across our organisation with significant operational authority.

Our **Communications Team**, under Jenny's leadership, provides strategic communication planning, media relations, content creation, brand management, graphic design and policy.



Business Services

Chantal McMahon, Executive Officer, manages our head office reception, administration and cleaners, as well as assets, property and stores. She also provides high-level support to the CEO, Deputy CEO, and the KAMS and KRS Boards, ensuring effective governance, overseeing strategic matters and acting as the main point of contact between the Office of the CEO and key stakeholders.



Finance

Mark Heffernan, Chief Financial Officer, oversees all financial operations, ensuring the financial stability and sustainability of KAMS and KRS. He manages budgeting, financial reporting, grant acquittals and compliance with financial regulations. Mark provides strategic financial advice to the CEO and Board, supports funding negotiations and ensures accurate and timely financial reporting to internal and external stakeholders. He also oversees all financial support services provided by KAMS to KRS and our Member Services.



Information and Communications Technology

Shane Dahlstrom, Executive Manager ICT, oversees the ICT infrastructure and health informatics for KAMS, KRS and Member Services. He ensures that systems are reliable, secure and optimised for performance, manages business continuity and disaster recovery processes, and leads the helpdesk service. Shane is also responsible for maintaining hardware, software and MMEx (our electronic health record) while collaborating with stakeholders to keep up with the latest technology trends.



Integrated Support Services

Zaccariah Cox, Executive Manager Integrated Support Services, drives growth and innovation in delivering disability, aged care and population health programs, while leading the strategic effectiveness of the Kimberley Supports Consortium.

Our **population health** programs include Tackling Indigenous Smoking (TIS), Sexual Health, Hearing Health, Kimberley Foot Initiative, Rheumatic Heart Disease (RHD), Men's Health and the Australian Family Partnership Program.

Kimberley Supports delivers programs in the areas of disability, early childhood intervention and aged care workforce development: Community Connectors, Community Connector Coordinator, Remote Early Childhood Supports, Individual Capacity Building, and Elder Care Support.



Kimberley Renal Services

Elizabeth Riches, Chief Operating Officer of KRS, oversees the delivery of haemodialysis services across the Kimberley, ensuring patients receive comprehensive renal care locally, including at renal health centres in Broome, Derby, Kununurra and Fitzroy Crossing, reducing the need for relocation to metropolitan areas. She manages a multidisciplinary team and collaborates with stakeholders to implement best practice prevention and treatment strategies for chronic kidney disease, including operating a Mobile Dialysis Unit for culturally safe, on-Country care.



Medical Services

Dr Lorraine Anderson, Medical Director, provides expert clinical, strategic and technical advice to KAMS, KRS and our Member Services, supporting Aboriginal health policy, planning and service delivery. She also guides the implementation of clinical best practices, supports continuous quality improvement, and leads clinical governance and medical and public health staff, ensuring alignment with our ACCHS Model of Care.



Mental Health

Kristen Orazi, Executive Manager Mental Health, drives reform, research and innovation in mental health and SEWB services, with operational oversight of headspace Broome. She is responsible for enhancing the effectiveness and accessibility of these services for Aboriginal people, optimising relationships with service providers and stakeholders, and providing strategic guidance on service development and implementation.



Remote Services

The Executive Manager Remote Services provides operational leadership and governance for the provision of comprehensive primary health care services through the Balgo, Beagle Bay, Bidyadanga, Billiluna and Mulan remote health centres, ensuring alignment with our ACCHS Model of Care. They lead service delivery strategies, enhance services and drive continuous improvement.



Natasha Hegarty held this position to December 2024, with **Danielle Thorne** commencing in the position from December 2024.



Sector Strengthening and Compliance

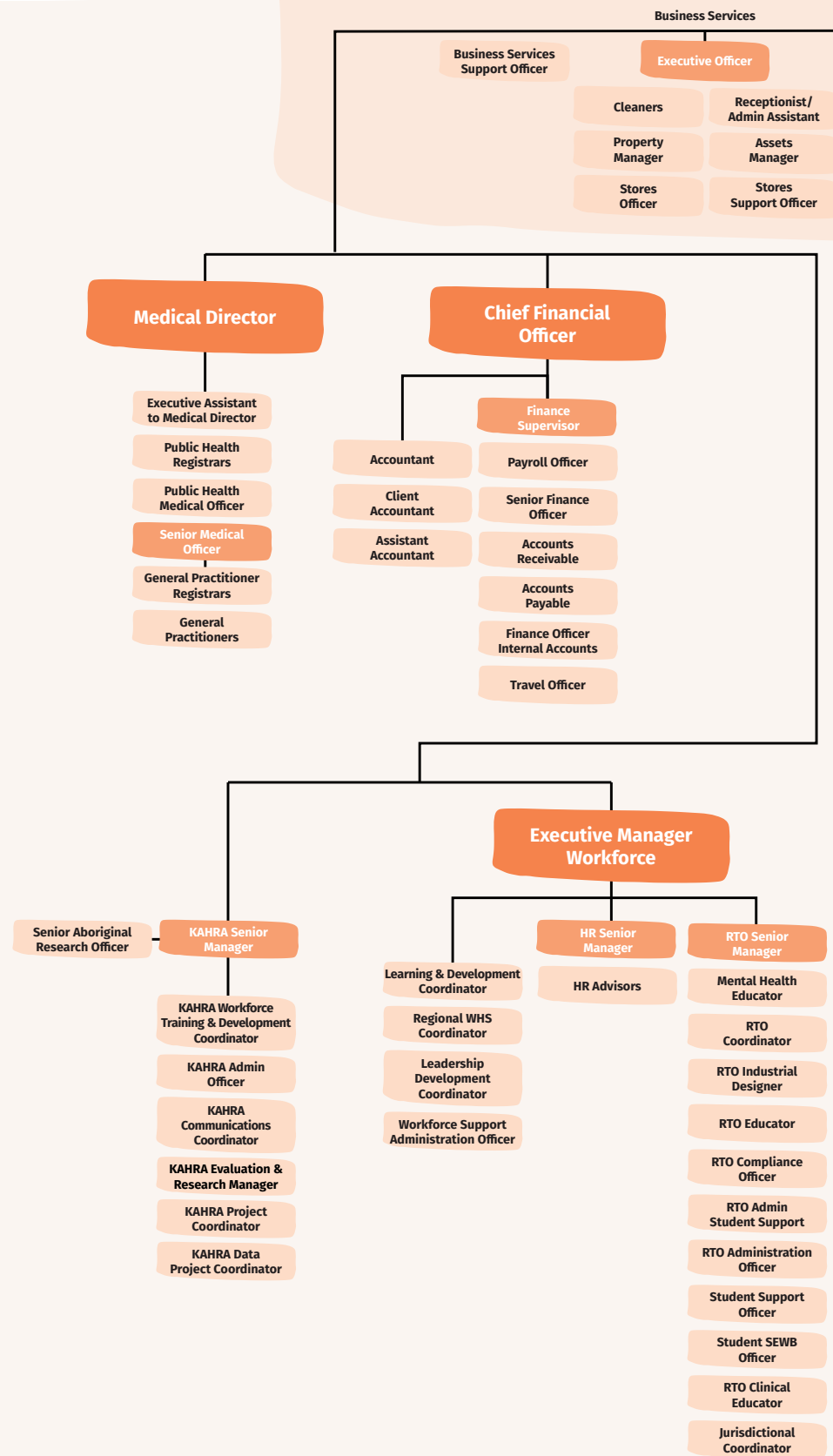
Carli Mackay, Executive Manager Sector Strengthening, is responsible for providing oversight of organisational compliance responsibilities and administrative and governance support systems. She is also leading projects to transition remote health centres to community control, and to establish a dedicated ACCHS in Fitzroy Crossing.

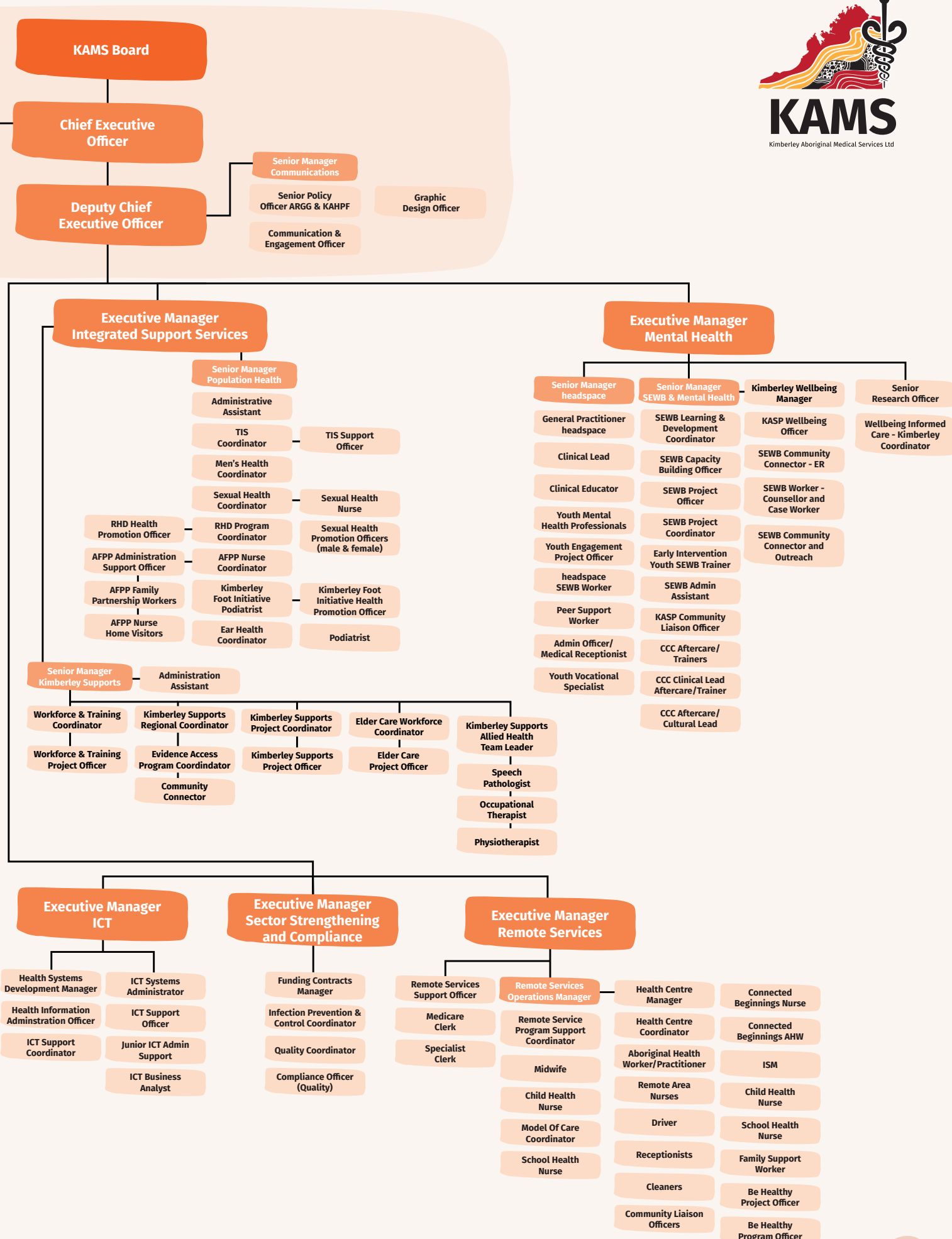


Workforce

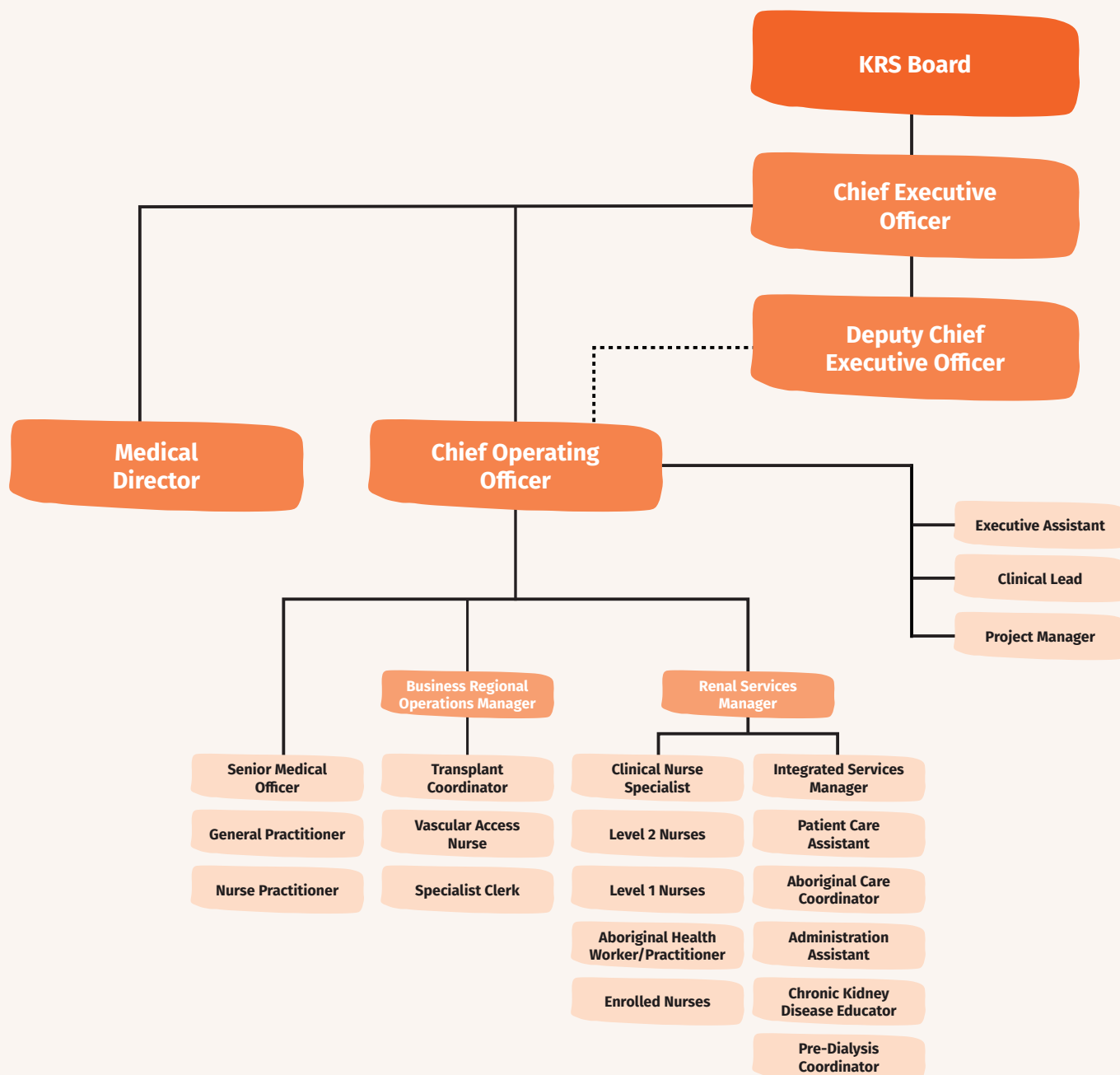
Julia McIntyre, Executive Manager Workforce, supports KAMS, KRS, and Member Services in recruitment, employee relations, and workforce development. She provides strategic direction on HR matters, oversees training and workforce development programs including our ACCRTO, and ensures compliance with HR/industrial relations and work health and safety legislation. She also fosters partnerships with educational institutions and registered training organisations to enhance career pathways and training opportunities.

KAMS Organisational Chart





KRS Organisational Chart



Our Staff

This year, many of our staff and teams across KAMS and KRS were recognised for their contributions to Aboriginal health and wellbeing. Awards acknowledgements ranged from excellence in clinical care to leadership, community engagement and innovation. We proudly celebrate these achievements, which highlight the strength, talent and commitment of our people and partners.

Medical Leadership

This year, our Medical Director, Dr Lorraine Anderson, was awarded the prestigious title of **Medicare Champion** in the Stronger Medicare Awards. Lorraine was honoured by the Minister for Health and Ageing at an official ceremony at Parliament House in Canberra, acknowledging her exceptional contributions, particularly in the Kimberley. This recognition reflects her unwavering commitment to her profession and her decades-long career in primary health care.

Lorraine was also awarded the **Public Health Association of Australia's Aboriginal and Torres Strait Islander Public Health Award** for her outstanding contribution to improving the health of Aboriginal people through a public health approach. This award recognises individuals who make a significant impact in promoting public health and strengthening equity in Aboriginal health care.



Image source: Mark Butler

Training Honours

This year our ACCRTO was honoured as the WA Small Training Provider of the Year at the WA Training Awards, recognising their excellence and innovation across all aspects of vocational education and training delivery.

Student Albert Bevan was added to the Honour Roll as WA Aboriginal and Torres Strait Islander Student of the Year, also winning the national title at the 2024 Australian Training Awards. Albert completed a Certificate IV in Mental Health through our ACCRTO while working at BRAMS.



Hear about Albert's training journey and what inspired him to choose his vocation:





Rural Health Excellence

Nick Corsair, Renal Transplant Coordinator with KRS, was awarded the **2025 WA Rural Health Excellence Award for Nurse of the Year**. Nick has significantly improved renal health services in the Kimberley by increasing access to renal replacement therapy for Aboriginal people through patient-centred care, advocacy and program development.



Supervisor Recognition

The Majorlin Kimberley Centre for Remote Health, University of Notre Dame Australia (UNDA), hosts the annual Supervisor Recognition Awards to acknowledge outstanding contributions to student placements. In 2024, headspace Broome received the **Inspirational Award** for its dedication to mentoring the next generation of health professionals.



Image source:
Broome Advertiser



Image source: UNDA

2025 AHCWA Awards

Each year, AHCWA hosts the WA ACCHS Sector Awards dinner to highlight the successes and outstanding achievements of those working in Aboriginal health, as nominated by Member Services.



Briana Osborne accepting Donna's award on her behalf

Image source: AHCWA

Elder in the Community

Denetta Cox

Denetta has dedicated over ten years as a senior Aboriginal Health Worker at the Beagle Bay Remote Health Centre. She is always willing to step in during staff shortages, showing the vital role Aboriginal Health Workers play in delivering comprehensive primary health care under our ACCHS Model of Care.

Young Achiever

Ala McKay

Ala has shown exceptional growth as Kimberley Foot Initiative Health Promotion Officer, raising awareness and preventing diabetic foot complications through creative and engaging community activities. Working closely with our podiatrist, she has delivered strong prevention messages and education with excellent community feedback. Her commitment and partnership-building reflect her development as a young leader with a bright future.

Contribution by an Employee

Donna Thomason

Donna has shown exceptional leadership as manager of the Bidyadanga Remote Health Centre, guiding her team with fairness and care through a period of significant change. She played a central role in supporting the transition of the Centre to BACLG, contributing to a smooth process that strengthens community control.

Sheona O'Donnell

Sheona is a trusted HR Advisor, valued for her approachable manner and practical advice that strengthen confidence in HR processes and decision-making. She also represents KRS with professionalism and enthusiasm at conferences and workshops, making a positive impact across the organisation.



Ala McKay and Jodie Millroy at the Lowitja Conference

Image source: AHCWA

Annual Staff Awards

Each December we come together to celebrate the achievements of our KAMS and KRS staff through our annual awards. These awards recognise the outstanding contributions of our nominees and recipients, and we also take this opportunity to acknowledge staff service milestones.



Sandie-Lee Ozies
and Courtney Fairfull

Years of Service

This year we celebrated the dedication of staff who reached milestones of 7, 10 and 20 years of service with KAMS and KRS.

7 Years

- Jessica Fong
- Jessica French
- Kate Fox
- Kiarnee Baguley
- Lenard Ansey
- Sandie-Lee Ozies
- Serena Forrester
- Siobhan Ryan
- Zaccariah Cox

10 Years

- Brad Ward
- Denetta Cox
- Emma Griffiths
- Hannah Wade
- Norie Arroco
- Patricia Bird
- Rosemarie Burke
- Shane Bin Omar
- Sheona O'Donnell
- Tadami Tanaka
- Vicki O'Donnell

20 Years

- Kathrina Fong
- Santosa Guzzetta

Bringing out the Best

This award goes to a staff member who displays leadership.

KAMS – awarded to Sandie-Lee Ozies

Sandie-Lee is a standout HR leader, providing trusted advice on complex workforce matters and guiding her team with strategic oversight. Her impact has grown significantly across KAMS, KRS and Member Services, and she continues to bring energy, commitment and cultural understanding to her work, embodying the values of KAMS and our ACCHS Model of Care.

KRS – awarded to Michelle O'Donnell

Michelle has guided the significant growth of the Derby Renal Health Centre this year, ensuring her team felt supported through periods of change. Her steady leadership, extensive experience and collaborative approach have been invaluable to KRS.



Michelle O'Donnell
and Ellen Hodder

Other nominees in this category were:

KAMS

- Courtney Fairfull
- Donna Thomason
- Kristen Orazi

KRS

- Ellen Hodder
- Jessica French
- Mariessa Pucci



Jodie Millroy and Courtney Fairfull



Sheona O'Donnell, Courtney Fairfull, Renae Fong and Jill Fowler

Serving the Client

This award goes to a staff member who displays care for our patients, our staff and our stakeholders.

KAMS – awarded to Chris Munday

Chris has dedicated many years to the Kutjungka region, supporting better chronic disease management as a Diabetes Educator and helping patients access specialist care. Known for his adaptability and supportive approach, he is highly valued by patients, colleagues and community alike.

KAMS – awarded to Courtney Fairfull

Courtney exemplifies our values through her client-centred leadership as Senior Manager for Population Health. She supports her team with knowledge and experience, ensures programs are delivered to a high standard, and takes a hands-on approach that consistently improves outcomes.

KRS – awarded to Siobhan Ryan

Siobhan is an invaluable member of KRS, supporting three accreditations and major organisational improvements this year with adaptability, precision and care. Her dedication, organisational skills and support for patients, staff and stakeholders embody the spirit of the Serving the Client Award.

Other nominees in this category were:

KAMS

- Jodie Millroy
- Norie Arroco

KRS

- Emma Griffiths
- Grace Horsman
- Isaac Buckle
- Raelene Con Goo
- Rose Burke

Outstanding Contributor

This award goes to a staff member who works behind the scenes and goes above and beyond the required expectations of their role.

KAMS – awarded to Jill Fowler

Jill exemplifies our values through her role as Funding Contracts Manager, overseeing contracts and driving improvements through our new contract management system. She provides patient, practical mentorship to new senior managers. Her dedication, expertise and collaborative approach make her an asset to KAMS.

KRS – awarded to Lucy Falcocchio

Lucy brings reliability, dedication and care to every task. From engineering and building projects to maintenance and events, she approaches each challenge with confidence and determination. Her adaptability and proactive approach make her a valued colleague and a true unsung hero.

Other nominees in this category were:

KAMS

- Courtney Fairfull
- Megan Chidgey
- Renae Fong
- Sheona O'Donnell

KRS

- Ana Felarca
- Anne Lyon
- Genkin Raj Gunasekaran

Lucy Falcocchio





Chantal McMahon

Employee Choice

This award is chosen by staff to recognise and celebrate the hard work, dedication and outstanding contributions of their colleagues.

Amelita Gamboa

Amelita has dedicated seven years of service to the Kutjungka region, demonstrating excellence and care in all she does. She has encouraged 715 health checks, ensured recalls are up to date and mentored new staff. Her unwavering commitment to community health and wellbeing makes her a respected and valued member of KAMS.

Other nominees in this category were:

- Catherine Hunt
- Charlotte Dolby
- Cheyenne Carter
- Claire Thistleton
- Courtney Fairfull
- Darcy Hegarty
- Deanne Cox
- Donna Thomason
- Hannah Lipscomb
- Hayley Dickfos
- Jess Hawthorne
- Jill Fowler
- Madge Mohi
- Megan O'Connor
- Melody Miolin
- Michaela Reiss
- Norie Arroco
- Rebecca Walding
- Sandie-Lee Ozies
- Slade Sibosado
- Trenna Wadge
- William Hunter

CEO Awards

These awards are chosen by our CEO and are awarded to staff and teams who have been exemplary over the year.

Individual Award, KAMS – awarded to Chantal McMahon

As Executive Officer, Chantal supports governance while managing assets, admin, maintenance and fleet. This year she led major infrastructure projects, including the new Bidyadanga Remote Health Centre and KAMS administrative building, strengthening our ability to deliver health and wellbeing services across the region.

Individual Award, KRS – awarded to Jess Fong

This year Jess played an extraordinary role successfully completing three back-to-back accreditations. She was integral to preparations, guiding staff through complex requirements and follow-up, all while overseeing daily operations and jointly managing the Broome Renal Health Centre. Jess's outstanding leadership, work ethic and commitment make her a true superstar.



Jess Fong

**Team Award, KAMS –
awarded to headspace Broome**

Our headspace Broome team shows unwavering passion and commitment to improving the mental health and wellbeing of young people. They have embedded the ACCHS SEWB Model of Service into the headspace framework, creating a culturally safe and trusted space in collaboration with Elders and young people. Despite high demand and limited resources, the team consistently goes above and beyond, supporting the “no wrong door” principle and making a valued contribution to the sector.



*Derby Renal
Health Centre staff*

**Team Award, KRS –
awarded to Derby Renal Health Centre**

The Derby Renal Health Centre team has demonstrated exceptional dedication and resilience, navigating recruitment challenges, contractor delays and the demands of three consecutive accreditations. In response to a review of patient preferences, they adapted KRS’s operational model to introduce a third dialysis shift, making it the largest of our renal health centres and enabling many patients to return home. Throughout these changes, the team ensured continuity of care and warmly welcomed returning patients, reflecting their strong commitment to patient wellbeing.

*Jade O'Donnell and Dr Mel Miolin,
headspace Broome*



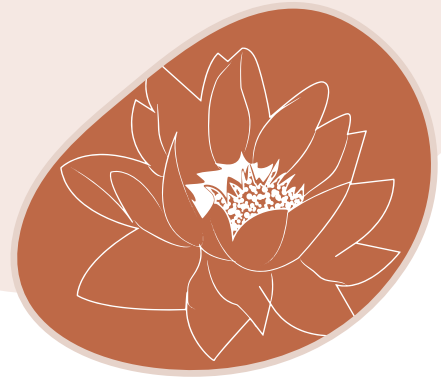


*Karen and Cheree from
NACCHO visiting the Derby
Renal Health Centre
Image source: NACCHO*



Kimberley Renal Services

KRS delivers haemodialysis at renal health centres in Broome, Derby, Fitzroy Crossing and Kununurra, reducing the need for patients to relocate to metropolitan areas for treatment.



KRS operates with a dedicated multidisciplinary team, primarily consisting of Aboriginal Health Workers, Nurses, Aboriginal Care Coordinators and Patient Care Assistants. The service integrates primary, secondary and tertiary renal care into a culturally safe model, allowing patients to access comprehensive care locally. The team collaborates with regional stakeholders to deliver high-quality services, focusing on early detection, prevention and treatment of chronic kidney disease. Screening identifies new cases, some of which progress to end-stage kidney disease requiring dialysis.

In **2024–2025 KRS provided 22,180 episodes of dialysis to 163 patients** across our renal health centres:

2024–2025	Patients (#)	Episodes of dialysis (#)
Broome	46	6,583
Derby	56	7,559
Fitzroy Crossing	20	2,763
Kununurra	41	5,275
TOTAL	163	22,180

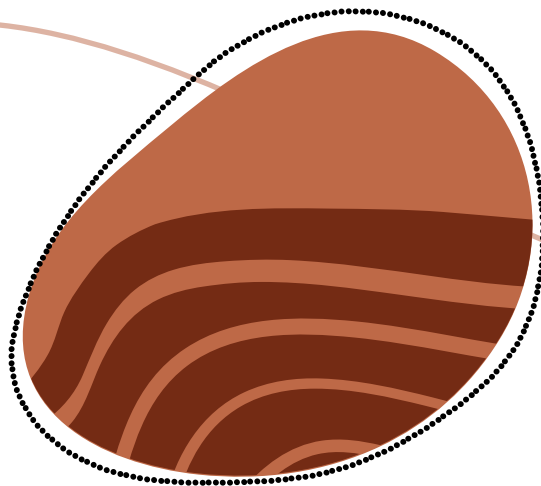
9@9

KRS holds a weekly all-staff meeting every Wednesday at 9am, known as 9@9. Designed to run for just nine minutes, the sessions make it easy for all staff to participate. Each meeting features a staff spotlight, where a team member shares about themselves and their role, a centre update to keep everyone informed of activities and challenges across the service, and a short education piece on a clinical or operational topic.

In 2024–2025, **45 sessions were delivered** covering a wide range of areas including work health and safety, policy updates, audit results, Clinical Practice Review Committee bulletins, infection prevention and control, accreditation, data management, and insights from conferences and workshops. These short, regular meetings provide an effective way to share knowledge, strengthen team connection and reinforce a culture of continuous improvement across KRS.

Learn more about careers at KRS in this video:





Referrals

In 2024–2025 we received 155 new referrals to KRS from a range of services including other ACCHSs, GPs, and hospital-based clinicians. Each referral was assessed and triaged to ensure timely access to appropriate renal care and support, contributing to early intervention and improved management of chronic kidney disease across the region.

Referrals received by KRS 2024–2025												
July	August	September	October	November	December	January	February	March	April	May	June	TOTAL
19	6	10	19	15	4	15	11	19	10	15	12	155

Transplant Coordination

Kidney transplantation is a life-changing treatment option for people with end-stage kidney disease, and all new patients commencing dialysis are assessed for their suitability. There are currently 21 active transplant recipients living in the Kimberley, with one transplant performed in 2024–2025. While this may appear to be a small number, in the Kimberley context it represents a significant achievement given the complex clinical, logistical and cultural challenges involved. Patients in remote areas often travel long distances away from family and Country for assessment, surgery and follow-up, making the pathway to transplantation particularly demanding.

Our Transplant Coordinator plays an important role in supporting patients before, during and after transplant surgery. This includes guiding patients through the pre-transplant “work-up” phase, where 33 patients are currently engaged. Tailored education is delivered in partnership with Aboriginal Care Coordinators and often involves hearing directly from transplant recipients who share their lived experiences to help others prepare. This approach strengthens patient readiness and ensures culturally safe support throughout the process.

We also provide education to primary health care providers across the region, building their capacity to assist patients both during the work-up and in post-transplant care. In 2024–2025, our Transplant Coordinator delivered seven patient education sessions with 57 attendees and seven staff education sessions with 34 attendees. These efforts not only support individuals and families navigating transplantation but also build knowledge and capability across the wider Kimberley health system.



Fitzroy Crossing Renal Health Centre expansion

Image source: Divina D'Anna

Mobile Dialysis Unit

The Mobile Dialysis Unit, supported by the Richard Lockwood Foundation since 2019, provides respite dialysis in remote areas so patients can remain connected to Country and participate in cultural events. In September 2024, the Foundation funded a visit to Halls Creek, giving patients the opportunity to spend culturally and socially significant time on-Country. The Foundation also assists with compassionate travel, including covering transport costs, for example, to reunite siblings who are both dialysis patients.

This partnership has extended beyond dialysis to supporting patients preparing for kidney transplantation. Blood pressure monitors were distributed to patients undergoing the transplant work-up process, helping them manage their health and enabling early intervention if elevated readings are detected. The Foundation has also funded access to non-prescription medications required in the work-up process, removing barriers that can delay progression. This support has already led to success, with one patient now scheduled for a surgical consultation to be placed on the transplant waitlist.

The Foundation's contributions also support transplant recipients who share their lived experiences with other patients, strengthening peer education and health literacy. This investment has improved patient outcomes, built community capacity and enhanced support for individuals navigating the transplant journey. We are grateful for the Richard Lockwood Foundation's ongoing partnership and the life-changing impact it continues to enable for our communities.

Infrastructure

Expansion of our Fitzroy Crossing Renal Health Centre is underway. This will double the facility's capacity, making it possible for an additional 16 renal patients to receive ongoing treatment closer to home and on-Country.

Infrastructure reviews were completed across all our renal health centres. These comprehensive reviews incorporate work health and safety, infection prevention and control, property and assets. Simultaneously we completed clinical and operations audits and site inspections. This coordinated, productive approach provides opportunities for quality improvement activities including delivery of onsite staff training.

This year we completed two infrastructure projects:

- Kununurra Renal Health Centre – plant area cover
- Broome Renal Health Centre – chiller replacement.

Crossing Renal Health Centre expansion

Image source: WACHS



Image source: Wangki Radio



Mobile Dialysis Unit

Image source: Kununurra Sun



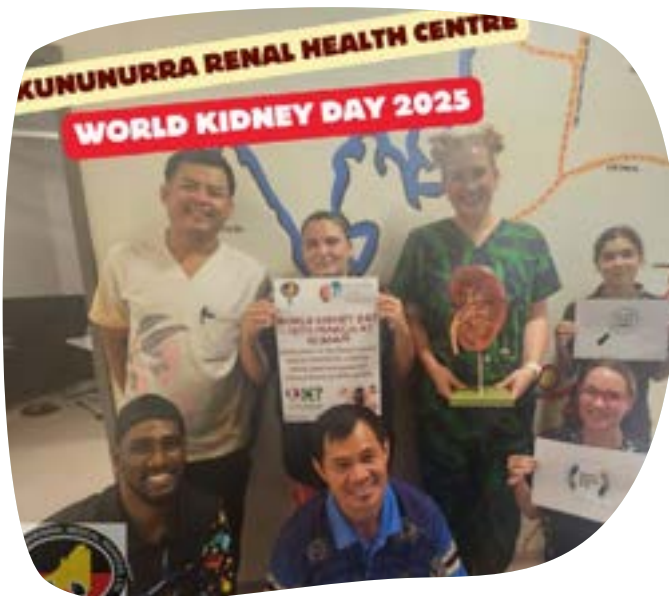
Education

Chronic Kidney Disease

This year we provided chronic kidney disease education sessions to 1,482 participants across the region. This included school-based education sessions, engagement with other ACCHSs, participation in community events, educational sessions within correctional facilities and outreach visits to remote communities.

Pre-Dialysis

Pre-Dialysis education was provided to 1,478 individuals across the region, with comprehensive support including ongoing monthly monitoring of chronic kidney disease progression, education on available renal replacement therapy options and personalised support throughout the patient's chosen renal replacement therapy pathway.



Patient Engagement

Culturally safe and inclusive patient engagement, including active listening, is core business of KRS. Patient yarning circles are held at each renal health centre to seek patient feedback in a respectful, informal and culturally appropriate setting. Yarning circles provide a space where patients feel safe and empowered to share their experiences, perspectives and ideas about how the service is working and where improvements can be made.

In addition to yarning circles, KRS undertakes a range of other patient engagement strategies, including monthly one-on-one check-ins between patients and their Aboriginal Care Coordinator, and an annual patient satisfaction survey, which formally collects insights into the overall performance of each renal health centre and helps track trends over time.

Image source:
Kununurra Sun



Clinical Practice Review Committee

Our ongoing commitment to quality improvement and regulatory compliance is demonstrated through the work of the Clinical Practice Review Committee. This committee supports clinical governance across KRS. This multidisciplinary committee brings together a diverse range of clinical, operational, cultural and quality expertise to ensure that our clinical policies, procedures and supporting documentation are regularly reviewed, up-to-date, and aligned with current best practices and regulatory standards.

Their remit includes the review and endorsement of clinical documents which contributes to risk mitigation, clinical safety and operational consistency. In 2024–2025 they reviewed and approved 39 clinical governance documents, across a range of topics reflecting the breadth of activities and processes supported by the committee:

Types of clinical governance documents reviewed by the KRS Clinical Practice Review Committee 2024–2025

Research	1
Template	1
Terms of reference	1
Audit tool	2
Checklist	2
Flowchart	3
Form	3
Instructions	1
Job description form	2
Process map	1
Policy/procedure	22

Read more about the “interesting, challenging and rewarding” work of KRS in this interview with Dr Dean McKittrick



Our Strategic Priorities



Kimberley Communities

Excellent health services and outcomes for Kimberley Aboriginal people



Shared Knowledge

Resourceful health system driven by research and innovation



Aboriginal Organisations

Strong, sustainable and unified Aboriginal community-controlled sector

Our Strategic Plan has five strategic priorities for achieving our vision:



Health System

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



Regional Workforce

Skilled, supported and connected Kimberley Aboriginal health and wellbeing workforce

Strategic Plan 2022–27

We are proud to present key accomplishments from 2024–2025 in this annual report as they align to our Strategic Plan.





Kullarri NAIDOC Reconciliation Walk

The 2025 Kullarri NAIDOC Reconciliation Walk marks the commencement of NAIDOC activities in the Kullarri region. It brings the whole Broome community together to show their support for reconciliation.



Kimberley Communities



For Aboriginal people, health encompasses all aspects of life: spiritual, emotional, physical, community, Culture, Country and language. We believe that a community-led effort is vital to increase access to the holistic ACCHS Model of Care for all Aboriginal people in the Kimberley. This strategic priority is about achieving **excellent health services and outcomes for Kimberley Aboriginal people.**

Remote Services

We provide comprehensive primary health care services through our remote health centres in Balgo, Beagle Bay, Bidyadanga, Billiluna and Mulan, in line with ACCHS Model of Care. Our centres are often the first point of contact for patients with the Australian health system, offering medical, public health and health promotion services; maternal, child and school health; preventative care; home visits; assistance with transport; and support to access alcohol and other drug (AOD), environmental health, aged care and disability services.

Across these centres, more than 80 staff deliver this care. Our multidisciplinary teams build strong,

trusting relationships with patients, supporting continuity of care and effective management of chronic conditions while also focusing on prevention and early intervention. Cultural respect is central to our services. We listen to Elders and community members to ensure programs reflect the cultural diversity of Aboriginal people.

We work in partnership with stakeholders, including other KAMS and KRS staff, to design and deliver culturally safe and responsive services. Local engagement and regular review ensure programs remain relevant to the needs of our patients and communities.



The Department of Premier and Cabinet visited the Bidyadanga Remote Health Centre for a meet and greet where the local staff spoke about our ACCHS Model of Care and how this meets community needs.

Remote Health Centre Service Delivery 2024–2025

Number of:	Kutjungka			Bidyadanga	Beagle Bay	TOTAL
	Balgo	Mulan	Billiluna			
Occasions of service ¹	13,702			9,668	2,439	28,187
715 health checks ²	134			51	64	249
GP Management Plans	31			72	90	193
Afterhours emergency presentations	366	111	53	439	155	1,124

¹ An 'occasion of service' is a count of any service provided to a patient, or a group of patients, on each occasion that service is provided.

² Medicare Benefits Schedule Item 715 Aboriginal and Torres Strait Islander Health Assessment means the assessment of a patient's health and physical, psychological and social function and consideration of whether preventive health care and education should be offered to the patient, to improve that patient's health and physical, psychological and social function



Community Engagement

Our relationship with community is built on trust, with local voices guiding decision-making. We co-design programs and work at the community's pace, while we provide comprehensive primary health care, prevention remains a priority.

Flu Drive, Beagle Bay

In partnership with the Beagle Bay Community Navigators, the Beagle Bay Remote Health Centre took part in a community-led event focused on increasing flu immunisation rates by promoting vaccination, raising awareness about Hepatitis C, and providing health education. Our staff set up a stall outside the Beagle Bay Community Store, where they provided flu vaccine education to 45 people and administered 32 flu vaccines.

Sexual Health Week, Balgo

In collaboration with our Sexual Health Team, girls and young women aged 11 to 25 attended the 'Blue Building' in Balgo for a week of sexual health education. Around 10 to 20 participants joined each day, with older girls returning from boarding school helping to lead discussions and encourage engagement. Activities included making bracelets, sharing pamper packs with essential items, and enjoying shared meals. A safe and inclusive space was created, with strong participation throughout the week.

On the Thursday, two Elders joined to make damper on-Country and support conversations around sexual and emotional wellbeing. They translated male and female anatomy terms into Kukuja language and helped guide discussions about strong healthy choices, consent, contraception, protection and where to seek help if feeling unsafe or disrespected. They created an environment where girls and young women felt comfortable to listen, share and learn together.

BreastScreen, Bidyadanga

The BreastScreen WA mobile service visited Bidyadanga for a week in April, working with our Remote Health Centre to ensure a successful visit. Fifty-seven women were screened. Bringing specialist care directly to remote communities is vital, and ongoing visits are strongly valued and supported by the community.



Sexual Health Week, Balgo

Aboriginal Workforce and Cultural Safety

A pillar of our remote services is our Aboriginal Health Worker/Practitioner first policy, recognising them as the “glue” between the remote health centre and the community. They bring connection to Culture, language and patients, and we are guided by their invaluable knowledge. We also support our Aboriginal Health Worker/Practitioner workforce to access training and professional development.

Case Study

Empowering Local Leadership, Beagle Bay

Our Beagle Bay Remote Health Centre is managed by Patricia Smith, a proud Ngarinyin woman from Wyndham who now lives in Beagle Bay with her husband and family. With a background as an Aboriginal Health Practitioner, Patricia brings clinical expertise, cultural insight and a strong connection to patients and staff.

She leads a team made up mostly of local community members, creating a culturally safe and welcoming environment built on trust. This is the ACCHS Model of Care in action – centring community, empowering Aboriginal leadership and building a workforce that reflects and understands the people it supports. Aboriginal leadership strengthens relationships, supports continuity of care and leads to better health outcomes for the whole community.

Case Study


Local Faces, Bidiyadanga

Marlene Bullen, receptionist at our Bidiyadanga Remote Health Centre, is a local Yulparija community member who plays an important role in how we deliver care. As the first face people see when they walk through the door, she helps make the clinic a welcoming and culturally safe space. Her local knowledge, community connections and friendly approach build trust and put patients at ease from the moment they arrive.

While her role might seem behind the scenes, it is a key part of the ACCHS Model of Care – employing local people, valuing community connections and ensuring services are delivered in ways that respect culture. Marlene is a big part of what makes the clinic feel like it belongs to the community.



Marlene Bullen

A circular photograph of Pepita Hunter, a woman with dark hair and glasses, wearing a blue polo shirt with a logo. She is smiling and waving her right hand. In the background, there are shelves with red storage bins and some greenery.

Pepita Hunter

Case Study

Bringing Heart and Experience to Remote Nursing, Bidyadanga

Pepita Hunter, originally from Broome and a proud Bardi Woman with family ties on the Dampier Peninsula, from Beagle Bay to Ardyaloon, is employed at our Bidyadanga Remote Health Centre as a remote area nurse. Pepita brings not only strong clinical knowledge, but also deep cultural understanding and personal experience.

After working in various roles including management, she made the decision to return to remote nursing, knowing this is where her heart is. She wanted to be back on the ground, working closely with people and supporting community health in a hands-on, meaningful way.


As a mother and grandmother, she brings powerful lived experience that helps her connect deeply with patients. She understands the challenges families face and supports them with empathy, honesty and cultural care.

This year, she shared her personal journey in a presentation to the community, “A Mother’s Story”, highlighting the risks of alcohol use and the impacts of driving under the influence. Her story resonated with many, offering a relatable and heartfelt message that blended education with lived experience.

Her work is a strong reflection of the ACCHS Model of Care combining clinical skills, cultural knowledge and community connection to deliver care that truly meets the needs of Aboriginal people. She continues to be a strong role model and advocate for health and wellbeing in our clinic and within the community.

Case Study

Strengthening School Health

A circular photograph of Telisha Shoveller and her family. They are outdoors, smiling for the camera. Telisha is in the center, wearing a dark shirt. There are several children around her, some sitting and some standing. The background shows some trees and a fence.

When a short-term staffing gap left our School Health Nurse position vacant, local Aboriginal Health Practitioner Telisha Shoveller stepped in on secondment. A proud Bardi/Jawi woman from One Arm Point, Telisha now lives in Bidyadanga with her husband, a Karajarri man, where they have raised their family and built strong community ties.

Working as part of our child health team but based in the school, Telisha carried out health checks, supported vaccinations, delivered health promotion and worked closely with families and staff. Her community connections and cultural knowledge improved communication and consent, leading to better attendance at appointments. Health promotion was tailored to local languages and contexts, and she strengthened links between families, the school and the remote health centre. This secondment is a clear example of the ACCHS Model of Care – embedding a local practitioner who delivered culturally safe care, built trust and supported both physical and social and emotional wellbeing. Based on this success, we are exploring opportunities to embed Aboriginal Health Practitioners in school health roles more permanently.

Telisha and her family

Multidisciplinary Team Approach

Imaging on-Country

In line with the ACCHS Model of Care, we have introduced an outreach sonography service so patients can receive scans in their own community without needing to travel. Bringing diagnostic imaging on Country helps overcome cultural, geographic and logistical barriers, ensuring better access to care in a cost-effective, patient-centred way.

The sonographer not only performs scans but also builds local clinical capacity by working alongside our staff to provide technical support, troubleshoot equipment and guide diagnostic decisions. This service supports safer pregnancies, more accurate diagnoses and stronger, self-determined health services close to home.

Rural Health West provides funding for this outreach service through the Rural Health Outreach Fund.



Case Study

Mental Health Services, Kutjungka

In the Kutjungka region, we have established a culturally grounded model of remote mental health care that reflects the ACCHS Model of Care. The service combines cultural safety, community engagement and multidisciplinary teamwork to improve outcomes for Aboriginal patients and families.

A visiting psychiatrist is supported by our Remote Services team through coordination of visits, recalls, transport, referrals and follow-up. The psychiatrist works closely with Stewart Jan, our Social and Emotional Wellbeing (SEWB) Outreach Worker, whose cultural knowledge and family-focused approach has reduced barriers to care. A dedicated Mental Health Remote Area Nurse provides face-to-face assessments and strengthens the link to the primary health care team, while collaboration with the WACHS Clinical Nurse Specialist ensures continuity of care.

The model is highly valued and accepted by local communities, with its success built on genuine collaboration and the collective contributions of a multidisciplinary team.

Funding for the psychiatrist service is provided by Rural Health West.

Endorsed Midwives

Our remote services now have two endorsed midwives embedded in our remote health centres. Becoming endorsed is no small task – it requires at least 5,000 hours of recent clinical experience, a postgraduate prescribing qualification, registration with the Australian Health Practitioner Regulation Agency, and the ability to hold both a provider and prescriber number. This means they can independently order tests, prescribe medications, develop care plans and bill eligible Medicare Benefits Schedule items, while working as part of a multidisciplinary team alongside Aboriginal Health Workers/Practitioners, GPs, nurses and other service providers.

In practice, our endorsed midwives work both in the clinic and in community. They support women through their antenatal, birthing and postnatal journey, including attending hospital obstetric appointments when needed. For first-time mothers, having a familiar person by their side helps make an unfamiliar system less daunting, and advocacy is provided when asked for. They help women follow through with care plans, strengthen shared care arrangements and improve outcomes.

Case Study

Midwifery Services, Bidyadanga and Beagle Bay

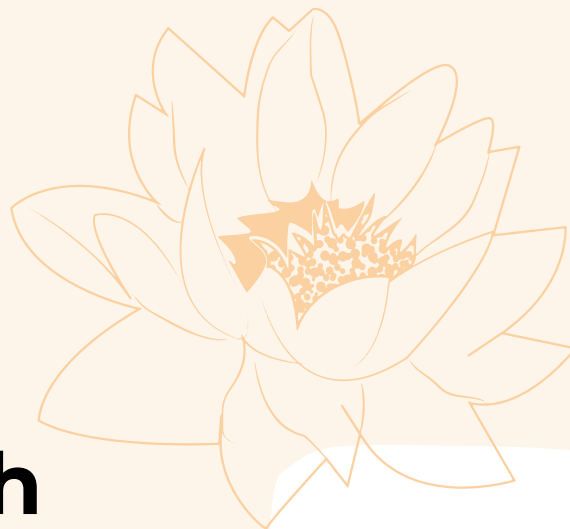
Our midwife, Donna Stephen, provides holistic and continuous care for women and families across Bidyadanga and Beagle Bay. With more than 20 years of experience, she supports women from early pregnancy through to 36 weeks, then again after birth until at least eight weeks postnatal. Her care extends beyond pregnancy to address broader health and wellbeing needs, and she places strong emphasis on trust, cultural safety and tailoring support to each woman's circumstances.

Donna works closely with Aboriginal Health Workers and other providers to coordinate care, advocate for clients and connect families with community resources. She is committed to bridging the “continuity gap” for women who must travel to hospital for birth, with the vision of remote midwives being able to continue supporting their patients in birthing suites. Her flexible, relationship-based approach reflects our commitment to the ACCHS Model of Care.



You can read more about Donna's story as published by CRANApus:





Mental Health

Social and Emotional Wellbeing (SEWB)

We believe in a holistic approach to mental health, recognising the significance of connection to Country, Culture, spirituality and ancestry in shaping the wellbeing of individuals and communities. Our dedicated Social and Emotional Wellbeing (SEWB) team delivers preventative and clinical mental health services in alignment with the ACCHS SEWB Service Model as developed by AHCWA.

View the ACCHS SEWB Service Model:

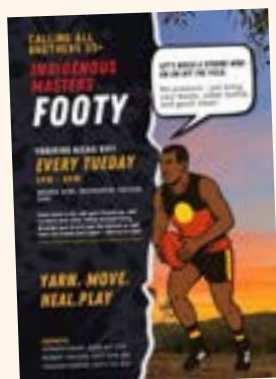


Kimberley Aboriginal Suicide Prevention Plan

The Kimberley Aboriginal Suicide Prevention (KASP) Plan 2021–2025 includes 13 recommendations based on the three levels of intervention outlined in the 2016 report *Solutions that Work – What the Evidence and Our People Tell Us*. Much of our work responds to this strategic document which identifies the need for practical, place-based approaches to prevent and reduce the impacts of self-harm and suicidal behaviours for Kimberley Aboriginal people and communities.

Community Initiative Sponsorship Program

The Community Initiative Sponsorship Program provides funding to Kimberley Aboriginal communities and organisations for projects that strengthen community wellbeing, in line with the KASP Plan. It supports community-led, place-based initiatives aimed at preventing and reducing the impacts of self-harm and suicidal behaviours among Aboriginal people in the region.



This year, the program funded projects focused on culture, healing, and community connection, with activities such as yarning circles, on-Country healing and workshops bringing people together in meaningful ways. This includes:

- **Strong Spirits – Strong Community:** A youth-focused engagement initiative in Ardyaloon (One Arm Point)
- **Women's on-Country Camps:** To be held in Bidiyadanga and Halls Creek, offering culturally safe spaces for healing and connection
- **Men's on-Country Camps:** Programs based in Djarindjin and Broome, including the Step on to Country resilience-building two – day camp targeting men aged 18–35 in Broome and surrounding areas
- **Annual Bidiyadanga Circus Spectacular:** A healthy lifestyle and wellbeing program aimed at primary school students in Bidiyadanga
- **Therapeutic Fashion Projects:** Community-based creative healing programs for women in Balgo and Bidiyadanga, inspired by culture and storytelling
- **Broome Indigenous AFL Masters:** A community connection and wellbeing initiative targeting men aged 35 and over in Broome and surrounding communities. Feedback from community has been positive, with many saying it strengthened cultural identity and provided a safe space to yarn and heal.

Case Study

Young Men's Program

Our Community Liaison Officer delivered his first young men's program this year and did a solid job. It was a big step in building his own confidence, growing his network and learning more about the SEWB Service Model. Country and Culture were the classroom – tools to connect with participants and create a space where they felt comfortable to share and learn.

The program was run in partnership with other staff and teams across KAMS and BRAMS, promoting SEWB in a way that felt right for the young men involved. Across six sessions – five on-Country and one in our SEWB Hub – 37 young men took part. These sessions created safe spaces for yarning and learning about SEWB. Eleven participants also received a 715 health check through Beagle Bay Remote Health Centre or BRAMS.

"SEWB education came through using culture and Country as the classroom, with the bush as the healer, the gym, and even the healthy food store."

Throughout the program, our Community Liaison Officer showed growth in confidence, leadership and connection-building. This was reflected in the young men's strong engagement and the positive feedback from community and service partners. The program also strengthened partnerships between our SEWB service and other services.

As his first year delivering the program, this is a solid foundation to build on. With continued support and collaboration, we're confident we'll keep delivering meaningful, culturally strong programs for young men. Feedback from participants was positive – a deadly example of what can be achieved when we work together in a way that empowers our mob.

Funding for the Community Liaison Officer Program is provided by the WA Mental Health Commission.

Capacity Building

Through our SEWB Capacity Building Team we delivered training to community members and workers across the region. This included Aboriginal Mental Health First Aid and the Kimberley Empowerment Healing and Leadership Program (KEHLP). KEHLP was delivered in the West Kimberley Regional Prison through funding provided by Centacare Kimberley. In addition, the team supported group activities, camps, brief interventions and postvention supports across the region.

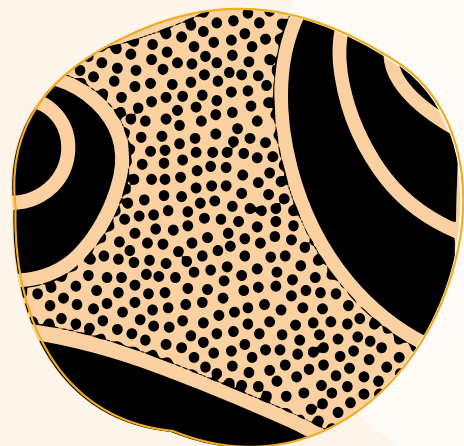




Image source: NACCHO

Culture Care Connect

Through Culture Care Connect, we deliver culturally appropriate suicide prevention and aftercare services that are grounded in community priorities and Aboriginal ways of healing. Funded through NACCHO, the program supports locally developed solutions that place Culture at the centre of care. Our team provides safe environments, including time on-Country, yarning circles and healing programs, guided by cultural knowledge and the SEWB Service Model. We also link clients with services across KAMS, other ACCHSs, WACHS and the broader care system, ensuring Culture and clinical care work together.

The program focuses on clients' strengths, supporting them to set and achieve their goals while creating opportunities for cultural healing. Feedback shows Culture Care Connect is strengthening identity, building trust and improving pathways to support. Community members have told us they feel seen, safe and supported. Over the past year, we strengthened the team, enhanced referral processes, provided additional training and made the service more responsive to community needs.

In 2024–2025:

Culture Care Connect

supported **49** clients,
delivered six cultural
activities and held three
community events.

Our staff are confident working in a culturally safe way, and the program continues to grow with strong support from communities.



Culture Care Connect
Summit, Canberra
Image source: NACCHO

Enhanced Response SEWB

As part of the Enhanced Response SEWB Consortium for the Fitzroy Valley, we have delivered a range of SEWB services in partnership with Marninwarntikura Women's Resource Centre (MWRC). This includes advocacy and the provision of practical and psychosocial supports to individuals, families and groups. We also provide capacity building, support and education at events and through community engagement.

In 2024–2025 we provided 502 occasions of service to 63 people ranging from 10 to 74 years of age. This included activities such as providing care, advocacy, connecting with other agencies or providers, checking in with clients, opportunistic interactions, providing family support, suicide prevention and postvention, and practical support. These took place face-to-face, over the phone or by text or email and were provided to individuals across the Fitzroy Valley.

“When we began working in Wangkatjungka, it quickly became clear that there were serious gaps in infrastructure and a lack of service investment. The community has shown that community strength, resilience and empowerment are at the heart of creating lasting change. This initiative highlights the value of ACCOs working on the ground in partnership with communities, setting a benchmark for what all levels of government should prioritise for delivery in remote Aboriginal communities.”

Zaccariah Cox,
Executive Manager Integrated
Support Services



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.....

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Case Study

Hoop Dreams

In October, the Wangkatjungka community celebrated the launch of their refurbished basketball court. Guided by the vision of community leaders, Elders and young people, the project transformed a dilapidated space into a vibrant hub that promotes SEWB. The initiative was made possible through a partnership between the Wangkatjungka community, KAMS, MWRC, the House of Darwin's Hoop Dreams Initiative and Gayaa Dhuwi (Proud Spirit Australia). A mural designed and painted in a community-led workshop now features on the court, reflecting cultural identity and symbolising strength, pride and resilience.

The basketball court has become a place where cultural expression and connection to physical, emotional and spiritual wellbeing are nurtured. Its refurbishment formed part of the ongoing work of the Enhanced Response SEWB Consortium, with consortium staff working alongside local leaders to support healing and long-term wellbeing.



headspace Broome

Opened in 2008, headspace Broome is a youth health service providing a range of supports to all young people aged 12–25. The headspace team includes GPs, youth mental health counsellors, work and study specialists and SEWB and peer support workers who work collaboratively to ensure timely and person-centred support. The service also draws on specialists to provide in-reach services to ensure seamless service delivery and remove access barriers.

In 2024–2025:

headspace Broome

provided **2,138**
occasions of service to 390
young people.

163 new young people
came to the service for the
first time.

The top 5 services provided were:

1. **Mental health** – psychological intervention (31%)
2. **Mental health** – low intensity intervention (30%)
3. **Mental health** – medical intervention (11%)
4. **Intake/access** (9%)
5. **Physical health** (4%)

Some of our achievements this year include the development and implementation of 'Yarn at a time', a single-session approach to therapy to ensure timely access to our counselling team. This has been a great success and contributed to our highest number of recorded occasions of service for this period.



In partnership with Parenting Connection WA, headspace invited parents, family and friends of young people to come and check out their space and have a chat about the ways that headspace can support young people.



The System Restore Social Club, started six years ago, continues to go from strength to strength. The Club is for young people to meet, interact, talk about games and interesting things, and share a meal with no technology. Just like the program has grown and evolved, so have the crew that attend. The group has been a consistent source of inspiration.

Fundraising and Donations

This year the Broome community have generously supported headspace through fundraising and donations, including:



Kimberley Care Group through the Darkness into Light Event



Push Up Challenge (we completed 2,151 push-ups and raised \$480)



James MacNeil kindly and humbly donated a brilliant piece of art for the centre titled 'Maybe We'll Get Lucky and We'll Both Grow Old, or Port Drive VIII' (2023) – Oil on Canvas. The Youth Advisory Committee had a robust art critique on what would be the best fit for the centre and this is what they landed on. Evoking the ocean, saltwater and finding the ordinary extraordinary – and the positive feelings that come with it – the painting now has a home. headspace lead GP Dr Mel accepted the piece from James on behalf of the centre.



Image source: Garnduwa

Community Engagement

Across our SEWB and headspace Broome services and programs, we support community events and participate in many activities. These include:



Image source: Garnduwa

Deadly Diva Day hosted by Garnduwa. SEWB and headspace teamed up and explored the topic of “What makes us strong?”. This question was posed to the participants and answers were creatively expressed into a large art piece throughout the day.



16 Days in WA, led by Kimberley Community Legal Services, with a Broome-based working group. Our staff supported the vigil and march, as part of efforts to stop violence against women.

Picnic in the Park, coordinated by HelpingMinds, to recognise Mental Health Week.



Active Leaders Young Men's Day hosted by Garnduwa. Our headspace team explored mental health through art, reflecting on “What keeps us strong?” and how to build a strong mind. The SEWB and Sexual Health Teams talked about consent, healthy relationships, sexual health and hygiene.

Kimberley 9s AFL Beach Carnival. For the fourth consecutive year, the Purple Hands Foundation and the Fremantle Dockers returned to Broome for the Kimberley 9s AFL beach carnival. Our headspace and SEWB team delivered workshops promoting education and awareness of mental health.



West Kimberley Football League. SEWB and headspace hosted a stall during the Mental Health Round.



The Broome over 40s touch team led by example at the Touch Football WA State Championships in Perth. The team, including headspace's Duro, represented their family and friends with spirit and courage, with the team in universal agreement that they keep playing to inspire the young people in their lives and show them the benefits of connection, exercise and trying new things. They played with their hearts on their sleeves alongside the headspace logo.

One of the players, Shrek, summed up the tour: "The best parts of the trip was just switching off from work and having a laugh – good mates, good times and no stress, except on the bodies! For young people doing it tough, don't bottle it up. Talk to a mate, get outside and do things that make you feel good. You're never alone."



Population Health

Our Population Health team works across the region to deliver initiatives that are culturally safe and community-driven. They support our remote health centres, KRS and Member Services to strengthen prevention, education and early intervention – always guided by the ACCHS Model of Care.

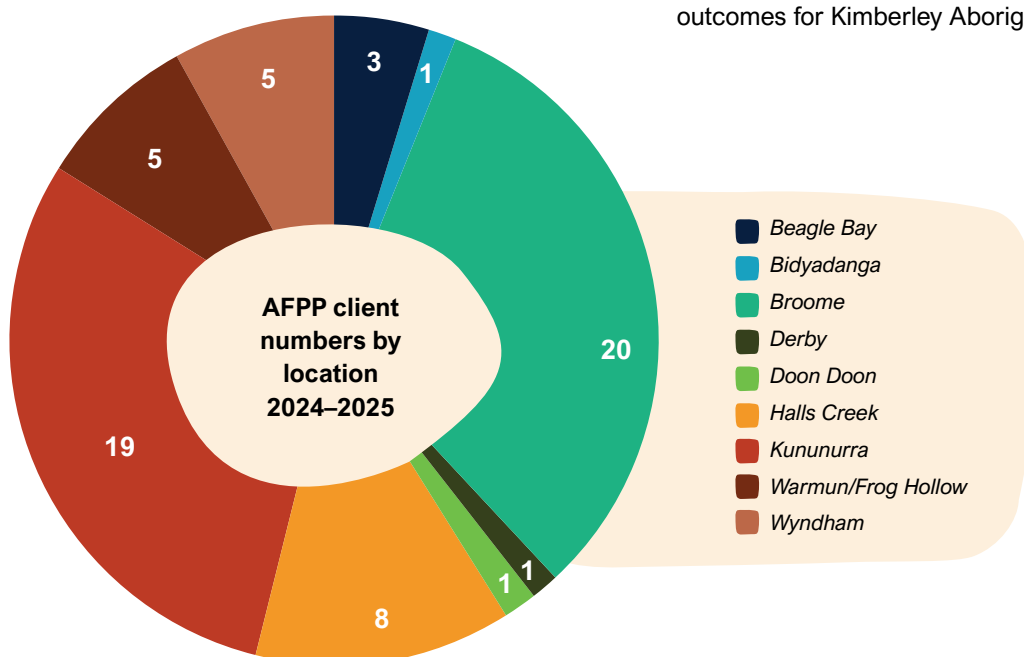
Australian Family Partnership Program

Our Australian Family Partnership Program (AFPP) is a structured home visiting program that supports Aboriginal first-time mothers during pregnancy and through to their child's second birthday. The program strengthens maternal health and wellbeing, supports early childhood development, and assists mothers to plan for their future including education and employment.

Delivered by a Family Partnership Worker and Nurse Home Visitor, the service is grounded in self-determination, respect and cultural safety. It relies on strong, trust-based partnerships with mothers, babies and families, empowering parents to create safe and nurturing environments that give their children the best possible start in life.

We currently have two teams, one in the East Kimberley and one in the West. In January 2025, the West Kimberley team expanded with an additional Family Partnership Worker and Nurse Home Visitor, increasing capacity to reach families in Bidyadanga, Beagle Bay and surrounding communities. The East Kimberley team supports families in Kununurra, Wyndham, Doon Doon, Warmun and Halls Creek. Both teams collaborate to share knowledge and resources, while working closely with Member Services, WACHS and other stakeholders to strengthen referral pathways.

This year marked a milestone with the first clients successfully graduating from the program in both regions. These mothers completed the full journey from pregnancy through to their child's second birthday, highlighting the strength of partnerships between families and our staff in supporting positive outcomes for Kimberley Aboriginal families.



Hearing Health

Our Hearing Health Program delivers support to promote and improve hearing health education across schools, communities and clinics in Broome, Bidyadanga, Beagle Bay, Billiluna, Balgo and Mulan. The program raises awareness of the importance of hearing health in child development, early detection and intervention, while also supporting primary health care staff with training to strengthen their skills in ear health checks and related services.

In 2024–2025, the program engaged with 210 students, 806 community members and 52 clinicians. Activities included school visits, community events, workshops and training opportunities, all designed to make ear and hearing health education more accessible and culturally relevant.

Hearing Health Program Health Promotion Activities

	2023–2024	2024–2025
Forum	1	0
Community event	5	11
School visit/outreach	4	10
Workshop	2	2
Conference	2	0

In 2024–2025 we welcomed a visit from Hearing Australia. Here's how they described their time with us.

Image source: Hearing Australia



Funding for the Hearing Health Program is provided by the Department of Health, Disability and Ageing (DHDA) through the Indigenous Australians' Health Programme (IAHP).

A huge thank you to the Fremantle Dockers Football Club for donating footy boots and runners to support foot health in our Kimberley communities. Wearing proper footwear is a game-changer – on and off the field!



Kimberley Foot Initiative

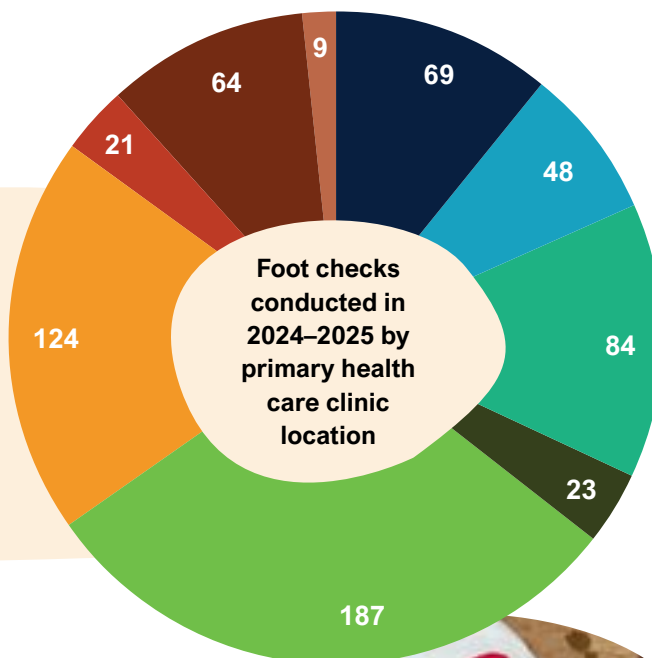
Our Kimberley Foot Initiative works to improve outcomes for people living with diabetes-related foot complications. By focusing on education, early intervention and specialised support, we aim to reduce the risk of amputations. Our team – comprising a coordinator, health promotion officer and podiatrist – works alongside our remote health centres, KRS, Member Services, WACHS and Boab Health Services to upskill local clinicians and provide care.

This year we introduced new ways to engage communities, including the ‘Planted Steps’ activity, which links foot health to movement and healthy eating. We also began preparing for the roll-out of ‘Offloading Boxes’ to primary health care clinics, containing resources such as offloading devices, footwear and padding, supported by clear user guides and podiatrist training. These initiatives improve access to timely wound care in community, rather than patients waiting weeks or travelling long distances.

Our podiatrist has now completed a full year, servicing clients in Bidyadanga, Beagle Bay, Broome, Balgo, Billiluna and Mulan. We have seen an upward trend in the number of foot checks carried out, alongside **20 community events and 14 school visits, engaging more than 1,000 community members and 252 students.** By combining culturally secure education, practical resources and partnerships, the Kimberley Foot Initiative continues to build local capacity and deliver timely, best-practice foot care through the ACCHS Model of Care.



- Balgo
- Beagle Bay
- Bidyadanga
- Billiluna
- Broome
- Derby
- Halls Creek
- Kununurra
- Mulan



Sexual Health

Our Sexual Health Program provides clinical education, training and resources to support high-quality sexual health services across the Kimberley. We coordinate sexually transmitted infection (STI) and blood borne virus (BBV) testing, management and follow-up, as well as opportunistic screening of priority cohorts. Working closely with communities, we design and deliver culturally safe and innovative approaches to STI and BBV testing, prevention and education. Activities take place in schools, men's and women's groups, on-Country camps, youth programs, sports events and other community settings, with Kimberley-specific health promotion resources developed where needed.

With the ongoing syphilis outbreak, our program has focused strongly on prevention and management. This response is delivered in partnership with OVAHS, DAHS and YYMS to ensure sexual health care remains accessible.

In 2024–2025, we engaged with Bidyadanga, Beagle Bay and the Kutjungka region through community-led education days, STI and BBV testing events and on-Country health camps. We also supported school and community-led camps with tailored education. A new STI and BBV data feedback report was developed for our remote health centres to support quality improvement. During Sexual Health Week 2025, we launched a syphilis awareness campaign with clinic posters and redesigned our STI flip chart to normalise testing and strengthen prevention messages.

Her Rules Her Game delivered its second mural project in Wyndham, recognising two local women – Sarina Morgan and Shaye Taylor – for their leadership, resilience and commitment to young people in their community. The mural, by Adnate, celebrates them as role models for the next generation of Aboriginal women. A short video was released at the launch and shared through social media, and community members also attended artist talks in Wyndham and Kununurra. The mural now stands as a lasting reminder of the strength, determination and impact of Sarina and Shaye.

Her Rules Her Game Mural in Wyndham by Adnate



Watch the Wyndham Mural come to life:



Watch our collaboration with Neda Mei on our syphilis campaign:



Her Rules Her Game connects women across the Kimberley through social media, celebrating women empowering women, and sharing healthy lifestyle education and service links.



Congratulations to Leja Pigram – chasing her footy dreams in Darwin with passion and determination. We're cheering her on every step of the way.



Congratulations to Su-Nami Matsumoto – a proud young leader making a difference on and off the field, representing the Kimberley in sport and supporting families through her work.



Well done to our Kimberley Women's All Star Team who competed in the 2024 Country Championship, looking deadly in our new shirts.

Image source: Country Football WA

Her Rules Her Game delivered a Women's Basketball Umpiring Course in Halls Creek – open to all and building skills for the future.



Our Sexual Health Program is funded from various sources including: KAMS, WACHS, NACCHO and WA DOH.

Medical Services

Our Medical Services team provides medical staff management, clinical oversight and clinical governance. The team continues to deliver high-quality support in challenging circumstances, with increasing demand and higher acuity care.

The team's governance role includes credentialling of all GPs and GP Registrars, doctors' meetings for updates, education and training, participation in infectious diseases meetings, and participation in KRS leadership meetings.

Our Medical Director holds the Pharmacy and Poisons Licence for our remote health centres, headspace Broome and YYMS, ensuring compliance with all standards.

Planning is underway to introduce START (Strep A Rapid Test) in our remote health centres. This initiative will support more rational antibiotic use by enabling point-of-care testing for Group A Streptococcus – the bacteria responsible for acute rheumatic fever (ARF) and RHD as well as many sore throats and skin sores.

Our Clinical Services Team meets quarterly. These meetings cover quality and safety, compliance with industry standards, accreditation preparation, shared electronic health records, audit reviews, clinical document review, Medicare billing, and the introduction of new health policy, equipment and

technology. Updates are also shared by partners including WACHS, Pathwest, Kimberley Pharmacy Services, and other KAMS and KRS staff.

Quality and clinical governance also extends to the management of clinical reporting in our quality management system (LogiQC), SAC 1 reporting and preparation of the annual Quality Report for the Board. This work covers our remote health centres, KRS and headspace Broome.

Our public health messaging this year has focused strongly on mosquito-borne viruses, as well as broader campaigns in partnership with AHCWA, including whooping cough awareness.

Read about why the ACCHS Model of Care is key to addressing antimicrobial resistance, in this interview with our Medical Director, Dr Lorraine Anderson, published by AMR Actions and Insights:





Broome Pride Mardi Gras Festival

We are long-standing sponsors of Broome Pride's annual Mardi Gras Festival. This year we turned up the glitz and glam by giving our reception a colourful, sparkly makeover. A couple of our Directors also dressed up for the occasion.

Aboriginal Organisations



Community control of health and other social services is a vital part of Aboriginal self-determination. When Aboriginal organisations across the Kimberley are strong and functioning well, they are empowered to define the issues impacting their communities, and to develop tailored and holistic solutions to meet their needs. This strategic priority is about achieving a **strong, sustainable and unified Aboriginal community-controlled sector**.



Transition to Community Control

In response to requests from local communities, we are continuing our work to strengthen the ACCHS Sector. Community control of health and social services is a core part of self-determination. When Aboriginal organisations in the Kimberley are strong and supported, they are empowered to define local priorities and deliver holistic solutions that meet the needs of their communities.

Bidyadanga Remote Health Centre Transition

In 2024–2025 we progressed the project to transition the Bidyadanga Remote Health Centre from KAMS to BACLG. The transition will take effect from 1 July 2025. Over the past year, KAMS and BACLG worked closely to confirm the financial and support arrangements required and to plan the changes needed for a smooth handover by 30 June 2025.

This project has been funded by KAMS.

Dampier Peninsula Clinics Transition Project

Work also continued work on the transition of the Lombadina/Djarindjin and Ardyaloon clinics on the Dampier Peninsula from WACHS to KAMS. In 2024–2025, the business case was revised to take a staged approach to implementing KAMS' service model, which is based on the ACCHS Model of Care. The revised business case was re-submitted to WA Treasury in August 2024 and funding was confirmed in the 2025–2026 State Budget.

This project has been funded by the WA DOH (to 30 December 2024) and KAMS.

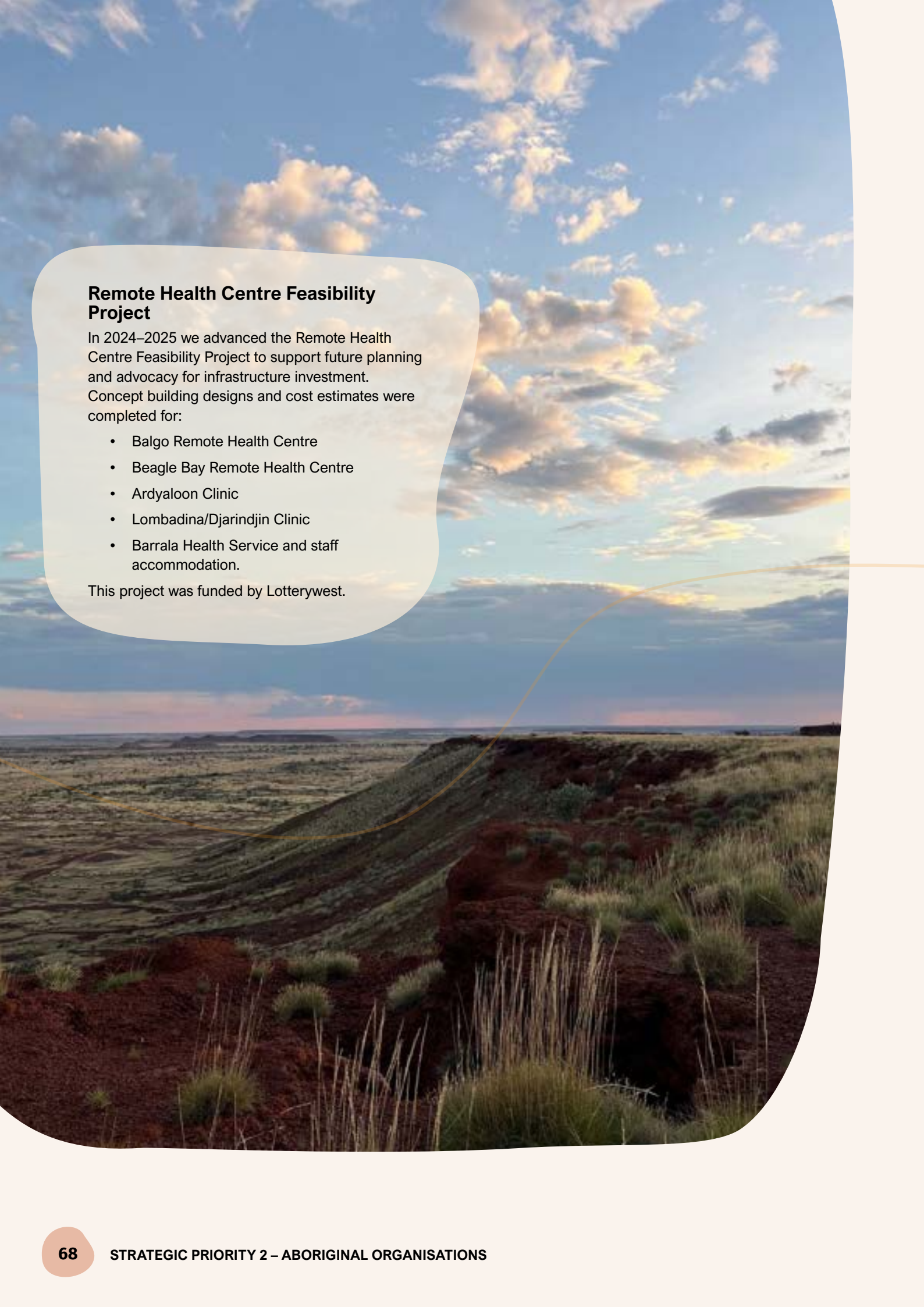
Barrala Health Service

The aim of this project is to establish Barrala, a dedicated ACCHS, to deliver comprehensive primary health care in Fitzroy Crossing. This work follows a community meeting in September 2020 where Fitzroy Valley communities voiced their concerns about poor health outcomes and the need for substantial reform. Community members called for structural change to shift power and resources from government to the local community through the establishment of an ACCHS.

At that meeting, community members identified a range of health priorities and established a Working Group to guide the development of the new service. KAMS has continued to walk alongside the Working Group, which in October 2023 successfully achieved incorporation of the Barrala Health Service Aboriginal Corporation.

In 2024–2025, project work focused on the development of a business case to advocate for funding. The business case, endorsed by the Barrala Board in December 2024, details the staffing, service design, infrastructure and capital works needed to deliver a culturally appropriate primary health care service for Fitzroy Crossing. The Barrala Board also continues to pursue suitable land in line with approved concept building designs for the health service and staff accommodation.

This project has been funded by WA DOH (to 30 December 2024) and KAMS.



Remote Health Centre Feasibility Project

In 2024–2025 we advanced the Remote Health Centre Feasibility Project to support future planning and advocacy for infrastructure investment. Concept building designs and cost estimates were completed for:

- Balgo Remote Health Centre
- Beagle Bay Remote Health Centre
- Ardyaloon Clinic
- Lombadina/Djarindjin Clinic
- Barrala Health Service and staff accommodation.

This project was funded by Lotterywest.



Collaborative Approaches

We use consortium and partnership approaches to strengthen collaboration between Aboriginal-led organisations, ensuring services are delivered in a culturally safe, effective and coordinated way. By bringing together diverse expertise and resources, these approaches help us respond to complex health and wellbeing challenges in a unified way.

This strengthens service delivery, improves health outcomes and ensures we are better able to meet the needs of Kimberley Aboriginal people and communities. Our work is directly aligned with Priority Reform 2 of the National Agreement, which is focused on building the ACCO sector.

Enhanced Response SEWB

In response to the January 2023 West Kimberley flood event, we joined with MWRC, BRAMS and DAHS to form the Enhanced Response SEWB Consortium. Together we provided urgent, culturally safe SEWB support to Fitzroy Valley communities. This included immediate psychosocial care and ongoing services to help people cope with the distress, displacement and uncertainty caused by the floods.

The consortium demonstrated the strength of collaboration and rapid response in times of crisis.

Its impact was recognised when it was named a finalist in the WA Association for Mental Health's 2024 WA Mental Health Awards in the Innovation in Service Delivery category.

While progress has been made, much more is needed to support Fitzroy Valley communities. We remain committed to working alongside the consortium to deliver responsive and culturally grounded services.

To learn more about the impact and ongoing needs, see the 2023 Flood Response and Recovery in Fitzroy Crossing Needs Assessment released by MWRC, Royal Far West and UNICEF Australia:





Our Remote Early Childhood Supports speech pathologists – often called speechies – work with children and their families to strengthen learning, communication and play. Based in Broome and Kununurra, they travel across the region to provide services in homes, schools and community settings, helping children find their voice.

Kimberley Supports Consortium

The Kimberley Supports Consortium brings together Aboriginal-led services to deliver disability, aged care and population health services and programs. The Consortium is auspiced by KAMS and represents a collaborative approach to supporting individuals, families and communities to navigate and access services, while ensuring that Aboriginal voices guide advocacy and program delivery.

Consortium members are:

- Broome Regional Aboriginal Medical Service
- Derby Aboriginal Health Service
- Kimberley Aboriginal Medical Services
- Kununurra Waringarri Aboriginal Corporation
- Marninwarntikura Women's Resource Centre
- Nirrumbuk Environmental Health and Services
- Ord Valley Aboriginal Health Service
- Yura Yungi Medical Service.

Through this consortium, members deliver services and programs that respond to community priorities and contribute to better health and wellbeing outcomes. These include the Community Connector and Community Connector Coordinator programs,

Remote Early Childhood Supports, Elder Care Supports, ARF and RHD Prevention, and TIS.

A two-tier governance model ensures both strategic and operational alignment. The Strategic Members Group sets direction, drives coordination and provides advocacy, while the Program Operational Group manages day-to-day program delivery and performance. In 2024–2025, three Strategic Members Group meetings were held to guide program development.

Kimberley Supports Services

As a member of the Kimberley Supports Consortium, we facilitate access to services in disability and early childhood intervention.





RECS staff gathered in Broome for their annual training week, engaging in professional development focused on culturally informed practices in FASD and the connection between parenting and brain development. Image source: NACCHO



Remote Early Childhood Support

Our Remote Early Childhood Support program provides short-term early intervention for Aboriginal children under nine years old and living in remote communities, who have disability or developmental delay. Delivered through the Kimberley Supports Consortium, the program combines Aboriginal Family Support Workers employed by Consortium members with allied health staff employed by KAMS, including speech pathologists, occupational therapists and physiotherapists.

Aboriginal Family Support Workers play an important role in engaging families, identifying children who need support and working alongside our allied health staff to deliver culturally safe, family and community-centred therapy. Their work not only supports children and families but also creates local employment pathways and strengthens community capacity.

Over the past year, we conducted regular outreach to more than 20 communities and towns, providing developmental screening, play-based activities and parent education sessions. Families valued having a consistent service that understands local ways of being and supports children's learning through play, Culture and connection to Country. By partnering with Aboriginal-led organisations, the program also continues to build the local workforce in early childhood and disability support.

In 2024–2025 the Remote Early Childhood Support program delivered 2,700 occasions of service and 119 individual assessments. 100% of children assessed in the program have required further support. Over 200 children are currently engaged and supported by the program.

Funding for this program is provided by NDIA.



Community Connectors

Our Community Connector and Coordinator Program supports Aboriginal people with disability, their families and carers to access and engage with the National Disability Insurance Scheme (NDIS) in a culturally safe way. Community Connectors are based in Broome, Derby, Halls Creek and Kununurra, with outreach to remote communities across the Kimberley.

As trusted links between community and the disability service system, Community Connectors help families understand the NDIS, support decision-making and guide people through access and planning processes. They address barriers such as distance, language and systemic challenges, ensuring people are supported in ways that reflect their cultures and strengths.

There are now 775 Aboriginal people participating in the NDIS across the region – an increase of almost 20% from last year.



In 2024–2025:

Community Connectors supported more than

500 Aboriginal NDIS participants, families and carers

delivered regular outreach

to over **20** towns and communities

held **30** community information sessions

assisted **150** individuals with access applications, with 52 accepted by the NDIS

The Kimberley Supports Consortium also hosted a co-design workshop with the National Disability Insurance Agency (NDIA) to highlight challenges faced by Aboriginal people with disability and those using Community Connector programs.

Funding for this program is provided by NDIA.



Individual Capacity Building

Our Individual Capacity Building Program supports people with disability, their families and carers to build skills, confidence and networks to achieve their goals and participate in community life. Delivered with local organisations and guided by community input, the program takes a culturally safe, strengths-based approach focused on self-advocacy, goal setting and peer support.

This year we re-established engagement in Bidiyadanga, Beagle Bay and the Kutjungka region through our remote health centres. We ran workshops on rights, self-advocacy and navigating services, supported individual and family advocacy to improve access to the NDIS, and gathered feedback to shape future activities. Partnerships, such as with Nyamba Buru Yawuru's Mabu Yawuru Ngan-ga Language Centre, helped promote inclusion and raise disability awareness.

In 2024–2025:

The Individual Capacity Building Program

attended **21** community events and consultations

engaged with **50** people on future activities

delivered **39** workshops

Strong participation in yarning sessions, service provider workshops and local events shows growing community connection. Our team continues to strengthen cultural competence, build partnerships and support Aboriginal people with disability to advocate for themselves and their communities.

Funding for this program is provided by the Australian Government Department of Social Services.





Rheumatic Heart Disease Prevention

The Kimberley RHD Prevention Program is a partnership between KAMS, BRAMS, DAHS, OVAHS, YYMS and NEHS.

It takes a collaborative, comprehensive and coordinated regional approach to preventing and managing ARF and RHD. The program centres cultural security, prioritising community-led solutions and responsive approaches. A key focus is on strengthening relationships between primary health

care providers and Aboriginal environmental health services to reduce the burden of ARF and RHD in Kimberley communities.

In 2024–2025, the Program Coordinator facilitated two regional workshops to support knowledge sharing and strengthen collaboration among partners. The program also introduced Smartsheet reporting software to streamline monitoring, evaluation and performance reporting, enhancing efficiency and data-driven planning.



RHD Health Promotion

This year, we delivered a wide range of ARF and RHD prevention activities across the region, working closely with our remote health centres and Member Services. In 2024–2025, our RHD Health Promotion Officer delivered 44 health promotion activities across Beagle Bay, Bidyadanga, Balgo, Billiluna and Mulan, as well as providing ongoing support to Member Services.



Key achievements included:

- 111 skin health checks completed in Beagle Bay
- Delivery of the Dolly Wash hygiene and RHD education program
- Ongoing hygiene and RHD awareness sessions at Bidyadanga, attended by 78 children, parents and carers
- Continued support to our remote health centres and the WACHS RHD Register to improve local LA Bicillin adherence data and service delivery

Case Study

Kids Heart Week, Balgo

The Balgo Remote Health Centre, our RHD team and NEHS have been working together to help prevent RHD. Guided by the ACCHS Model of Care, the focus has been on supporting the community to take charge of their heart health through education, access to care, and safe, supportive environments.

During a dedicated health promotion week, community members of all ages joined in interactive sessions on skin health, hygiene, healthy heart choices, the importance of regular check-ups, and how LA Bicillin helps prevent RHD. More than 30 children attended daily, taking part in activities such as tie-dye shirt making, germ games, damper and

pamper afternoons, 'My Needle My Way', and a community clean-up and treasure hunt. The sessions were run in collaboration with local police, Royal Life Saving WA (who run the community pool), Fair Game and the Youth Centre.

By making the sessions fun, accessible and community-led, we aimed to build knowledge and encourage positive health choices. Staff have already noticed improved health-seeking behaviours among children and families, stronger engagement with the clinic, better adherence to LA Bicillin treatment, and strong attendance at the most recent paediatric cardiology outreach visit.

Funding for the RHD program is provided by NACCHO.



In 2024–2025:

25,561

people were exposed to the program, of which

7,540 (29%) were engaged.

Tackling Indigenous Smoking

Our TIS program is part of the national initiative to improve the health of Aboriginal and Torres Strait Islander people by reducing tobacco use through community-driven health promotion. In the Kimberley, the program focuses on young people aged 12 to 24, pregnant women and their families, and people living in remote areas.

The program began in the Kimberley in 2010 and is delivered in partnership with:

- BRAMS – No Joobuk Team (Broome, Dampier Peninsula and Bidjardanga)
- DAHS – Quit Today, Live Tomorrow Team (Derby and Fitzroy Crossing)
- OVAHS and YYMS – Strong and Smoke Free Team (East Kimberley).

Our TIS team provides coordination and support, while each local team designs and delivers educational and interactive activities shaped by community input and guided by local context. With local staff leading the work, the program builds on community strengths and ensures activities are meaningful, culturally relevant and effective.



Funding for TIS is provided by DHDA.



headspace Broome

The headspace Broome consortium brings together local service providers, organisations, young people, families and community members to guide and support the service. Led by KAMS, the consortium strengthens

headspace Broome's capacity to respond to local priorities by providing advice, direction, resources and partnership opportunities, ensuring services are tailored to the needs of the Broome community.

Lead Clinicians Forum

Our Medical Director chairs the Kimberley ACCHS Lead Clinicians Forum, which meets quarterly in different locations across the Kimberley. The forum brings together staff from KAMS and our Member Services to strengthen collaboration across the sector.

The Forum oversees clinical practice standards in ACCHSs and provides a space to discuss collective


clinical issues. It supports strong communication and knowledge sharing across the sector, ensuring that clinical teams are working together and learning from one another. Membership is multidisciplinary and includes Aboriginal Health Workers/Practitioners, nurses, doctors and administrative staff, reflecting the diverse skills and experience needed to deliver the ACCHS Model of Care.

West Kimberley Leaving Violence Program Network

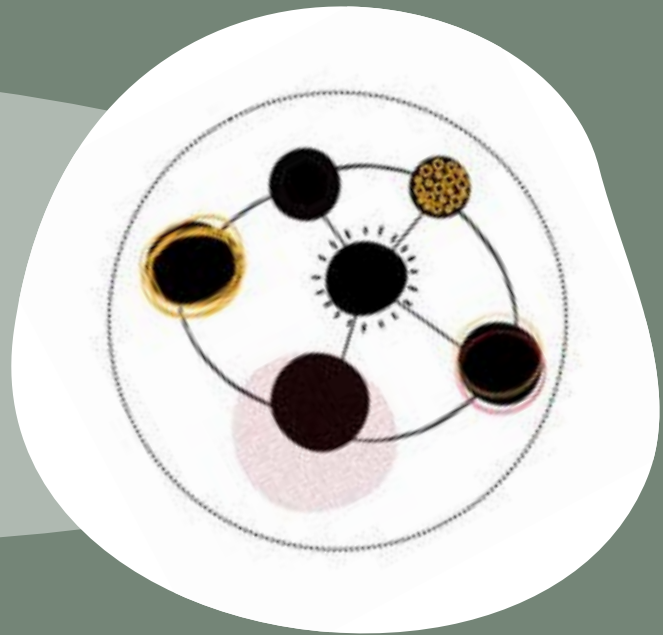
BRAMS is leading the establishment of the West Kimberley Leaving Violence Program Network. Commencing 1 July 2025, this program will support eligible victim-survivors leaving violent intimate partner relationships with up to 12 weeks of assistance. Supports include safety planning, risk assessment, referrals to essential services, and limited financial support.

The Leaving Violence Program is not a crisis support service.

We are a member of the consortium, alongside DAHS, Kullarri Regional Communities Indigenous Corporation, MWRC and NEHS.



Regional Workforce



A robust Aboriginal health and wellbeing workforce is crucial to the success of Aboriginal organisations in the Kimberley. Their deep understanding of, and connection to, Aboriginal Culture and Kimberley communities make them indispensable in delivering culturally safe services. They also play a pivotal role in establishing a sustainable and enduring workforce. This strategic priority is focused on nurturing a **skilled, supported and connected Kimberley Aboriginal health and wellbeing workforce.**



Workforce Development

By building on the strengths of Kimberley Aboriginal people and communities, we continue to grow the Aboriginal workforce across KAMS, KRS and our Member Services. We nurture staff throughout their career journey, creating pathways into clinical, non-clinical and leadership roles. Our investment in workforce development is deliberate, planned and strategic, ensuring the sustainability of our greatest asset – our people.

The trust that communities place in us requires a workforce that is knowledgeable, confident and culturally grounded. Guided by the ACCHS Model of Care, we are committed to equipping staff with the skills, support and opportunities they need to deliver safe, holistic and community-led health care.

Registered Training Organisation



“Aboriginal Community Controlled Health Registered Training Organisations are central to building a skilled health and care workforce. They have a strong history in driving growth and success of the Aboriginal primary health care workforce”.

Build Today Lead Tomorrow – NACCHO

Our ACCRTO delivers accredited training and workforce projects in collaboration with KAMS, KRS and our Member Services, building a skilled, supported and connected workforce. We are proud to provide high-quality training that strengthens services and outcomes for Kimberley Aboriginal people.

In 2024–2025, **15 students graduated from the Certificate IV in Aboriginal and/or Torres Strait Islander Primary Health Care Practice and four from the Certificate IV in Mental Health.** All 19 are working in the health sector, demonstrating the strong link between our training programs and the needs of our communities.

During the year, the Certificate III and IV in Aboriginal and/or Torres Strait Islander Primary Health Care Practice were superseded, with a final teach-out date of 30 June 2025. Our ACCRTO successfully applied to add the updated qualifications to scope, along with the Certificate II in Community Health and Wellbeing. The first intake of the new Certificate III commenced in February 2025, with the Certificate IV due to commence in July.

As part of this process, and through routine annual monitoring, we undertook four audits in 2024–2025 and achieved successful outcomes across all. This places us in a strong position to update policies and procedures in line with the Revised Standards for RTOs coming into effect on 1 July 2025.

Hear about Albert Bevan’s training journey and career as a SEWB worker:



Shout out to Compliance Officer Candice Lawrence and the entire ACCRTO team for their dedication to the RTO audits and scope applications.



Image source: NACCHO

Community of Practice

Our ongoing membership of the NACCHO-led National ACCRTO Community of Practice has strengthened collaboration and mutual support across the network of ACCRTOs nationally. In 2024–2025, NACCHO launched the Build Today Lead Tomorrow Implementation Plan 2024–2034, a ten-year strategy to ensure sustainable, high-quality Aboriginal Community Controlled Health Registered Training Organisations. We were proud to contribute to the development of this important strategy as members of the Expert Advisory Group and through the Community of Practice, and we look forward to continuing our collaboration across this national network.

First Nations Health Worker Traineeship Program

The NACCHO First Nations Health Worker Traineeship Program builds a skilled Aboriginal health workforce able to deliver culturally safe, holistic care in the Kimberley. Funded student placements support completion of Certificate III and IV in Aboriginal and/or Torres Strait Islander Primary Health Care, with our ACCRTO delivering the training component. This model provides financial support for employers, clinical placements, program coordination and student support, improving completion rates and strengthening the pipeline of Aboriginal Health Workers/Practitioners.

Through the program, we have supported Member Services to train and upskill staff, and we've also been able to develop updated training resources and upgrade equipment. A dedicated Student Support Team provides centralised enrolment, travel, accommodation and referral services, with a bus also procured to reduce transport barriers. Wraparound supports, advocacy and regular engagement ensure strong outcomes, with 23 trainees completing qualifications through our ACCRTO to date, including 15 graduates in 2024–2025.

Training and Assessor Workforce

In addition to the First Nations Health Worker Traineeship Program, NACCHO has initiated a demonstration project that is building the training and assessing workforce within ACCRTOs. Through this initiative, our staff are gaining their Certificate IV in Training and Assessment, which provides them with the necessary certification to train and assess students within the Vocational Education and Training sector.



Image source: NACCHO



Image source: NACCHO



Health Pathways

Our Health Pathways project, funded by the National Indigenous Australians Agency (NIAA) through the Indigenous Skills and Employment Program, began in June 2024 and will run for four years. It aims to strengthen Aboriginal participation in the health workforce by addressing employment, retention and career development gaps, from entry-level roles through to leadership pathways. The program contributes to the National Agreement by creating sustainable training and employment opportunities while tackling local barriers and encouraging aspirations in health careers.

Delivered through three streams – training access and support, work readiness, and retention and development – the program builds a skilled and sustainable workforce while supporting individuals and the broader sector. To date, 110 Aboriginal and/or Torres Strait Islander participants have engaged in the program.

Solid Connections

Our Solid Connections Program provides participants with the opportunity to develop new skills and explore career pathways through two graduated five-week deliveries – Solid Connections 1 and 2. The program incorporates learning, literacy and numeracy support, including Gaining Access to Training and Employment (GATE) delivered by North Regional TAFE. GATE covers numeracy, first aid, digital literacy and communication, with participants applying these skills through practical projects.

Solid Connections also provides practical support to help participants access training and employment, such as obtaining documentation, applying for a learner's driving permit, completing forms and preparing resumes. To date, 20 participants and staff have completed first aid training, with spare training places offered to KAMS, KRS and Member Services' staff to maximise value.

Solid Connections 1 was delivered in Joy Springs at the community's request, with 16 participants. Six attained a first aid certificate, seven completed

at least one GATE unit and three achieved competencies across the entire program. Outcomes included a participant establishing a gardening business, while five young expectant mothers expressed interest in further training after the birth of their children. The program's flexible design also allowed participants to complete only specific components, such as digital literacy.

Solid Connections 2 built on this foundation, supporting participants to develop professional profiles and undertake a skill set of nationally accredited units as well as the Kimberley Empowerment and Healing Leadership Program. Training included personal development planning, digital literacy, manual handling safety and first aid. Delivered in Fitzroy Crossing, the program had two highly engaged participants – one has since gained employment in aged care, and the other has expressed interest in further study.





SEWB Support Officer

Our SEWB Support Officer provides culturally informed, practical support to students throughout their training journey. By offering a safe and dedicated outlet for SEWB needs, the role strengthens our training environment because students have access to specialised support when required.

This year, our SEWB Support Officer has walked alongside students through a range of personal and family challenges. Support has ranged from one-off conversations to multiple sessions, depending on each student's needs. Group sessions can also be provided. Many students have been referred to the Employee Assistance Program (EAP) for ongoing counselling, with others supported to access external services for more specialised care.

Clinical Educator

Our Clinical Educator, a Registered Nurse, strengthens student learning by delivering content in our ACCRTO and visiting sites to support student progress during clinical placement. They facilitate monthly virtual meetings with students, as well as separate sessions with preceptors and clinical supervisors. These regular check-ins provide opportunities to answer questions, share resources, reinforce key learning, and remind students of upcoming tasks and due dates.

By combining clinical guidance with the SEWB support available through our ACCRTO, students are benefiting from a holistic approach that keeps them on track and confident throughout their training journey.

Our Clinical Educator supported 15 students in Semester 2, 2024 and 14 students in Semester 1, 2025.



Solid Leadership

Our Solid Leadership program is offered to KAMS, KRS and Member Services' staff across three streams. Commencing in early 2025, all groups have already completed significant activities, with 27 participants currently involved: 11 Rising Leaders, 10 High Potentials, and six in Executive Elevation.

Rising Leaders

Rising Leaders supports emerging leaders who aspire to leadership roles within the next three to five years. The program develops leadership competencies, problem-solving skills and confidence, while strengthening teamwork and time management. Participants began with a Myers-Briggs workshop, followed by the Diploma of Leadership and Management delivered by North Regional TAFE in block format. Cultural safety is prioritised, with support provided by TAFE and our SEWB team. Participants from Bidyadanga, Broome, Halls Creek and Derby are completing seven one-week blocks throughout the year, with three blocks already finished.

High Potentials

The High Potential Leadership Program nurtures current leaders and managers to accelerate their growth. Participants are undertaking workshops including a 360 Leadership Profile, Promise of Leadership, and Feedback Fitness. Each participant is developing an individual coaching plan with support from our delivery partner, The Leadership Circle. This program helps leaders identify strengths and address areas for growth.

Executive Elevation

Executive Elevation focuses on advanced leadership and strategic skills. Participants complete tailored coaching plans, with activities shaped by individual needs and availability. Activities have included BRITE assessments, Leadership Circle Profiles and Feedback Fitness workshops.



Janice Farrell and Joyal Shaju
Image source: AHCWA



Rahaney Poelina, Joyal Shaju and Jess Edgar
Image source: AHCWA

Health Workers Conference

Each year, our ACCRTO hosts the Aboriginal Health Worker Conference, providing a culturally safe space for learning, networking and collaboration. The conference highlights the role of Aboriginal Health Workers and Practitioners and offers opportunities for professional development through keynote presentations, workshops and shared discussions.

In 2024–2025, our Men's Health Coordinator contributed to raising awareness of men's health priorities and building networks to strengthen male workforce participation. Our RHD team co-presented

with DAHS, showcasing collaboration to prevent, identify and manage RHD, and reinforcing Aboriginal Health Workers as leaders in health promotion. KAHRA also shared insights into the Kimberley Aboriginal Health Research Model (KAHRM).

AHCWA joined as a sponsor, presenting workforce development opportunities and the First Nations Health Worker Traineeship Program. This contribution further strengthened pathways for Aboriginal Health Workers and Practitioners, supporting workforce growth across the Kimberley and beyond.



Elder Care Support

Our Elder Care Support Program, funded by and part of a national initiative led and funded by NACCHO, strengthens the capacity of the Aboriginal community-controlled sector to deliver safe, high-quality and culturally secure aged care for Elders and older Aboriginal people. The program supports families to access and navigate services while building workforce skills across the region.

Staff employed by our partner organisations – BRAMS, Kimberley Stolen Generation Aboriginal Corporation, NEHS, OVAHS and YYMS – are supported by KAMS through training, mentoring and professional development. In 2024–2025, this included monthly yarning circles for Elders and staff, Aboriginal and Mental Health First Aid training and a Trauma-Informed Care and Complex Case Management workshop. Program guidelines and resources were also updated.

We strengthened partnerships with WACHS, the Care Finders network and the Broome Community Resource Centre, and contributed to the Kimberley Aged Care Collaborative Forum, NACCHO workforce meetings and state and national yarning circles. Through advocacy, collaboration and community engagement, the program continues to ensure Elders receive care that is culturally safe, coordinated and grounded in community needs.



Mental Health

Social and Emotional Wellbeing

Our SEWB Workforce Support and Development Unit (WSDU) supports 12 service partners across the Kimberley:

- Bina-waji Nyurra-nga Aboriginal Corporation
- Broome Regional Aboriginal Medical Service
- Derby Aboriginal Health Service
- Emama Nguda Aboriginal Corporation
- Kimberley Stolen Generation Aboriginal Corporation
- Marninwarntikura Women's Resource Centre
- Milliya Rumurra Aboriginal Corporation
- Ngowar Aerwah Aboriginal Corporation
- Nirrumbuk Aboriginal Corporation
- Ord Valley Aboriginal Health Service
- Wyndham Youth Aboriginal Corporation
- Yura Yungi Medical Service

The WSDU coordinates and recommends training for partners based on Training Needs Assessments and a regional Training Needs Analysis. This culminates in an annual forum, bringing SEWB workers together to collaborate, share practice, and build skills through workshops and guest sessions.

The October 2024 Forum in Broome focused on Self-care, Reflection and Healing and drew more than 60 participants from across the region. The program featured workshops, panel discussions and keynote presentations by Nolan Hunter, Bart Pigram and Albert Wiggan, who shared holistic approaches to SEWB. Participants yarned, exchanged practice and developed practical strategies to strengthen support systems across Kimberley communities.

Funding for the WSDU is provided by NIAA.





headspace

Work and Study

Through the headspace Work and Study program, we continue to support career pathways for young people aged 15–25. The program provides tailored one-on-one support across education, training, job hunting and career advice.

A highlight in 2024–2025 was a visit from participants in the Skill Engineer e-scooter program through Broome Youth and Families Hub. Seven young people aged 14–24, together with their mentors, toured headspace and took part in a resume writing workshop. We yarned about how it's okay to ask for help and worked together to break down stigma around mental health. Our staff shared practical resources and guidance on resume writing, with the session ending in a discussion about the Work and Study program and how to access support. The young people brought strong initiative and energy to the activities.

Early Career Program

The headspace Early Career Program strengthens youth mental health workforce pathways by placing allied health students and graduates in our service. This builds service capacity while providing participants with hands-on experience in the Kimberley. We continue to attract students and graduates to headspace Broome, where they develop skills in culturally safe practice. Our focus is on supporting long-term careers in youth mental health, with the aim of retaining these professionals in the Kimberley.

Funding for this program is provided by the headspace National Youth Mental Health Foundation.



Image source: Australian College of Rural and Remote Medicine

GP Aboriginal Health Training Program

The Kimberley GP Aboriginal Health Training Program, delivered in partnership with The RACGP and the Australian College of Rural and Remote Medicine, strengthens the medical workforce by providing doctors with experience in Aboriginal health and remote practice. We coordinate the recruitment, placement and employment of GP registrars across our remote health centres, headspace Broome, KRS and Member Services,

with registrars rotating between services to complete their training. This year, two Junior Medical Officers also worked in our remote health centres, and one registrar will continue with us next year.

Through the program, registrars deliver high-quality, culturally safe care that improves health and wellbeing outcomes for Aboriginal people in the Kimberley, while gaining valuable professional and personal experience.

Population Health

Hearing Health

This year we partnered with Rural Health West, Eartrain, Hearing Australia, WACHS and OVAHS to deliver Hearing Health Education Workshops in Broome and Kununurra, with 38 participants building practical skills in ear assessment, treatment and referral. Our Hearing Health Coordinator also supported AHCWA to run a training day in Derby for seven participants, with clinicians requesting further sessions.

RHD

Our RHD team delivered LA-Bicillin Ventrogluteal Administration Workshops at Beagle Bay and Bidyadanga remote health centres, in partnership with WACHS. Fourteen staff were trained, including seven Aboriginal Health Workers/Practitioners and seven Remote Area Nurses/Midwives.

The team also promoted the RHD Australia e-learning module for community workers, increasing internal awareness of ARF and RHD. This year, 71 KAMS staff completed the module.

Sexual Health

We hosted the annual Kimberley Sexual Health Forum, bringing together 43 participants from across WA and interstate. Over two days, 13 speakers presented on topics such as unplanned pregnancy, reproductive coercion, Hepatitis B, and supporting young men in a digital world. Our Sexual Health Nurse delivered a presentation on reproductive coercion and abuse.

In partnership with OVAHS, our sexual health team also facilitated LGBTQIA+ inclusive care training through the WA AIDS Council, attended by 30 staff from KAMS and Member Services.

A three-day workshop was held with presenters from It's Time We Talked and the In the Picture program, focusing on healthy relationships and the impacts of pornography on young people. 23 participants attended.

*NACCHO Chair,
Donella Mills*



Governance Training

Through the NACCHO Governance Program, specialised workshops were delivered for ACCHSs across Australia. In October, we hosted one of these workshops in Broome, bringing together NACCHO, our Member Services and other ACCHSs from across the State. Delivered by legal and governance

experts, the program covered principles of good governance, managing conflicts of interest, risk management, delegation of powers, finance for Boards, the role and structure of Boards and Sub-committees, and key governance documents.



Jawun Partnership

To build capacity and advance our goals, we continue to participate in the Jawun partnership model by enabling connections with corporate, government and philanthropic sectors. Through secondments, leadership programs and senior executive visits, these partnerships open access to a highly skilled network with influence across business and government. This provides valuable opportunities for learning, collaboration and leadership development.

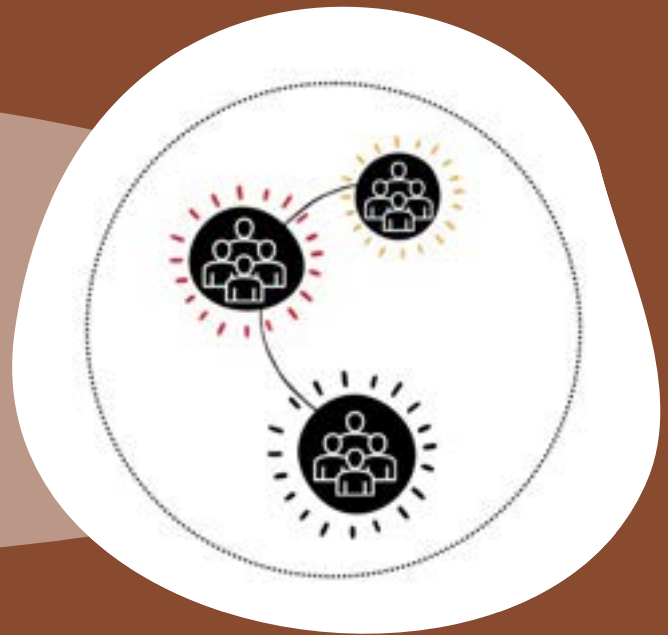
In 2024–2025, secondees supported a range of projects. In Remote Services, they improved data collection and documentation for early years, child, school and midwife health programs, and supported health promotion activities guided by local staff and community needs. In Communications, a secondee



*Jawun
Secondee,
Suzanne
Hannan
from Qantas*

developed a timeline of KAMS since establishment and profiled some of our first Aboriginal Health Workers. Other projects included identifying barriers to implementing health programs in remote communities and reviewing the resources currently in place to support them.

Health System



A healthier future for Kimberley Aboriginal people requires a collaborative effort, led by Aboriginal organisations alongside governments, education providers, researchers and other service providers. The leadership and voice of Aboriginal communities is critical to develop a health system that services Aboriginal people well. This strategic priority is about a **collaborative regional, state and national approach to improving Aboriginal health and wellbeing.**



SEWB Policy Partnership Meeting in Broome
Image source: Gayaa Dhuwi (Proud Spirit) Australia

Health System Advocacy

Our staff provide policy advice, advocacy and leadership relating to Aboriginal health and wellbeing at regional, state, and national forums – in line with the National Agreement. We work closely with a diverse network of stakeholders, including our Member Services, other Aboriginal-led organisations, NACCHO, AHCWA, CASWA and governments to foster a collaborative approach. Some examples are described below.

Read more about our advocacy efforts for people with disability in this article by ABC Kimberley:



National Forums

Aboriginal Health Funding Transition

The **First Nations Health Funding Transition Advisory Group** is focused on transitioning Aboriginal health funding from mainstream services to ACCHSs. The group has overseen a survey to identify barriers to transition and opportunities for co-design. Findings highlight the importance of a consistent transition approach, strong program-level support, and close engagement with the Advisory Group. A Transition Roadmap has been developed to guide effective and sustainable change, with transition planning underway across a range of programs. Our CEO is a member of this group.

National Health Reform Agreement

The **National Health Reform Agreement**, which sets out the funding, governance and performance arrangements for public hospital services in Australia, is currently under review. For the first time, the ACCHS sector has been included in the negotiations, and the new Agreement is expected to include a dedicated First Nations Schedule. The Collaboration Committee, co-chaired by NACCHO and DHDA, is leading this work. Our Deputy CEO is a member of this committee.

National Aboriginal Health Plan

The **First Nations Health Governance Group** guides the implementation of the National Aboriginal and Torres Strait Islander Health Plan and the Aboriginal and Torres Strait Islander Health Workforce Strategic Framework and Implementation Plan. The group is co-designing an accountability framework to strengthen transparency, measure progress and ensure First Nations perspectives shape government policy. Our Deputy CEO is a member of this group.

Better Renal Services

The Better Renal Services Steering Committee oversees the Federal Budget measure to deliver new dialysis units, including workforce accommodation, so Aboriginal people with end-stage kidney disease can access care on-Country. Our CEO is a member of this committee.

Social and Emotional Wellbeing

The SEWB Policy Partnership was established under the National Agreement to improve mental health, SEWB and suicide prevention outcomes for Aboriginal and Torres Strait Islander people. The group met twice in 2024–2025, including a meeting hosted in Broome. Our Executive Manager Integrated Support Services is a member of this group.

National Skills Agreement

Through the Coalition of Peaks, strong advocacy is reinforcing the importance of genuine partnership and shared governance across all domains of the National Skills Agreement to address priorities for Aboriginal and Torres Strait Islander people in skills and training. A key focus is securing sustainable funding to strengthen and grow the ACCRTO sector. An **Interim Partnership Committee** has been established to progress the development of a nationally networked VET policy partnership. Our Executive Manager Workforce is a member of this committee.

HumanAbility

HumanAbility is the Jobs and Skills Council for aged care, disability services, children's education and care, health, human services, and sport and recreation. It works with industry stakeholders to research job demand, identify current and future skill needs, develop responsive qualifications and training packages, and lead workforce initiatives. Industry advisory committees inform this work. Our Workforce Coordinator is an ex-officio member of the **Human (community) services committee**.

Disease Control

The interim **Australian Centre for Disease Control** has been established as the first step in the Australian Government's phased approach to establishing an independent Centre. A Senior Officials Group has been established to support its design and establishment. Our Medical Director is a member of the group.

Health Technology Assessment

The **Health Technology Assessment Review Implementation Advisory Group** guides reforms in response to the findings and recommendations of the Health Technology Assessment Policy and Methods Review. Our Medical Director is a member of the group.

Health Protection

The **National Aboriginal and Torres Strait Islander Health Protection** subcommittee, of the Australian Health Protection Committee, replaces the former Aboriginal and Torres Strait Islander Advisory Group on COVID-19. It provides holistic and culturally safe advice on health protection matters including communicable and chronic disease, environmental health, disaster management and COVID-19. Our Medical Director is a member of this committee.

Women's Health Products

The **Women's Health Products** Working Group is an advisory forum that supports collaboration between the Therapeutic Goods Administration and stakeholders to discuss issues relating to the regulation of women's health products as they relate to women's health. Our Medical Director is a member of the Group.

Communicable Diseases Network Australia

Communicable Diseases Network Australia brings together representatives from all jurisdictions and New Zealand to coordinate national public health leadership and disease surveillance and support best practice prevention and control of communicable diseases. Our Medical Director is a member of this network.



General Practitioners

In partnership with NACCHO, the RACGP works to ensure resourcing and standards that enable culturally and clinically appropriate care for Aboriginal and Torres Strait Islander people. Together, they develop guidelines, funding models and resources to support GPs, health professionals and ACCHSs. The fourth edition of the National guide to preventive healthcare for Aboriginal and Torres Strait Islander people was released in 2024–2025 with contributions from KAMS, KRS and our Member Services. Our Medical Director is a member of the **Partnership Project Reference Group**.

Australian Prescriber

Australian Prescriber is a free, national, independent journal of drugs and therapeutics published online. Our Medical Director is a member of the Editorial Advisory Committee.

Health Services Data

The **Aboriginal and Torres Strait Islander Health Services Data Advisory Group** provides advice to DHDA on Aboriginal health data, including national Key Performance Indicators (nKPIs) and the Online Services Report. The group also contributes to the ongoing development of the Health Data Portal. Our Health Informatics Manager is a member of this group.

Indigenous Genomics

ALIGN

The Australian Alliance for Indigenous Genomics (ALIGN)'s **National Indigenous Governance Council** has been established to provide the leadership, advice, governance and guidance for the development of Aboriginal and Torres Strait Islander genomic health structures that allow for culturally appropriate and relevant Indigenous priorities, participation and leadership to be centred in all aspects of their functions and growth. Our Medical Director is a member of the Council.

National Centre for Indigenous Genomics

Under Indigenous Governance, the **National Centre for Indigenous Genomics** leads research and activities to build and maintain a genome resource for the research community. This resource draws on a significant historical collection of biological material, primarily blood collected from Indigenous Australians, including Kimberley Aboriginal people, and held by the ANU since the 1960s. Our Senior Manager KAHRA is a member of the Centre's Board.



Statewide Forums

AHCWA CEOs Network

As a member of AHCWA, we participate in the **AHCWA CEOs Network**, a forum for Member Services to connect, discuss key issues and develop shared strategies to improve health outcomes for Aboriginal people across WA. A highlight this year was our visit to Ronald McDonald House Charities WA, where we contributed to a consultation on cultural safety considerations for the planned expansion of their facility at the QEII Medical Centre in Perth.



Aboriginal Advisory Council

The **Aboriginal Advisory Council of WA** provides a platform to build genuine, respectful and reciprocal relationships between Aboriginal people and the State Government. Established under the Aboriginal Affairs Planning Authority Act 1972, the Council works to achieve better economic, social and cultural outcomes for Aboriginal people living in WA. This year, the Council participated in workshop sessions alongside AHCWA, CASWA and the Department of the Premier and Cabinet to progress the next WA Closing the Gap Implementation Plan. Our Deputy CEO is a member of the Council.



Aboriginal Advisory Council of WA

Image source: Department of Premier and Cabinet

AHCWA Youth Committee

The **AHCWA Youth Committee**, made up of members aged 18 to 29 from across the state, provides a voice to the AHCWA Board. It identifies key issues, puts forward solutions, and advises on policy and program development at community and government levels. Our Senior Manager Communications is the Chair, with other KAMS staff contributing as members.

AHCWA Clinical Leadership Group

The **AHCWA Clinical Leadership Group** is a network of clinical leaders within ACCHSs, who learn from each other to implement evidence-based best practice and comprehensive primary health care for their communities. Our Medical Director, Senior Medical Officer and Executive Manager Remote Services are members of this group.

Future Health Research and Innovation Fund

The **Future Health Research and Innovation Fund** provides a secure source of funding to support health and medical research in WA. The Fund is governed through an Advisory Council and expert committees. The Senior Manager KAHRA is a member of the Aboriginal Health Expert Committee.

Community Skills WA

Community Skills WA is an industry training council that provides strategic industry advice to the WA State Training Board and the Department of Training and Workforce Development on behalf of the health, community services, education, and sport, fitness and recreation sectors. Our Executive Manager Workforce is an Executive Board Member of Community Skills WA.

Kimberley Aboriginal Health Planning Forum

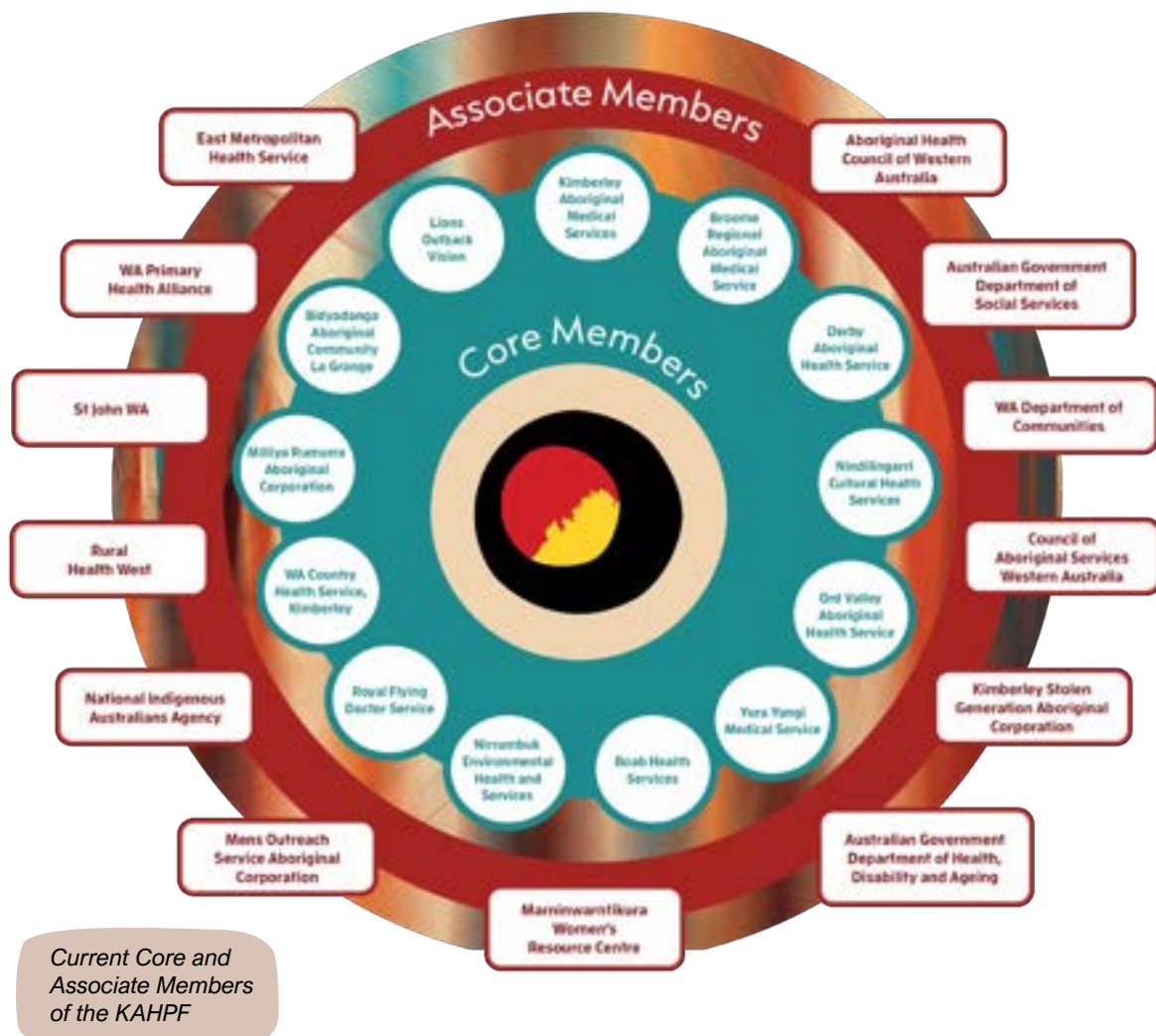
The KAHPF is jointly chaired by our CEO and the Executive Director WACHS Kimberley, with KAMS providing executive and secretariat support. In 2024–2025, the Forum met seven times to progress its priorities.

The Strategic Plan and Terms of Reference can be accessed at:



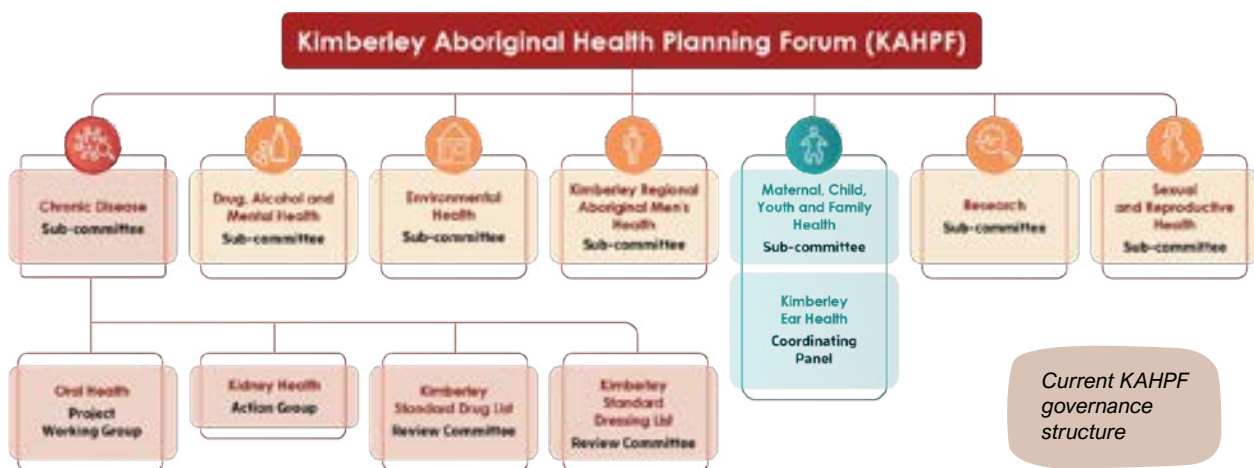
In 2024–2025, KAHPF also welcomed **East Metropolitan Health Service (EMHS)** as a new Associate Member. Recognising the strong relationship between EMHS and Kimberley Aboriginal patients, this membership will help strengthen collaboration, improve continuity of care, and support a more responsive health system for our communities.

Funding for the KAHPF is provided by KAMS, WACHS and membership contributions made by Core Members.



Sub-committees

To progress the Strategic Plan, KAHPF has established Sub-committees, with some also forming Working Groups and Panels. These groups are the “engine room” of KAHPF, driving work that responds to regional priorities. Each has developed an action plan aligned with the Strategic Plan.



Kimberley Clinical Guidelines

In 2024–2025, Sub-committees continued reviewing and developing **Kimberley Clinical Guidelines**, with more than 40 now endorsed. These resources ensure care is evidence-based, culturally safe and tailored to Kimberley needs, with Lead Authors and Writing Groups providing rigorous input. Guidelines revised or endorsed this year included:

- Chronic Disease Sub-committee
 - o Chronic kidney disease
 - o Chronic liver disease
- Kimberley Ear Health Coordinating Panel
 - o Ear problems in children
- Maternal, Child, Youth and Family Health Sub-committee
 - o Acute post-streptococcal glomerulonephritis (APSGN)
 - o Skin infections
- Sexual and Reproductive Health Sub-committee
 - o STI/BBV contact tracing
 - o STI management

Kimberley Clinical Guidelines can be accessed at:





Chronic Disease

The **Chronic Disease Sub-committee** continued to collaborate to support clinicians across the Kimberley. This year, the Sub-committee hosted a workshop on diabetes-related foot complications, covering screening and prevention, foot ulcer management, and health and wellbeing strategies. The workshop was facilitated by our Kimberley Foot Initiative team in collaboration with podiatrists, health professionals, doctors and surgeons from the Kimberley and across the state. It was delivered in person in Broome, with virtual access via Microsoft Teams and a satellite venue in Kununurra. A total of 12 presenters contributed and 61 participants attended across all locations.

A small working group of the Sub-committee also continued to oversee updates to the **Kimberley Standard Drug List**, ensuring it remains current and relevant for health professionals across the region.

Drug, Alcohol and Mental Health

Following advocacy by the KAMS Board and KAHPF, funding was secured from the WA Mental Health Commission to develop a Kimberley Aboriginal-led AOD Plan. The project is being led through the KAHPF and the Drug, Alcohol and Mental Health Sub-committee, with a dedicated Working Group established to guide the work. A desktop review has already been completed and is published on the KAHPF website.

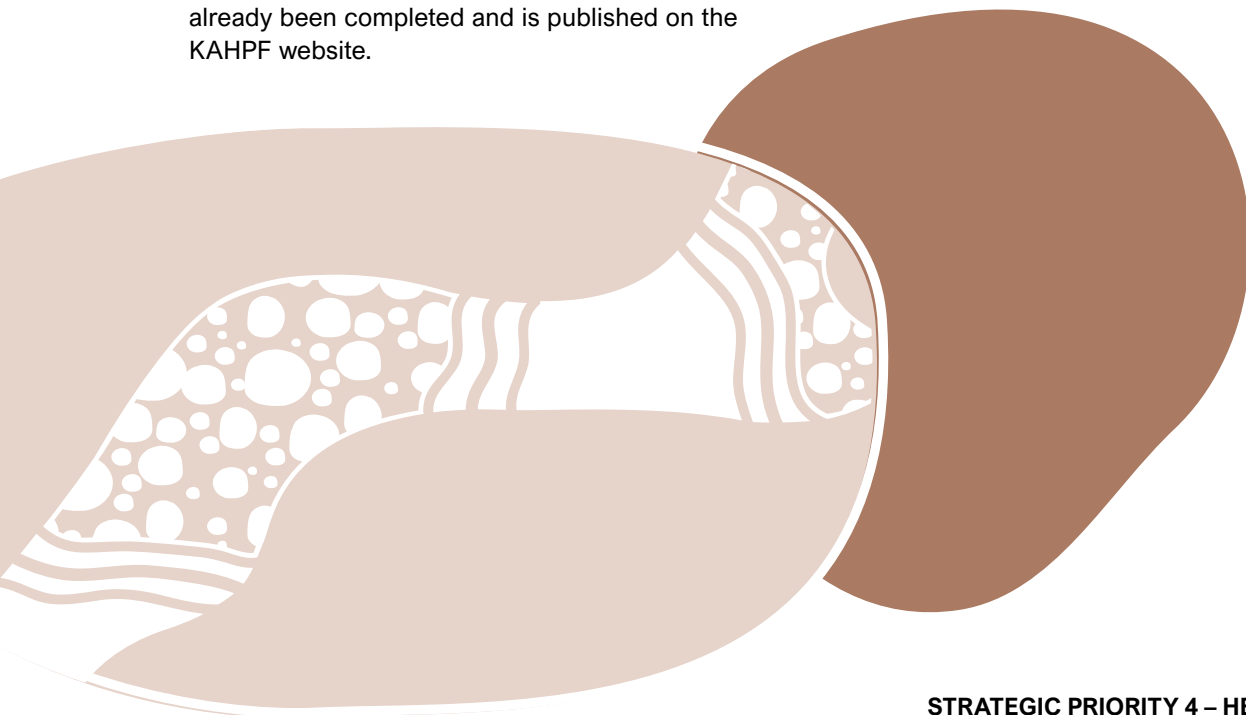
Research

In 2024–2025, KAHRA presented at the KAHPF on the KAHRM, that guides health research and evaluation in the region. The model sets out standards to ensure research reflects the needs and aspirations of Kimberley Aboriginal people, and the KAHPF is committed to supporting its implementation as part of its Strategic Plan.

The KAHRA Team have also made improvements into the Research Sub-committee data recording and streamlined process to track and record project applications.

Sexual and Reproductive Health

The **Sexual and Reproductive Health Sub-Committee** launched a Contraceptive Implant Project to improve access to long-acting reversible contraception. A total of 29 staff completed Implanon theory training, four staff completed clinical placements for Implanon insertion, and three staff undertook train-the-trainer education.



Kimberley Regional Aboriginal Men's Health

The Kimberley Regional Aboriginal Men's Health Gathering, proudly hosted by the Kimberley Regional Aboriginal Men's Health Sub-committee, was held in September at Djarindjin Campground.

With the theme **STRONG MEN, Strong Culture, Strong Community**, the Gathering brought together more than 40 men each day from across Kimberley communities, services and organisations. Over three days, participants focused on priority health and wellbeing issues identified by Aboriginal men, including cultural safety, role models, the importance of regular 715 health checks, AOD, family and domestic violence, and chronic disease.

The Gathering created a culturally safe platform for men to connect, share experiences, and strengthen Culture as a foundation for health and wellbeing. It reinforced the importance of culturally appropriate services and encouraged men to take an active role in their own health and in supporting their communities.

The Gathering was made possible through funding from NIAA and auspice by KAMS. There was also significant in-kind support from AHCWA, BRAMS, Djarindjin Aboriginal Corporation, Goolarri Media, Gurama Yani U, KRED Enterprises, Nindilingarri Cultural Health Service, NEHS, The Kids Research Institute Australia, WACHS and YYMS.

Following the Gathering, the Sub-committee developed the **Kimberley Aboriginal Male Health Priorities**, based on the recommendations put forward by participants. These priorities have since been endorsed by the KAHPF and are now being progressed by the Sub-committee.



"This gathering was a powerful opportunity for Aboriginal and Torres Strait Islander men to come together, discuss critical issues, and develop strategies for improving the health and wellbeing of men across the Kimberley. We are proud of the work achieved here and look forward to seeing the positive outcomes. Together, we are Deadly, we are undefeated."

William Hunter

Bardi, Yamatji and Kokatha man,
and Chair of the Sub-committee





Following the gathering, representatives of the Sub-committee presented a special gift to the KAHPF. The gift, including a plaque, event t-shirt, group photo and beautifully framed cultural artefacts, captures the spirit of the gathering as a lasting memory. The artefacts, crafted by Bardi cultural leader Bolo Angus, include irrikals (boomerangs) and a gowan/riji (carved pearl shell).

“This gathering was not just about discussing health issues, but about empowering Aboriginal men to take charge of their own health and wellbeing, while staying connected to Culture. By working together, we can create strong, culturally safe spaces and pathways for our men to thrive, now and into the future.”

Scott Wilson
Gooniyandi and Gajerrong,
Gathering facilitator



Learn more about
the Men’s Health
Gathering:



Aboriginal Regional Governance Group

Kimberley Aboriginal leaders have established the Aboriginal Regional Governance Group (ARGG) to provide unified leadership to partner with the State Government to address youth wellbeing in our region.

Funding for the executive support function of the ARGG is provided by the WA Mental Health Commission.

ARGG membership comprises:

- Binarri-binyja yarrowoo (Empowered Communities East Kimberley)
- West Kimberley Futures – Empowered Communities
- Empowered Young Leaders
- Kimberley Aboriginal Law and Cultural Centre
- Kimberley Aboriginal Medical Services
- Kimberley Land Council
- Kimberley Language Resource Centre

At the request of the State Government, the ARGG has agreed to partner to advance the implementation of their Commitment to Aboriginal Youth Wellbeing, which is their response to the combined 86 recommendations arising from the State Coroner's Inquest into the deaths of thirteen children and young persons in the Kimberley Region, and the Parliamentary Inquiry Learnings from the Message Stick: The Report of the Inquiry into Aboriginal Youth Suicide in Remote Areas.

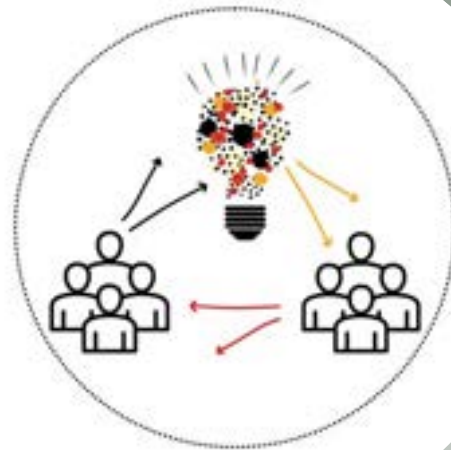
The governance of this partnership is through the Kimberley Aboriginal Youth Wellbeing Steering Committee. The ARGG has tabled a draft Partnership Agreement and Implementation Plan with the Steering Committee and is working with the State Government to advance these documents.

The ARGG continues to function on an interim basis until a KARB is established. Once established, it is envisaged that this structure will replace the ARGG; however, this will be a decision for the regional body.





Shared Knowledge



A culture of shared learning across our sector can support continuous improvements in Aboriginal and non-Aboriginal organisations that lead to better outcomes for Aboriginal people. We can cultivate this culture by using and sharing research, data, technology and knowledge. This strategic priority is about having a **resourceful health system driven by research and innovation.**

Kimberley Aboriginal Health Research Alliance

KAHRA brings together Kimberley health services, Aboriginal communities and Kimberley-based health research organisations to drive evidence-based change in Aboriginal health. Founding members include KAMS, WACHS, AHCWA, the Rural Clinical School of WA (RCSWA) of the University of Western Australia (UWA), UNDA (Broome campus) and The Kids Research Institute Australia. Through this collaboration KAHRA combines the wisdom and

cultural strength of communities, the knowledge and commitment of health services, and the expertise of researchers to ensure Aboriginal people are in control of Aboriginal research to improve health and wellbeing in the Kimberley. A dedicated KAHRA team is located within KAMS, alongside our research staff. Funding for KAHRA was provided by Lotterywest.



*Congratulations to **Abby-Rose Cox**, Research and Evaluation Manager at KAHRA, on the successful submission of her PhD. Her thesis, **Mingoke** – culturally strong SEWB programs helping engage First Nations youth in education, explores innovative approaches to supporting young people. **Mingoke** is a Kija word meaning “to make better”. This achievement is the result of years of hard work and dedication – congratulations Abby-Rose on this outstanding milestone.*



Kimberley Aboriginal Health Research Model

In October, KAHRA launched the KAHRM at its annual forum in Broome. The model provides a framework to guide health research and evaluation projects in the region, setting clear standards to ensure all research aligns with the needs and aspirations of Kimberley Aboriginal people. It supports research initiated by Aboriginal communities and organisations, as well as projects led by external researchers seeking collaboration in the Kimberley.

Developed in response to concerns that research has not always delivered benefits for local communities, the model commits to research being undertaken “the right way or not at all”. It strengthens Aboriginal leadership in health research, fosters genuine partnerships and ensures projects deliver meaningful outcomes for Aboriginal people across the Kimberley.

“This model is another step forward to flip the old approach to Aboriginal health research in the Kimberley. It ensures that research is driven by Kimberley Aboriginal people, for Kimberley Aboriginal people. We are no longer just subjects of research – we are leading it. The model will help strengthen partnerships with communities and researchers to achieve real, positive outcomes for our people.”

Vicki O'Donnell, KAMS CEO and KAHRA Board Member

The KAHRM is
available here:





Image source: Aarnja

KAHRA Forum

The Annual KAHRA Forum, themed 'Aboriginal People Leading Aboriginal Research and Evaluation', was held in Broome in October. The Forum brought together representatives from across the region and the state to discuss key themes such as community engagement, data sovereignty and the importance of Aboriginal leadership in health research. The event received overwhelmingly positive feedback, with attendees praising the valuable networking opportunities and robust discussions.



Kimberley Health Evidence Data Platform

The Kimberley Health Evidence Data Platform (KHEDP) continues to progress towards becoming operational. This platform will establish reporting on the KAHPF's regional indicators, first developed in 2018 to track progress against health and wellbeing priorities and identify service gaps. The KHEDP is designed to support data-driven service planning and evidence-informed research, and reduce the reporting burden on primary health care services. The vision is for a matched data platform that is developed collaboratively, built securely and underpinned by the principles of Aboriginal community control, Indigenous Data Sovereignty and self-determination.

In 2024–2025, the development of the KHEDP received national recognition. Shelley Kneebone, CEO of DAHS and Co-chair of the KHEDP Steering Group, presented on the platform at the NACCHO Members Conference.

The KHEDP was also acknowledged in the Closing the Gap Independent Aboriginal and Torres Strait Islander-Led Review as an exemplar project that is fulfilling the intent of the Priority Reforms, particularly Priority Reform 4: Shared Access to Data and Information at a Regional Level.



Shelley Kneebone presenting the KHEDP at the NACCHO Members Conference

Image source: NACCHO

Research and Innovation

Within KAMS and KRS, in collaboration with our Member Services, KAHRA and partners, we are actively involved in health and wellbeing research. This includes leading research as well as participating in research led by others.

Chronic Disease

Kidney Transplant

In the Kimberley, end-stage kidney disease continues at epidemic levels, profoundly affecting individuals and communities. Research led by KRS, EMHS's Royal Perth Hospital and the RCSWA found that many of our patients are suitable for transplant workup and others could improve their suitability by addressing health risk factors with the right support. Importantly, patients told us they want more help to make these changes. The results will be used to inform models of care development for transplant support within KRS.

Read the research

Supporting equitable access to kidney transplant in remote WA using continuous quality improvement:



Diabetes

We have been actively involved in research now published on Aboriginal young people's experiences of type 2 diabetes diagnosis, management and support. The study found that young people had varied experiences and emotions related to a type 2 diabetes diagnosis, with many recounting feelings of distress and negative impacts on their emotional wellbeing. Challenges with understanding and managing diabetes were highlighted, particularly around healthy eating, physical activity and medication. Family support was a key factor in self-management, with participants also noting the intergenerational impact of diabetes. Positive relationships with health professionals, especially continuity of care, were highly valued.

Read the research

Aboriginal young people's experiences of type 2 diabetes diagnosis, management and support: A qualitative study in the Kimberley region of WA:



Environmental Health

SToP Trial

Healthy skin is important for maintaining overall health and wellbeing. If left untreated, some skin infections can lead to serious complications such as heart disease, kidney disease or sepsis. In partnership with NEHS, we worked with the Kids Research Institute Australia on the See, Treat, Prevent Skin Sores and Scabies (SToP) Trial. This large clinical trial aims to reduce the burden of skin sores in remote-living school-aged Aboriginal children by 50%. To strengthen awareness, detection and treatment of skin infections, the SToP Trial is evaluating a package of

activities focused on seeing, treating and preventing infections. Several publications related to the trial were released during 2024–2025, with KAMS and NEHS acknowledged as partners.

See, Treat, Prevent
Skin Sores and
Scabies (SToP) Trial:



Mental Health and SEWB

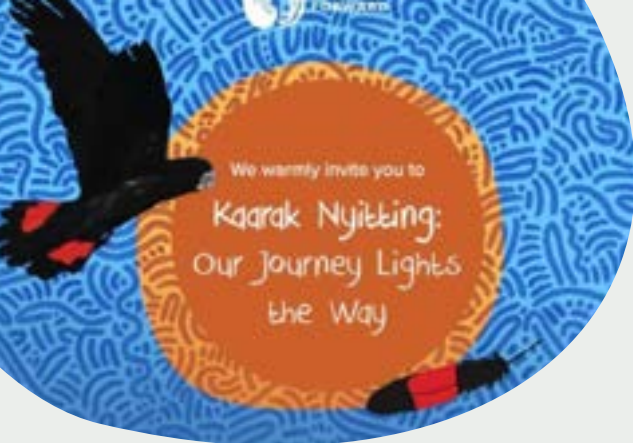
Transforming Indigenous Mental Health and Wellbeing

Transforming Indigenous Mental Health and Wellbeing (TIMHWP) is a research program transforming Aboriginal and Torres Strait Islander mental health care through Aboriginal leadership and authentic partnerships with Aboriginal organisations including KAMS.

Wellbeing Informed Care – Kimberley

The Wellbeing Informed Care – Kimberley project is a partnership between KAMS, UWA's RCSWA and School of Indigenous Studies and our Member Services. The project aims to strengthen the ability of Kimberley ACCHSs to deliver our Model of Care by enhancing integrated and holistic approaches to mental health and SEWB care. In 2024–2025 the team delivered 10 learning lunches across the region to familiarise staff with the Workforce Wellbeing Guide. Staff valued the chance to take part in practical wellbeing activities and share yarns about wellbeing. This project is funded by the Cooperative Research Centre for Northern Australia.





Our Journey Our Story

The Our Journey Our Story research project, led by Curtin University and concluded last year, brought together local Elders, young people and our headspace staff to co-design culturally secure mental health services that better meet the needs of Aboriginal young people and their families. In November, representatives from the research team attended the opening of the Kaarak Nyitjing: Our Journey Lights the Way exhibition at Curtin University, which recreated the greenspace established at headspace Broome. The exhibition featured quotes from Elders and co-investigators Stewart and Jacob, who also spoke at the event, celebrating the project's outcomes and the strength of Aboriginal voices in shaping services for young people.



Aboriginal Fathers

Our staff continue to work with UWA on the research project When I got the news: Aboriginal fathers in the Kimberley region yarning about their experience of the antenatal period. Fathers are often less likely to seek support for SEWB or mental health challenges, yet children's outcomes improve when couples engage in family-focused perinatal services. In a podcast, Zaccariah Cox and Erica Spry discussed the changing roles of Aboriginal fathers, the value of extended family and kinship networks, the challenges of supporting mothers in remote areas, and the importance of practitioners using clear language and approaching fathers with cultural safety and curiosity.

The podcast, published by Emerging Minds, can be accessed here:



Population Health

GOANNA 3 Study

We are partnering with the Poche Centre for Indigenous Health at the University of Queensland on the GOANNA 3 Study, the third national survey of social and behavioural factors related to STIs and BBVs among Aboriginal and Torres Strait Islander people aged 16–29. The study will build understanding of links between behaviour, sexual health knowledge, health care access and infection risk, while monitoring changes since previous surveys and identifying emerging issues. Findings will inform government policy, targeted interventions and improvements in clinical and public health practice to reduce infection rates among young Aboriginal and Torres Strait Islander people.



Sharing Our Knowledge

KAMS and KRS staff have actively promoted the work we do with our Member Services, Kimberley Aboriginal communities and partners, sharing knowledge and experience through presentations, media and conferences. This section highlights some of these contributions.

International

Case Study

International Visitor Leadership Program

In 2024, our Executive Officer, Chantal McMahon, was selected to participate in the inaugural Emerging First Nations Leaders program under the United States (US) Department of State's International Visitor Leadership Program (IVLP). For over 80 years, the IVLP has been the US State Department's premier professional exchange program, fostering connections across government, business, and civil society. This was the first IVLP to be developed in acknowledgement of Australia's First Nations peoples. Chantal joined four other participants on a three-week visit to the US, examining how community action fosters social inclusion and equity for marginalised groups.

Reflecting on the experience, Chantal said:

"Completing the program has been a transformative and deeply enriching experience, marking my transition to becoming an IVLP alumnus with access to an extensive global network of professionals across diverse sectors. This network opens doors to invaluable collaborations and partnerships. The US State Department further enhances this opportunity through its US Speaker Program, enabling us to host guest speakers in Australia with the support of the Australian Embassy, fostering even stronger connections and knowledge exchange."

One of the most significant aspects of the program was the opportunity to learn from Native American Tribes.

"Through this program, I gained profound insights into Native American Tribes and broader American culture. Experiencing Native culture firsthand was both inspiring and deeply moving. I was struck by the parallels between the challenges faced by Native communities in the US and those of our own Indigenous communities. One of the most painful shared histories is the legacy of forced assimilation through boarding school systems, which removed Native children from their families until as recently as 1974. This tragic chapter continues to resonate deeply among Native Tribes, who courageously share and honour these stories as part of their ongoing cultural healing. It was a privilege to witness this healing in action, as we were welcomed with prayers, songs and ceremonies that showed their resilience and strong cultural practices."



Case Study

Chantal also reflected on the health and education systems.

“Health disparities emerged as another common thread, from mental health struggles to inequitable access to healthcare. Federally recognised Native Americans can access free healthcare through Indian Health Services, but non-recognised members must rely on state-level programs. Many Tribes take matters into their own hands. A powerful example is the Muckleshoot Tribe, who built a \$10 million Health and Wellness Centre to address substance abuse and improve healthcare accessibility for all – not just its members. Education is also a cornerstone of Tribal development, with some Tribes even providing free or subsidised college education for recognised Native Americans, reflecting their commitment to empowering future generations.”

Chantal described the overall impact of the program as both motivating and a reminder of what can be achieved through community strength and investment.

“This program has not only broadened my knowledge but also profoundly inspired and motivated me. Witnessing the resilience and self-determination of Native Tribes was a powerful reminder of the positive change communities can achieve when they invest in their people and futures. From healthcare and education to infrastructure and cultural preservation, these efforts are paving the way for brighter generations to come. I am eager to continue conversations with the remarkable individuals I met on this journey and to explore implementing the initiatives I discovered that could greatly benefit our communities.”

“Witnessing the resilience and self-determination of Native Tribes was a powerful reminder of the positive change communities can achieve when they invest in their people and futures.”

Chantal McMahon



Indigenous Data Sovereignty

The **Global Indigenous Data Sovereignty Conference** was held in Canberra in April, bringing together Indigenous people from across the world to reflect on successes and map future pathways to advance Indigenous Data Sovereignty. Isaac Torres and Maia Sauren participated in a panel on Indigenous approaches to navigating the Nation state.

Infection Prevention and Control

At the **Australasian College for Infection Prevention and Control International Conference** in Melbourne in November, Tiana Bell and Reanna Butler presented on infection prevention and control issues for haemodialysis in remote communities.

Infection prevention and control issues for haemodialysis in remote communities (Abstract)

The incidence of kidney disease in the Kimberley is one of the highest in Australia. Dialysis prevalence for this region has more than tripled in the last decade and is increasing at a significantly faster rate than in the rest of WA. Additionally, the Kimberley region sees some of the highest rates of haemodialysis related bloodstream infections, primarily related to long-term central venous catheters.

KRS now operates four dialysis units across the Kimberley region, having been first established in Broome to provide access to haemodialysis services. Delivering an infection prevention and control program across the Kimberley region for the haemodialysis centres presents unique challenges, often best met by looking beyond the basics of an infection prevention and control program to consider the geographical and cultural context, resources, and the patient experiences outside of a health care setting, and within the health care system.

This presentation detailed the tailored program implemented by KRS, emphasising the significant successes in reducing haemodialysis related bloodstream infections and other improvements achieved through targeted quality improvement activities.

Tiana Bell

Infection Prevention and Control Coordinator and Reanna Butler,
Aboriginal Health Worker Fitzroy Crossing Renal Health Centre

Australian Evaluation Society

The Australian Evaluation Society sponsored our attendance at the International Evaluation Conference in Melbourne in September. It was a valuable experience and an opportunity to network with other deadly evaluators from around the world, including those from the Kimberley.



Abby-Rose Cox, June Oscar
AO and Gillian Kennedy



Lowitja 2025

National

Lowitja 2025

At the Lowitja Institute's fourth **International Indigenous Health and Wellbeing Conference** our staff delivered the following presentations:

- Healing Steps on Country: culturally safe research methods – Ala McKay, Ellen Stapleton, Jodie Millroy
- Aboriginal leadership and sovereignty in research through the KAHRM – Slade Sibosado, Abby-Rose Cox, Allaneh Matsumoto (KAHRA)

Renal Society

KRS is a regular sponsor and attendee of the **Renal Society of Australasia** national conferences. In June, KRS staff provided the following poster presentations:

- Supportive team management of chronic kidney disease patients – Kristen Morgan, Chelsea Mason and Jessica Fong
- Healthy Dialysis Mob – Rose Burke, Robert Sibosado and Hayley Dickfos
- Enabling timely arteriovenous fistula formation for kidney disease patients – Leanne Piening and Jessica Fong

"We were proud to share the KAHRM and received deadly feedback. We made strong connections and exchanged knowledge with international mob, especially our First Nations brothers and sisters from New Zealand. We are grateful to The Lowitja Institute for the love and support at the conference. We were so excited to attend and present again at this deadly gathering."

KAHRA Team





Image source: Centre of Best Practice in Aboriginal and Torres Strait Islander Suicide Prevention

Tackling Indigenous Smoking

Kimberley TIS staff attended the **TIS National Conference** in Darwin, hosted by the National Best Practice Unit. The team presented a video showcasing activity in remote communities, developing resources, and working with young people, which was well received and introduced staff to more than 270 attendees. The conference provided training and development, enabling staff, including new team members, to learn about national priority projects, community-led activities and resources, and to build networks that will support them to achieve KPIs and strengthen program delivery over the next 12 months.



Cultural, social and emotional wellbeing

Our SEWB staff attended a national **Cultural, Social and Emotional Wellbeing** workshop hosted by the Centre of Best Practice in Aboriginal and Torres Strait Islander Suicide Prevention and Transforming Indigenous Mental Health and Wellbeing. Participants shared experiences of delivering SEWB programs and worked in groups to explore ways to strengthen training to support the SEWB workforce. The two days provided important opportunities for yarning, sharing and building connections across Australia.

ICT and Connectivity

In April, Aboriginal and Torres Strait Islander representatives from across the country came together in Canberra for the Closing the Gap Assembly. Discussions at the Assembly informed the Independent Aboriginal and Torres Strait Islander-led Review of the National Agreement findings and included a showcase of how Aboriginal organisations are leading the implementation of the Priority Reforms. Jenny Bedford presented on our ICT and Connectivity Strategy. She highlighted how we are building a reliable, stable and agile network to support 30 sites across KAMS, KRS and our Member Services.



Deputy CEO Jenny Bedford presenting at the Closing the Gap Assembly
Image source: Coalition of Peaks



Work and Study

Work and Study specialist Chris Malone represented headspace Broome at the annual **Work and Study Collaborative** in Melbourne in April. The gathering brought together experts and staff from across the national headspace network to share knowledge, strengthen practice, and support young people in their employment and education journeys. The trip also included a visit to Orygen, Australia's designated Centre of Excellence in Youth Mental Health.

NACCHO

As part of the NACCHO gathering in Canberra in December:

- Kimberley Aboriginal men attended the **Ochre Men's Health Day**, which brought together more than 100 delegates to address Aboriginal male issues, including SEWB, workforce challenges, and the healing of intergenerational trauma.
- Kimberley Aboriginal young people attended the **National Youth Conference**, which provided a platform for emerging leaders to discuss workforce development, vaping myths, Rainbow Mob awareness and youth governance.
- At the **Members Conference**, Julia McIntyre presented on 'Building a sustainable workforce and training pathways to grow our own'.

Alongside our Member Services and other Kimberley and WA representatives, we proudly represented WA, which took out four of the five awards at the **Karaoke Dinner**. Congratulations to our own Helen Howe (Best Solo Female), Ronnie Jimbidie (Best Solo Male), Ashley Councillor and Janine Williams (Best Duo) and the whole WA team (Best Group).



Indigenous Allied Health Australia National Conference

Allied Health

Hannah Lipscomb and Claire Thistleton attended the **Indigenous Allied Health Australia National Conference** in Adelaide in December, where they established a working group with new contacts to strengthen early childhood development support across Kimberley Aboriginal communities.



Men's Health Day

Image source: NACCHO



NACCHO Youth Conference

Image source: NACCHO



ARF and RHD

In November, staff from the Kimberley RHD Prevention Program attended the **ARF and RHD National Summit** hosted by NACCHO in Sydney. They presented on our consortium model and focus areas, highlighting regional success stories and the impact of a coordinated, culturally safe and community-led approach. The presentation was well received, with attendees acknowledging the team's leadership, passion and commitment to regional collaboration.



ARF RHD National Summit
Image source: AHCWA



ARF RHD National Summit
Image source: NACCHO



CRANAplus

At the **CRANAplus Conference** in October, Megan Chidgey co-presented with Danielle Thorne on 'From bumps to books: a midwife's hilarious detour into school health nursing in the Kimberley'. Our Workforce Team hosted an information stall to promote the remote working opportunities available at KAMS, KRS and our Member Services.

HumanAbility National Forum

The **HumanAbility National Forum** was held at Old Parliament House in Canberra in October for CEOs and strategic leaders within Australia's care and support economy. Rebecca Walding co-presented a First Nations Employees and Culturally Safe Workplaces workshop at the forum.



HumanAbility National Forum
Image source: NACCHO



Dr Belinda Russon, CEO of Tranby Aboriginal Co-operative Limited, with our Executive Manager Workforce, Julia McIntyre, at the National Press Club during National Skills Week 2024.

Australian Family Partnership Program

Jutjut McLean and Catherine Hunt delivered a presentation at the **National Australian Family Partnership Program Conference** in October. This was an opportunity to showcase our work at a national level and highlight issues around birthing away from Country and the reality of how far women travel to give birth with minimal or no support.

Impact of Kidney Disease

Dr Emma Griffiths and Felicity Stewart were interviewed by SBS News for '**Everyone in the Kimberley knows someone who is impacted by kidney disease**'. They spoke about KRS and the work underway to improve access to health services, culturally appropriate communication, advocacy for better data collection and monitoring of pre- and post-transplant health outcomes, increasing the Aboriginal health workforce, and improving cultural awareness about organ donation in Aboriginal communities.

You can listen to the interview here via the SBS News in Depth podcast:



Cervical Screening

Hosted by NACCHO, Nyheemah Cox and Dr Natalie Williamson presented the **Get the Facts: Supporting cervical screening in your community webinar**. The session provided education on self-collection in cervical screening and ways to support Aboriginal people with this option. It was delivered as part of the national *Own It* cervical screening campaign.

You can watch the recording here:



OMOZ 2024

In August, our staff attended the **OMOZ Conference**, a forum for all researchers, clinical practitioners and health workers investigating and treating chronic ear disease in Australia.



WA representatives at OMOZ 2024
Image source: AHCWA



TIS WA Coordinators
Workshop in Perth

Statewide

Tackling Indigenous Smoking

The National Best Practice Unit hosted a **TIS WA Coordinators Workshop** in Perth in March. Our Kimberley TIS Coordinator, Kaupa Pitt, attended alongside other coordinators. The workshop provided an opportunity to network, share best practice and problem solve together, strengthening a community of practice across the tobacco and vaping control workforce.

Mental Health Screening

At the **WA Rural Health Conference** in March, Emma Carlin and Erica Spry, also representing the RCSWA, presented on exploring mental health screening for Aboriginal people in primary health care.

Sexual Health

Our sexual health team participated in the **AHCWA Statewide Sexual Health Teams Workshop**, which supported networking, information sharing and collaboration to strengthen responses to emerging sexual health issues.



AHCWA Statewide Sexual Health
Teams Workshop
Image source: AHCWA

Regional

KAHRA Forum

At the 2024 **KAHRA Forum**, our staff delivered the following presentations:

- *Our Kimberley Aboriginal young people's experiences of type 2 diabetes diagnosis, management and support* – Erica Spry (also representing the RCSWA)
- Kimberley Health Evidence Data Platform – health data governance in the Kimberley – Maia Sauren and Isaac Torres
- Kimberley Aboriginal Health Research Model – Slade Sibosado and Vicki O'Donnell, with Amanda Collins Clinch from AHCWA

Renal Health Care

Through the Kimberley Health Professionals Network Morning Minds series, Dr Dean McKittrick, KRS, presented the March 2025 session on chronic kidney disease and renal replacement therapy in the Kimberley.

You can watch the
recording here:



"Dean had everyone 100% engaged and asking lots of questions during his presentation" and I think everyone enjoyed a cheeky hot cross bun with their breakfast as well.

Rural Health West

Strategic Enablers

We have five strategic enablers which are goals to support our people and organisation:

- **Accountability:** governance mechanisms for unity and continuous improvement
- **Sustainability:** resources for flexibility and stability
- **Systems:** reliable systems for excellent organisational performance
- **People:** safe and supportive workplace for our people
- **Partnerships:** connected to our communities, Member Services and others

We are proud to present key accomplishments from 2024–2025 in this annual report as they relate to our strategic enablers.

Business Services

The past year has been productive for our Business Services Team, who continued to provide enabling support through the delivery of infrastructure and maintenance projects, stores management, fleet services, administration, and support to the KAMS and KRS Board and the Office of the CEO. Strengthening resources and enhancing service delivery has remained at the core of their work.

The Team also maintained a strong focus on the safety and wellbeing of staff in remote communities. By working closely with our remote services team and contractors, they have helped enhance safety and functionality, ensuring staff feel supported and protected in their roles.

Projects this year included:

- Construction of a new administration building at 33 Napier Terrace, Broome, with completion due November 2025
- Design finalisation and tender release for a new remote health centre building in Bidyadanga, with construction to commence late 2025 to early 2026
- Infrastructure reviews completed across all remote health centres to identify and prioritise maintenance needs
- Safety and security upgrades across remote communities, including:
 - o Fencing upgrades to the Balgo staff compound, and plans to enclose the ambulance bay and clinic walkway
 - o Security screens installed at staff housing in Billiluna, Mulan and Balgo
 - o Rekeying of all residential properties in the Kutjungka, Bidyadanga and Beagle Bay
 - o Automatic entrance doors installed at Beagle Bay and Bidyadanga remote health centres
 - o New steel-clad clinic doors installed in Bidyadanga, Balgo and Beagle Bay
 - o Soundproofing and security screens installed at Beagle Bay staff accommodation
 - o CCTV and alarm systems installed at staff housing and remote health centres in Balgo and Bidyadanga
 - o Property enclosures completed at two Balgo staff residences



Construction of our new building at 33 Napier Terrace, Broome



Communications

Our Communications Team works to make sure communication is clear, credible and accessible, supporting the health and wellbeing of Kimberley Aboriginal people. They provide strategic communications, engagement and policy advice to the Office of the CEO, working closely with KAMS and KRS staff and Member Services to deliver culturally grounded messaging across multiple platforms.

Over the past year, they strengthened internal and external communications, policy influence, event coordination and brand identity across the sector. In 2024–2025, the team responded to more than 450 communication requests, including media, graphic design, branding, policy support, event collateral and internal communications.

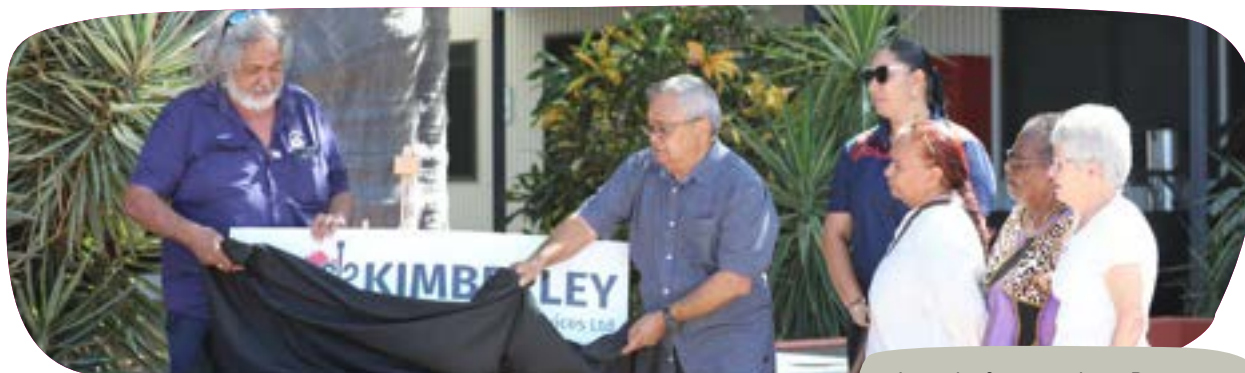
Key achievements include:

- Leading and delivering the KAMS rebrand, including design of recruitment and training materials, templates and signage
- Producing policy and communications outputs such as the Kimberley ACCHS Sector Election Priorities 2025 and the Kimberley ACCHS Sector submission to the Independent Aboriginal and Torres Strait Islander-led Review of the National Agreement
- Building media engagement through proactive and reactive opportunities
- Creating visual collateral including the Syphilis Campaign video and Men's Health Gathering materials
- Developing event collateral for the Aboriginal Health Worker Conference, SEWB Conference, Men's Health Gathering and Beagle Bay Women's Gathering
- Branding of the DAHS Mobile Clinic.
- Supporting KAMS and KRS to develop an online education package for procedures related to central venous catheters



Divina D'Anna MLA Member for Kimberley, Shelley Kneebone CEO DAHS and Hon Sabine Winton Minister for Preventative Health with the DAHS Mobile Clinic

Image source: Divina D'Anna



Launch of our new logo, Broome

Finance

Our Finance Team continued to serve as the centralised hub for all financial activities across KAMS, KRS and our Member Services. Their comprehensive services range from regular and quarterly reporting to the Board and CEO, to fulfilling annual reporting obligations including those linked to the Annual General Meeting, Annual Financial Statements and Fringe Benefits Tax. The team is also responsible for managing funding and grant acquittals, Business Activity Statements and the general ledger. In addition, they advised on relevant taxes, managed our salary sacrifice packaging partner and oversaw payroll integrity.

Beyond these tasks, they were actively involved in annual budgeting, including supporting the preparation of operational budgets. Their role is pivotal in maintaining financial governance, as they uphold standards in financial policy and procedures. The team are also responsible for managing staff travel.





Human Resources

Our HR Team is vital in enabling KAMS and KRS employees through recruitment, workforce support, and key HR functions. The team works to ensure we attract, retain, support and engage our workforce while maintaining compliance with employment law and workplace standards.

This year, we implemented staff performance appraisals through our HR information system, Employment Hero, transitioning from paper-based to fully digital processes. All employees completed self-assessments online before meeting with managers to finalise their appraisals. The rollout was successful, with only minimal follow-up required.

The HR Team also contributed to the ISO 9001:2015 accreditation process by reviewing and updating key workforce documentation, maintaining employee records and ensuring staff certifications were up to date in Employment Hero.

As of July 2024, KAMS and KRS employed 332 staff. Since January 2025, over 900 applications have been received through our recruitment portal, with 80 new employees commencing across various departments.

International Recruitment

In partnership with DAHS and AHCWA, KAMS and KRS staff participated in international recruitment activities in Auckland, Dublin and London. Our HR team represented KAMS, KRS and our Member Services, promoting employment opportunities for medical, nursing and allied health professionals across the Kimberley.

The visit included attendance at the Auckland Health Job Fair, the Doctors Job Fair in Dublin and London, and recruitment seminars in Dublin and at Australia House in London. These seminars provided candidates with an overview of the professional and cultural opportunities available in remote Aboriginal health settings. A short video showcased the Kimberley region and featured staff from KAMS and BRAMS, giving attendees an insight into our comprehensive primary health care workforce.

At the Auckland fair, delegate attendance exceeded expectations with more than 1,100 participants, significantly above the anticipated 600. In Dublin and London, 1,705 professionals registered across the seminars and job fair, with 412 attending. Attendees represented a wide range of specialties including emergency, theatre and cardiology.

As a direct result of this recruitment initiative, we successfully recruited up to 10 renal dialysis nurses for our renal health centres and appointed a registered nurse at DAHS.



International recruitment



Information and Communication Technology

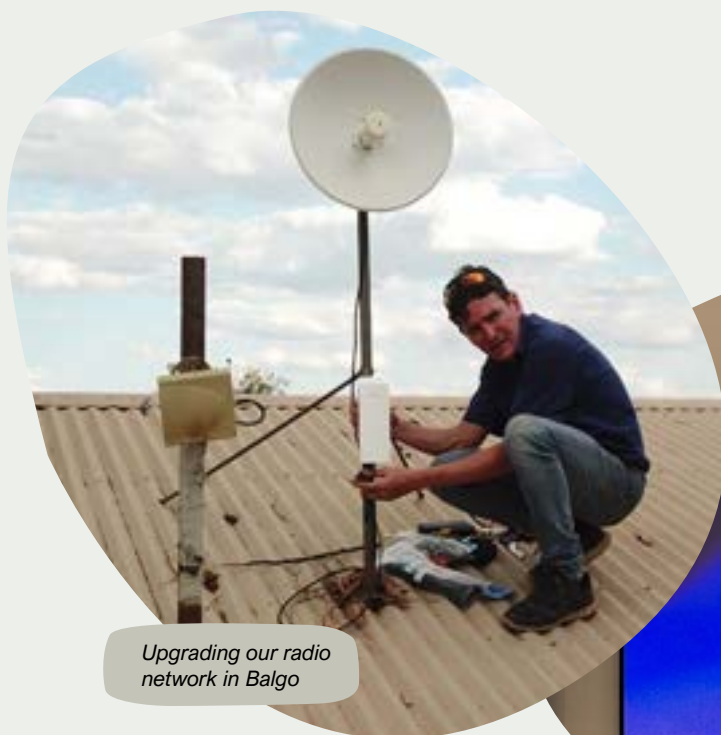
The Kimberley is a vast and remote region, presenting unique challenges not only for service delivery but also for ICT support. Given the remoteness, environmental factors must be carefully considered when designing a reliable wide-area network to keep remote sites connected to central services in Broome.

Our ICT team is responsible for every aspect of ICT across 30 sites of KAMS, KRS and our Member Services across the region. This includes installing and maintaining core hardware such as servers, firewalls, routers and switches; managing security and disaster recovery solutions; providing helpdesk support for staff; supporting and developing our electronic health record system (MMEx); and assisting with data collection and reporting to improve decision making.

Our ICT model allows us to pool resources across sites and leverage bulk purchasing for cost savings on hardware, software and services. Unlike third-party providers, who often specialise in only one area, our in-house team provides comprehensive, end-to-end support. This ensures seamless integration across all systems, reducing inefficiencies and enhancing service delivery from the ground up.

Key achievements in 2024–2025 include:

- Our Health Informatics Team successfully qualified for Certified Health Informaticians Australasia while continuing to deliver MMEx support
- Full emergency site recovery following a complete system failure caused by water damage
- Migration of five phone systems to a new unified communications platform
- Firewall upgrades completed across all main supported sites
- Upgrade of our custom Site Surveyor application to improve live monitoring of supported sites



Upgrading our radio network in Balgo



John and KJ installing new video conference system in YYMS



The Regional Telecommunications Independent Review Committee meeting with Directors and Staff
Image source: Jessa Rogers

Our ICT Team was featured in the Australian Government's 2024 Regional Telecommunications Review Connecting communities, reaching every region through a case study. Here is an abstract of the case study:

During its visit to KAMS in Broome, the Regional Telecommunications Independent Review Committee observed how advanced telecommunications are being used to meet the challenges of remote health care delivery. KAMS has strategically aligned its connectivity strategy with its mission to deliver comprehensive primary health care, ensuring seamless communication between remote health centres and the main office. This integration supports information sharing, informed decision-making and better patient care across the region.

KAMS has prioritised building a resilient hybrid network that combines fibre optics, wireless and satellite technologies to suit the Kimberley's diverse geography. The system includes dual technology solutions, real-time fault monitoring, and load balancing to minimise disruptions and ensure reliability. These safeguards are vital for maintaining essential health care services in remote and unpredictable environments.

KAMS is also looking ahead, with plans to establish its own mobile network infrastructure in very remote areas. This would give health care professionals real-time access to patient information and resources, while potentially offering mobile connectivity to local residents. Such initiatives demonstrate KAMS's commitment to using technology to strengthen service delivery and community connection.

The Committee highlighted the importance of technical leadership in shaping this sophisticated system. Their staff have been central to designing and managing a network that meets the complex demands of remote health care. The case study demonstrates what can be achieved through strategic investment and technical expertise, while also noting the broader challenge of encouraging reliable consumer connectivity across the region.

Department of Infrastructure, Transport, Regional Development, Communications and the Arts. (2024). 2024 Regional Telecommunications Review: Connecting communities, reaching every region. Commonwealth of Australia.
<https://www.infrastructure.gov.au/sites/default/files/documents/2024-regional-telecommunications-review.pdf>

Sector Strengthening

Funding Contracts

Funding contracts management is a vital enabler in the provision of our services, governance and administration. In 2024–2025 we received funding from 22 organisations to deliver services and programs under 69 agreements.

We implemented an online contract management system (WebCM) tailored to our requirements, with “Go Live” on 1 January 2025. In preparation, all active contracts and subcontracts, reporting requirements and other deliverables were entered into the system in late 2024.

From January to June 2025, implementation activities included training, data entry, resource development and system configuration. With implementation nearing completion, our focus is now on continual improvement, including enhanced reporting, additional functions, and planning for 2025–2026.

Infection Prevention and Control

Our Infection Prevention and Control program, funded by KAMS and KRS, protects patients and staff from acquiring infections when seeking or providing health care. The program covers staff vaccination programs, development of training resources, health care acquired infection surveillance and investigations, auditing activities to assess compliance with policy, procedures and accreditation requirements, and the creation and review of policy and procedures.

In 2024–2025 our Infection Prevention and Control Coordinator worked in partnership with KRS and communications staff to produce an online education package for procedures related to central venous catheters (CVCs). The package included videos filmed at Boome Renal Health Centre, starring our own staff and resus doll ‘Annie’, that provided a visual competent to the online training package. Staff caring for CVCs are required to complete theory and then practical training, which are both captured on our Learning Management System. It was a great collaborative activity that has aided in decreasing rates of infections for patients living with the invasive devices, through increased awareness and knowledge about caring for CVCs.



Quality

Through our quality program we maintain accreditation and support monitoring, compliance, and continuous improvement systems across KAMS and KRS. We use LogiQC as our quality management system.

ISO 9001:2015 is a globally recognised standard for quality management. It helps us improve performance, meet patient and client expectations, and demonstrate our commitment to quality. Implementing ISO 9001 guides our management of quality assurance and continuous improvement as part of everyday business. We have maintained ISO 9001:2015 certification since 2012. We successfully completed an annual surveillance audit in May 2025 against ISO 9001 requirements. Recertification is scheduled for 2027.

Our renal health centres underwent licensing inspections in October 2024. All four centres continue to be licensed as a Class C hospital and maintain accreditation with the WA DOH Licensing and Accreditation Regulatory Unit, as well as ISO and to the National Safety and Quality Health Service Standards.

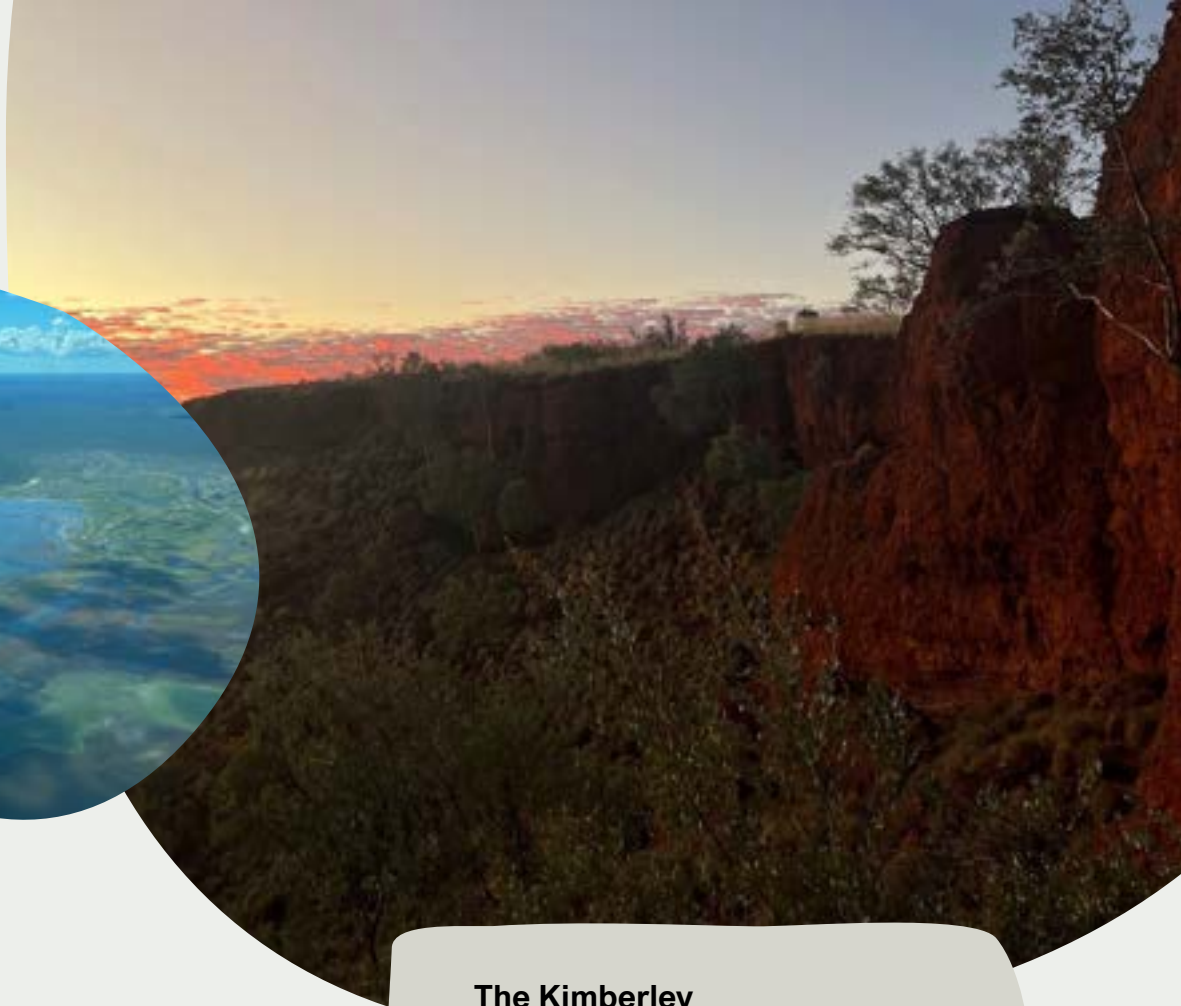
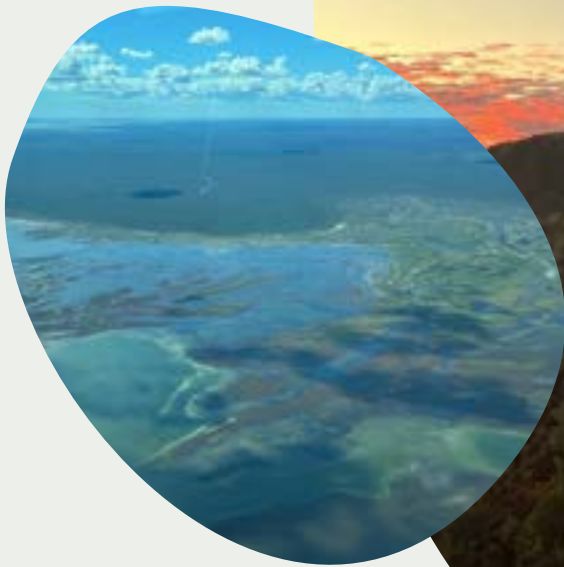
Our remote health centres and headspace Broome are accredited against the RACGP Standards for General Practices, 5th edition, until April 2026. These standards are designed to protect patients from harm by providing clear requirements for quality and safety, and by supporting services to identify and act on opportunities for improvement. The next RACGP accreditation audit is planned for November 2025.

Our Mental Health and SEWB team and headspace Broome were assessed against the National Standards for Mental Health Services in May 2025 and successfully achieved recertification. The next recertification audit is due in 2028.



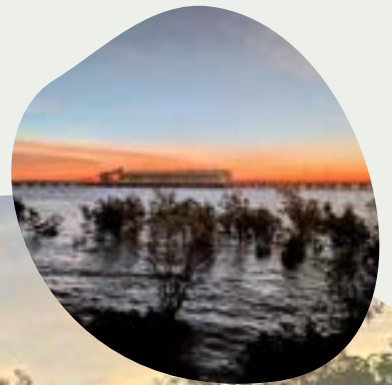
Winter Clothing Drive

Over the cooler months, our staff organised a winter clothing drive. Many people think of the Kimberley as always hot, but in places like the Great Sandy Desert the temperatures can drop very low and for local mob it feels freezing! Staff collected a large amount of warm clothing and blankets and arranged for these to be delivered to the Balgo community.



The Kimberley

Throughout the year our staff travel across the Kimberley. These images, shared by our Kimberley Supports team, capture the beauty of Country, skies and sea.





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