



# GP down south

Local health. Our business.

## — 2022/23 — YEAR IN REVIEW

**GP DOWN SOUTH LTD**

ABN: 62 063 901 306  
Website: [www.gpdownsouth.com.au](http://www.gpdownsouth.com.au)

# JOSIE'S STORY

Josie is an elderly client who was referred with complex and acute trauma and PTSD resulting from family tragedy, domestic violence and is currently being treated for cancer. She was alone and isolated, but extremely attached to her pets. Josie was reluctant to ask for or accept help in case this meant removal from her home and the loss of her pets.

The Chronic Condition Care Coordinator (CCCC) worked with her to help set goals which was to walk better (reduce falls risk) and to be able to get to the shop. The CCCC assessed Josie and her environment and started working with her to address the support needed to live independently, provided resources and one-on-one education to encourage better self-management.



*Stock photo*

Through a process of care and explanation the CCCC helped build Josie's trust in the health system and facilitated an ACAT assessment resulting in a home-care package and home modifications which eased her life considerably. Using our resources, she was put in touch with relevant services for counselling, physiotherapy, occupational therapist, social worker and palliative care,

to put plans in place to ease her mind and reduce the anxiety of being away from her pets.

Josie now has adequate social, health and community supports around her, feeling much more confident in managing her health and less frightened in general, knowing help is at hand and no-one will make her leave her beloved animals.

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## Our Vision

Thriving communities empowered to optimise their health and wellbeing

## Our Mission

To make a positive contribution to the health and wellbeing of those experiencing, or at risk of, poor health outcomes in our communities.

## Key Drivers

Access & Inclusion

Community Health & Wellbeing

## Our Values

Compassion | Respect | Connection | Excellence

## How We Demonstrate Our Values



### Local Knowledge

We possess extensive local knowledge; we grow and develop that knowledge which enables us to provide the best possible support for those we serve.



### Responsiveness

We are compassionate, agile, flexible and take action on health care needs and opportunities.



### Quality of Service

We are passionate about offering the best possible service to those who need it.



### Flexibility in Our Working Environment

We offer a flexible working environment that promotes family values and an appreciation of our geographical spread.



### Cultural Awareness

We embrace diversity and develop culturally appropriate services.



### Innovation

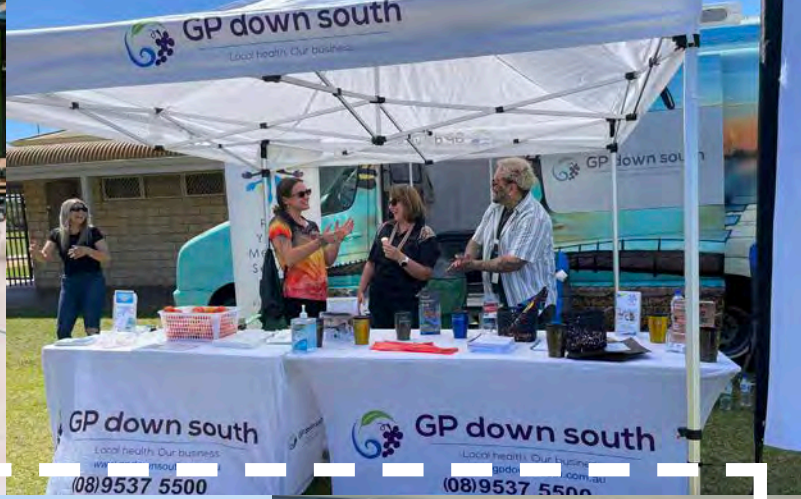
We apply creative thinking in designing programs and services that deliver results.



### A Team Ethos

We promote collaboration with our partners and a team environment for our people.







# MESSAGE FROM THE BOARD CHAIR & ACTING CEO



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## DAVID BARTON

Board Chair

*2022-23 has been a year of purpose for GP down south. We are steadfast in our commitment to supporting the people of the Peel and the South West regions through our suite of primary and allied health programs. This includes GP services, dental, mental health support, care coordination, and chronic conditions management. Our service delivery extends across eight centres in Peel and the South West regions including the Warren Blackwood region through commencement of the Federally funded Innovative Models of Care program.*

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GP down south is a collaborative and innovative organisation. We actively foster and facilitate partnerships with other services to deliver coordinated care. This is evidenced most recently in the Peel Health Hub, with the new Women's Health Service commencing this year. The service will be delivered by Allambee Counselling in partnership with GP down south. The Innovative Models of Care in the Warren Blackwood region is seeing GP down south lead a process of co-design around new and better ways of connecting health care in regional communities. Ultimately driving better experiences and outcomes for both clients and clinicians.

GP down south continues to be an award winning not-for-profit health organisation. In the last year we were awarded best medium business, and runner up Business of the Year 2022 in the Alcoa Peel Business Excellence Awards. The Clinical Care Coordination Team at the Peel Health Hub took out the award in the Therapeutic and Clinical Services category at the 2023 Mental Health Service Awards of Australia and New Zealand. We continue toward our vision of a Bunbury

Health Hub and the expansion of the Peel Health Hub, recognising that expansion of the Health Hub model to new locations will lead to improved health care in those communities. We increasingly recognise that our unique Model of Care enables genuine collaborative and shared client care among services, which leads to positive outcomes for the people in our care.

It is imperative to acknowledge the passionate commitment of our clinical, support services and leadership team. The results we achieve as an organisation attest to the high levels of purpose, professionalism and pride they bring to their work each day.

We are resolute in our determination to deliver high quality care at no cost to those who are most vulnerable in our community, and it is our pleasure to present the details of our programs and services in this annual report.

David Barton (Board Chair)

Paul Loseby (Acting CEO)

## Board of Directors



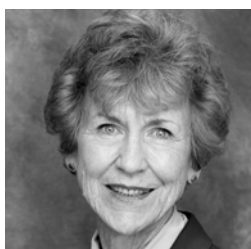
**Prof. Garry Allison**  
Deputy Chair



**Tricia Scaffidi**  
Company Secretary



**Dr Rupert Backhouse**  
Director



**Anne Donaldson**  
Director



**Dr Ann Choong**  
Director (to Apr 2023)



**Dr Russell Wallis**  
Director (to Nov 2022)

# EXECUTIVE TEAM



**Paul Loseby**  
Acting CEO & Regional  
Manager (Peel)



**Eleanor Britton**  
Acting CEO & Business  
Development Manager



**Nicola Hilyard**  
Acting Regional Manager  
(South West)

# OUR SUPPORTERS





# CLIENT'S STORY

After spending half of his life behind bars, a young man found Nidjalla Waangan Mia (NWM). Not everything was going his way, in addition to drug and mental health issues, there was also trauma which kept him in a repetitive cycle.

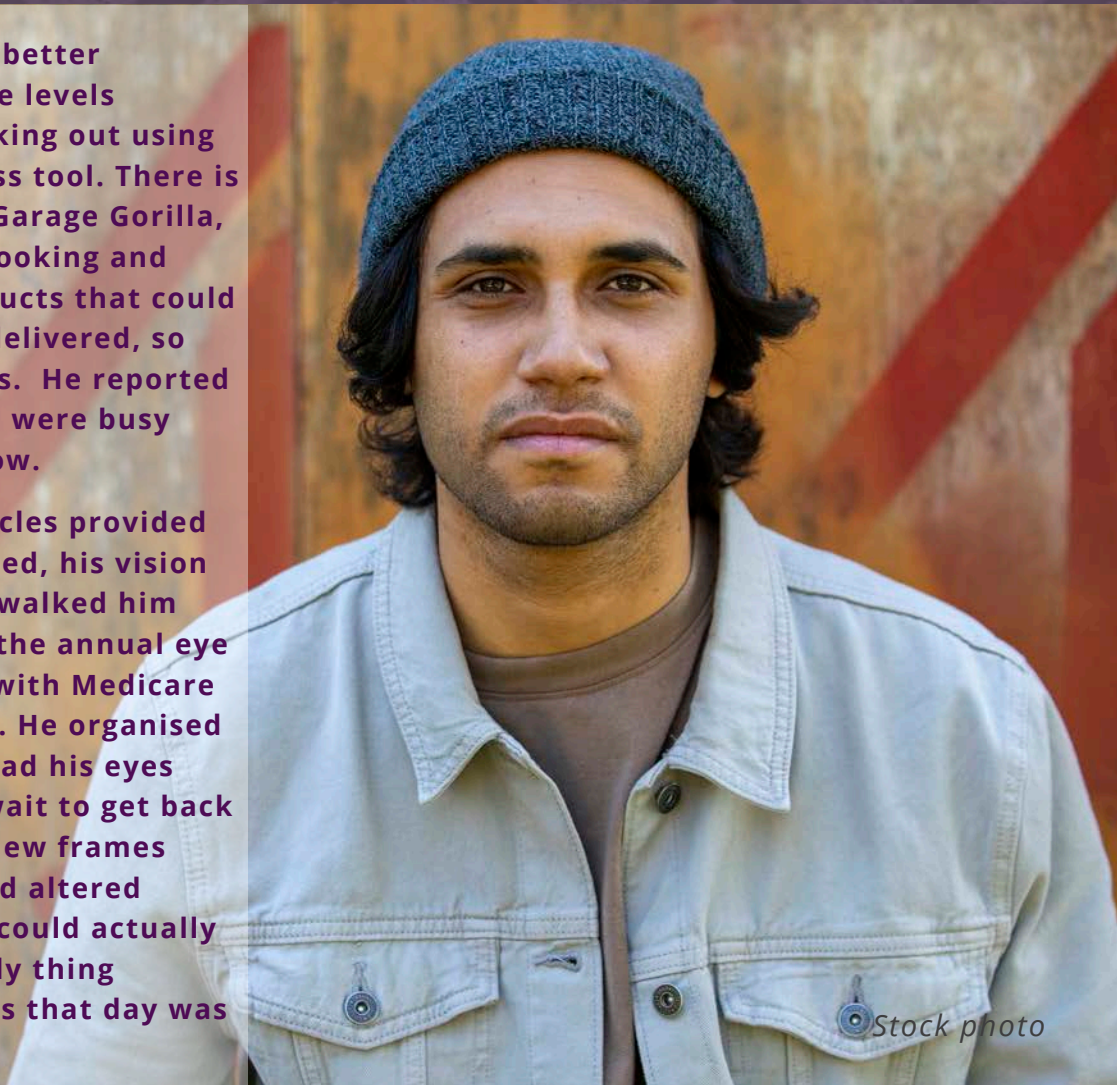
The staff at NWM helped simplify his appointment schedule and worked to remove the barriers associated with previous engagement. Using yarning and a non-judgmental approach, we witnessed a transformation.

Going from flat, non-interactive and close-ended responses, he started to share what was important to him.

The development of a care plan, with careful consideration to reducing the barriers previously identified, we provided transport, ensured the appointment times were tracked and provided a continuity not previously experienced. This removed a great deal of stress enabling him to focus on following through with treatment plans.

**Blood pressure became better managed and his fatigue levels dropped. He began working out using an online support fitness tool. There is a movement titled the Garage Gorilla, he told us. He started cooking and began researching products that could be ordered online and delivered, so he could try new recipes. He reported back to us that his days were busy doing things he liked now.**

**Although he had spectacles provided while he was incarcerated, his vision was not that good. We walked him through the process of the annual eye health check available with Medicare and optometry services. He organised his own appointment, had his eyes assessed and couldn't wait to get back to see us, sporting his new frames (trendy blue no less) and altered lenses which meant he could actually see clearly now. The only thing brighter than his glasses that day was his smile.**



At his latest appointment he confirmed legal matters had been resolved in his favour and he was feeling much more optimistic about what the future might hold for him. Now it was our turn to smile.

For more information on our Nidjalla Waangan Mia service, turn to page 16





Since its opening in November 2018, the Peel Health Hub has established itself as a major health service provider in the region with door counters recording 66,000 people entering the facility in the 22/23 financial year.

The Peel Health Hub addresses the 'missing middle' in the service provision continuum, whereby many people are identified as rising risk patients within a primary care setting but are not unwell enough for acute services.

The Peel Health Hub is a one stop shop for the health needs of young people, adults, families, carers anyone at risk of poor health outcomes in the Peel region offering a coordinated response to health issues. This includes mental health, alcohol and other drugs, assault, sexual abuse, family violence, vocational training and family support services.

The Peel Health Hub provides a GP supported, comprehensive and coordinated approach to improve the mental, social and physical health of its clients. This is supported through improving access to services and an integrated Model of Care based on Clinical Care Coordination and collaboration.

**Expansion of the Peel Health Hub is desperately needed with all services within the Hub working to capacity in terms of client numbers and existing space.** The Business Case for expansion of the Peel Health Hub (PHH 2.0) clearly articulates the benefits to the community from this investment in primary health care and in reducing unnecessary hospital presentations. It is critical to provide early intervention to support better health outcomes and prevent costly and

often inappropriate emergency department presentations and hospitalisation.

**Peel Health Hub 2.0 will adjoin and link to the existing facility bringing new priority health services to the Peel region to provide care for 300 additional clients, and 40,000 additional occasions of service per year.**

The Peel Health Hub 2.0 Business Case presents the case for investing in improving the health and well-being of the Peel community. It outlines a compelling argument for continued and increased investment on what has been an incredibly successful model of innovation in health care and one that could be replicated in other regions across the nation.

The social returns on this investment are self-evident. It is estimated that these services will contribute approximately \$24m per year in benefits to the Peel community through improved education and workforce participation and productivity gains. Health system savings will amount to \$3.8m per year. Importantly, improving the health and wellbeing of Peel residents is essential if the economic development goals of the region are to be realised.

# PHH Clinical Care Coordination Service

We would like to acknowledge the co-commissioning of this service by the Western Australian Mental Health Commission and the Western Australian Primary Health Alliance.

The Clinical Care Coordination team are pivotal to the Model of Care (MoC) offered at the Peel Health Hub (PHH). Clinically qualified Care Coordinators provide advanced access to treatment for individuals who present at the PHH who need help but are unaware of what service/s they require. This involves assessment on the day of presentation, development of a client centred therapeutic care plan, support and advocacy to navigate the health and welfare system and commencement of treatment as appropriate. Importantly, Clinical Care Coordinators maintain engagement with clients while they access appropriate services especially where service wait lists exist. Initial engagement aims to reduce immediate distress, maintain engagement, prevent deterioration and improve mental health outcomes.

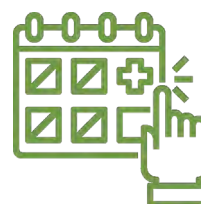
The team of five staff are from mental health nursing, psychology, counselling and social work backgrounds. Providing a 'no wrong door' approach to client engagement, they see clients who present with complex needs and have care plans that engage with multiple services. Providing immediate clinical intervention, ongoing support and warm handovers if and when needed is client centred care in action. Clients do not have to repeat their stories and they are held until the relevant service is available – resulting in fewer people slipping through the cracks.

**244**



Number of Active Clients  
(average 88 per month across  
4 full time equivalent staff)

**4153**



Occassions of Service  
(average 346 per month)





The increased capacity has addressed the growing demand for our services in relation to assessment and support of clients with mental health and alcohol or drug issues presenting or being referred to the PHH. The Clinical Care Coordinators also manage a high number of enquiries every day from families and other services in the Peel community.

The service continues to be highly valued by the community for its early engagement, accessibility and quality care. The Clinical Care Coordination Team took out the Australian and New Zealand THEMHS Mental Health Award for Clinical Excellence Award to the Team among a highly competitive field of national entrants. This was welcome recognition for the work the team does and the value this service delivers to clients and the community.

The team has also engaged with external service providers to expand offerings at the PHH by coordinating in-reach services such as Centrelink, Jobs and Skills WA, St Vincent De Paul Society financial counselling and Peel Community Mental Health Psychiatry. Collaboration with these organisations further builds our holistic approach to care. These complementary services are providing access and support to our clients, within an environment they trust.

**1681**



Number of Face to Face  
Appointments  
(average 140 per month)

**84**



Number of Walk-In  
(unplanned) Appointments  
(average 7 per month)

Approximately  
**60%**



of clients have shared care  
arrangements with other  
services or are managed  
by the CCC team whilst on  
waitlists for other services

# Assertive Outreach Team

The Assertive Outreach Team (AOT) provides support to individuals with mental health and /or substance use problems, particularly those not engaged with any services who may be experiencing isolation and complex problems.

The team engages with people in the Mandurah, Pinjarra and Waroona local government areas, promoting linkages with broader health and support services. The Aboriginal Youth Workers engage with young people aged 12-25 and the Care Coordinators engage with people 12 years and above.

Our dedicated team have a strong presence in the community promoting the AOT service alongside other Peel Health Hub services at the many events we attend throughout the year.

Some of the events we have attended so far this year have been R U OK at the different local schools, homelessness events both on the foreshore and at the Baptist church, Friday Soup Sessions held by the City of Mandurah, Waroona Women's Health Expo, 16 Days in Waroona where they held a high tea and then 16 days in Pinjarra which was also an open day at the Women's Centre, Wellness Wednesday and Beats under the Bridge.



Occasions of service



The Aboriginal Youth Workers are well respected by our stakeholders and are regulars at local high schools where they deliver a mental health and psychosocial cultural program on a fortnightly basis. The value of this program is evident by a steady growth in numbers of students wanting to participate. The passion they have for the local community is to be commended. They led the charge to enter a team from GP down south in the NAIDOC netball competition. We did not win, but there are plans for this year.



The AOT program leads two cultural camps each year. The first was held in Busselton and was a huge success. The young people got to experience being in a new region and learning about the traditional lifestyles of the Wardandi people and how they are connected to country, even going down a cave which for most of the young people was a first. The second camp was at Dwellingup where they had fun learning about their country and participating in fun team building exercises and focusing on career opportunities with a visit to Newmont Goldmine. Visits from the Australian Defence Force and WA Police showcased what they have to offer for new recruits. WA Police brought along some riot squad, youth cadets and youth specific officers to let the youth know about the different options available career wise.

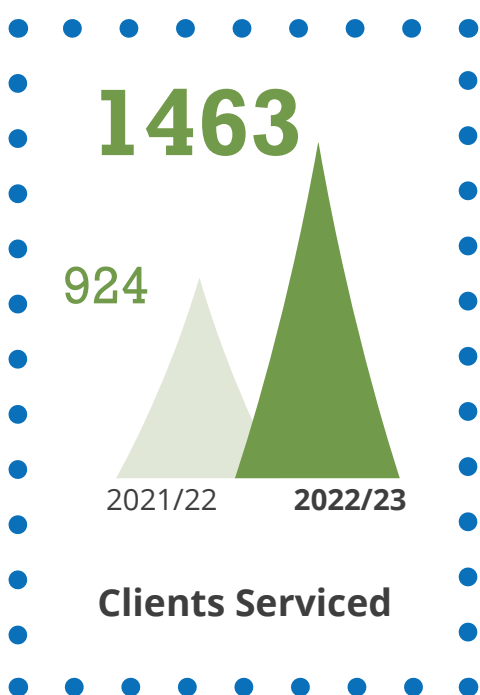


# Peel Youth Medical Service

Peel Youth Medical Service (PYMS) is an holistic, youth friendly, primary health care service, located within the Peel Health Hub (PHH) and is central to the Model of Care. PYMS continues to be the 'go-to' centre for young people looking for support with their physical, mental or emotional health and wellbeing.



Client demand for our services has continued to outstrip GP capacity at PYMS. Our reputation as a specialist youth health centre has become firmly embedded in the Peel community with many other providers referring to PYMS and other services within the Peel Health Hub.



We regularly hear from parents of young people who say, **"I've been told this is the only place to come to get good support for my child"**.

PYMS relies on the Clinical Care Coordination Team at the PHH to triage clients so that those with the highest needs are seen by appropriate clinicians in a timely manner. Their work enables us to continue to serve clients in an efficient and professional manner.

A collaboration between Allambee and GP down south has seen the introduction of a Women's Health Service which to support other services already provided and demonstrates how effective partnership is a win for service providers, clients and stakeholders. The PYMS and Allambee teams work closely to ensure all clients entering the PHH are warmly greeted and supported under the PHH Model of Care.

We continue to focus on GP recruitment to ensure that we provide services for those who need it.

It's a credit to our dedicated GPs and staff who have continued to deliver medical care in what can be a challenging environment.

We would like to extend our appreciation and thanks to the John and Bella Perry Foundation and John and Bella Perry personally, for their ongoing support for youth mental health at PYMS and indigenous youth at Nidjalla Waangan Mia.



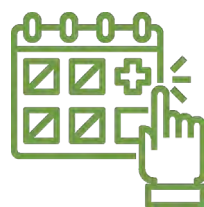


# 3 Tier Youth Mental Health Program

After nearly a decade the format of the 3 Tier Youth Mental Health Program has had a complete overhaul, to better assist schools in developing support for their students and their resilience in mental health. The new Program Coordinator and counsellor commenced in November and set about revamping the new and improved 3 Tier Program.

The redeveloped 3 Tier program runs in three sessions with a working group of students, staff and parents. The first session is educational and encourages open learning, sharing and the development of rapport within the working group. The second session provides an opportunity for the working group to assess the school's response to youth mental health supports and to strengthen what is working and fill any gaps that exist. They also spend time setting goals for achieving this change. This is followed by a third session which is an opportunity for the working group to seek further support as needed, and to celebrate their successes.

Throughout the program the Program Coordinator supports the working group through education, communication facilitation and community connections.



# 489

Occasions of service

(Third tier counselling)

The program now takes a codesign approach and utilises the mix of the working group to ensure that mental health supports are specific to individual school needs. All schools in the Peel area are invited to participate. It aims to achieve integrated approaches to student wellbeing as a result of democratic communication and the accentuation of student voice.

The program continues to offer counselling for young people, and the education session ensures that program participants are aware of referral pathways into the Peel Health Hub.

The program has been incredibly successful, with wonderful feedback from participants and schools.

*"I really liked and enjoyed Julie (counsellor). You can tell that she has amazing knowledge and personal experience. I really look forward to having another session with her."*

*"I was able to catch up with some staff members and students following your presentation and the outcome was unanimous, we all felt your care for the information you shared. Your presentation made us feel included and I, personally / professionally felt engaged as the presentation and activities touched on key important topics".*

*"It was a very positive outcome having students involved in the program. Would love to continue in 2024."*



## Nidjalla Waangan Mia



Nidjalla Waangan Mia (NWM) is the leading health and wellbeing service dedicated to improving health outcomes for Aboriginal and Torres Strait Islander people living in the Peel region. Our dedicated team of GPs, Nurses, Care Coordinators, Outreach and Client Support workers, Administration staff and Dental Team, all work collaboratively to ensure clients receive the best possible care and support.



Long term and beloved GP, Dr Walker retired at the end of June. From the very beginning, Dr. Walker played a pivotal role in shaping the destiny of NWM. As one of the founding members, he tirelessly advocated for an Aboriginal-specific Medical Centre in the Peel Region. His efforts as the first Chair of the Board of GP down south (GPDs) were instrumental in realising this dream. His dedication and passion for improving healthcare for the Aboriginal community were evident in every step he took.

Dr. Walker's impact extended far beyond his administrative responsibilities. He led the way in clinical services, spearheading a nurse-led clinic that empowered the Aboriginal community with complex chronic diseases to develop self-managing skills. His expertise and guidance were invaluable, and he happily supervised medical students during their placements at NWM, nurturing the next generation of healthcare professionals.



The passion and dedication of NWM staff has ensured a seamless transition with new GPs taking up the mantle to maintain the high-quality services for the local community.

The two new GPs are loved by the clients and have fitted into the team extremely well. We are so grateful to have them working with us to help improve the health of our clients.



We held events for Close the Gap, Harmony Day and NAIDOC Week, bringing community into the space to yarn and share in delicious food.

The Weekly Walking Group continues to be a success and we have also established a fortnightly craft group. The team partnered with Foodbank to deliver Healthy Cooking Classes. NWM remains a positive and vibrant community hub for the Peel region.



# Down South Aboriginal Health

DSAH has had a strong year with both Collie and Manjimup teams developing and implementing high quality, engaging workshops that are relevant to the needs of the communities.



R U Ok? Day is a really important event to check in with community in a casual and informal way. We hosted a BBQ and let the yarning begin. This was followed closely by Mental Health Week Expos, working closely with services and community groups to promote available services.

We partnered with South West Aboriginal Medical Service (SWAMS) and Accordwest for National Aboriginal and Torres Strait Islander Children's Day to deliver a workshop for children reading books, art and craft and food.

Breast Screen WA made a special visit to Collie where the bus was available for our clients to have their mammogram. Each client that attended was given a gift bag.

DESY (Diabetes Education and Self-Management Yarning), a newly adapted and culturally safe program designed for Aboriginal and Torres Strait Islanders, follows the DESMOND philosophy and is facilitated with a trained health professional and aboriginal health worker or practitioner. This was welcomed by new participants and those that had already been to a session came along again!



HAPEE clinics – Hearing Australia brought staff down twice to conduct hearing assessments on children aged 0-6 years.

Cervical Screening – Staff in Manjimup partnered with SWAMS and local GP practices to promote the early detection of Cervical Cancer. The clients were pampered with food and a facial.





Health Check Clinics in Manjimup and Collie were held for Kidney and Heart Disease. This called for education and used specially designed software to assess the risk of the individual in relation to Chronic Kidney Disease and Heart Disease.

Our signature health promotion event, Wacky Wednesday continues to get bigger and better with the clients coming in having a yarn with the staff and each other. DSAH staff provide morning tea and clients can choose to get their health checks done.

Finally, the Deadly Food – Deadly You Program. This program was funded by Aurizon Community Grants and sponsored Manjimup Retravisation. It was a six week program with a session each week in Manjimup and Collie, where we learned about cooking healthy food (including desserts) in the air fryer, eating healthy on a budget, the importance of exercise to help manage or prevent diabetes, good fats vs bad fats, and carbs among many other things. Clients and staff really enjoyed these sessions and we hope to run the program again.



# SOUTH WEST MENTAL HEALTH

GP down south provides quality mental health services to three streams of clients in the South West.

## Connections Count Mental Health Service in Residential Aged Care Facilities

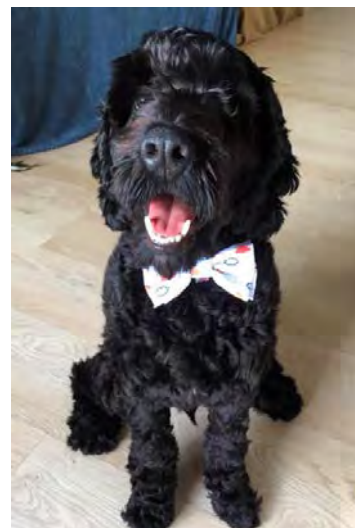
The Connections Count program supported residents in aged care facilities to improve their quality and enjoyment of life by giving them the opportunity to talk about anything that may be worrying them with a mental health professional in a safe and confidential space. In 2022/23 GP down south provided mental health services to eight Residential Aged Care Facilities across the South West of WA. During this period, our mental health clinicians provided 236 counselling services.



## Meet Groot our Therapy Dog

Groot is the latest member to join the GP down south mental health team. We are extremely lucky to have both Groot and his human Jade Marklew on our Primary Mental Health team.

Groot joins in counselling sessions when invited as a therapy dog. A key factor in therapy success is the trust between therapist and the client. Animals often facilitate this trust. If you've ever felt comforted by a family pet, you've had a glimpse into the benefits of animal-assisted therapy. Groot works his magic on staff and clients alike.





## Integrated Primary Mental Health Program

Through the Integrated Primary Mental Health Program we provide short-term counselling for people experiencing mild to moderate mental health issues alongside the Integrated Care Management Service for people living with a severe and persistent mental illness. Clinicians support clients to improve their level of community engagement, wellbeing and enjoyment in life leading to enhanced quality of life.

During the past year, our mental health clinicians saw 590 clients with 69.7% of clients reporting significant improvements in their mental health. Our mental health service maintains extremely high standards of service delivery as evidenced by this snippet of feedback:

*"The clinician has always been positive and respectful, and I feel I've benefited from her knowledge, experience and commitment to her profession."*

*"While I know my file is closing, I wanted to let you know that I am very happy with all the hard work you have put into helping me throughout the year to fulfil great accomplishments. I wouldn't have achieved the amazing outcomes on my own. I wanted to once again thank you very much. I really found it reassuring to have someone help me in so many positive ways."*

*"I can report 100% satisfaction from all my patients who have used your services which is unfortunately not the case with private psychology where I would estimate only 30 to 50% success with the 1st psychologist seen and a lot of wasted time and money for patients."*

*"Always respectful, always kind and considerate. Patient, knowledgeable and excellent communicator. Excellent listener, genuine carer."*

**590**

clients serviced  
throughout the  
South West region of WA



**70%**

of client reported  
significant improvements  
in mental health

# CHRONIC CONDITIONS

Integrated Chronic Disease Care (ICDC) provides Care Coordination, Diabetes Education, Exercise Physiology and Dietetics to adults suffering with diabetes, heart disease and respiratory illness, across the South West.

Over the course of the last year the ICDC team have increased services across the South West and successfully expanded face to face service into various regional towns including Donnybrook, Nannup, Bridgetown and Boyup Brook with plans in place to offer face to face diabetes and dietetics in Collie soon.

Changes in program delivery have placed a higher priority on all clients being assessed for Chronic Condition Care Coordination, increasing the number of clients working through the Flinders Program. It takes a patient centred approach to identify goals to improve self-management, with the aim to continue to improve overall health outcomes following a structured, patient focused, collaborative approach to care.

GP down south (GPDs) has been successful in obtaining funding to deliver face to face diabetes education in Bridgetown and Manjimup which will open the service up to those at risk of developing diabetes in areas which have traditionally reported poor access to service, with limited services in place from Western Australian Country Health Service (WACHS).

The ICDC team has continued to provide health education to communities offering Quit Smoking programs, Flexit Carb Counting courses for T1DM in Bunbury and Busselton and HEAL (Healthy Eating Active Lifestyle) group sessions in Manjimup.

Both the Flexit and HEAL program were delivered in collaboration with WACHS, and due to their success, further programmes are scheduled for 2024.

In addition, Practice Nurse education sessions were run in collaboration with Silverchain offering clinical updates in diabetes, asthma, COPD, cardiac health, chronic pain and working with the Flinders Program, to offer free nurse CPD education across the region whilst showcasing the services offered by GPDs.

ICDC funding has been granted until June 2025, offering the opportunity for GPDs to continue to offer valuable allied health services and support to those suffering with Diabetes, Heart, Respiratory Disease and Morbid Obesity in the South West.

**5144** Occasions of service

Referrals into the program



**743**

**88%**



of clients agreed the ICDC service would help manage their health better



A strong and dedicated cohort continue to form the Bunbury Health Hub Development Group and met twice during the year to continue to drive this important initiative forward.

One of our most notable accomplishments was securing pro-bono services to develop comprehensive concept plans and define essential site work. These invaluable contributions have propelled the project forward and allowed us to visualise the tremendous potential of the Health Hub, as pictured here. It is clear that the Bunbury Health Hub will stand as a transformative asset for our local community, bringing life and vitality to the Hands Oval site.

The Health Hub concept and Model of Care remain strategically central to GP down south Board's vision and mission. The finalisation of a Business Case will enable us to move forward with approaches to all levels of Government to fund this purpose driven asset.

We extend our gratitude to our partners, MCG Architects, LCI Consultants, and BSM Consulting, for their support and invaluable advice throughout the development of plans for the Bunbury Health Hub. Their expertise and commitment have been instrumental in shaping this ambitious project.

We would also like to acknowledge the ongoing support of the City of Bunbury. Their commitment to the development of this vital health infrastructure underscores their dedication to enhancing the standards of healthcare services in our region and positioning the City as exemplary leaders in community innovation.

We look forward to the continued progress of the Bunbury Health Hub, driven by the collective determination of our dedicated team and the support of our partners and stakeholders. Together, we are shaping a brighter and healthier future for our community, and we remain committed to this endeavour.

# BUNBURY HEALTH HUB



BUNBURY HEALTH HUB  
STREETSCAPE VIEW FROM SPENCER STREET

# INNOVATIVE MODELS OF CARE (WARREN BLACKWOOD) 'My Healthy Partnerships'

In the 2021-2022 financial year GP down south (GPDs) submitted an application for the federally funded Innovative Models of Care program to design, implement and evaluate a pilot project encompassing clinical care coordination for people (16 years+) living with, or at risk of developing a chronic health condition and who reside within the Warren Blackwood region.

The Warren Blackwood region was identified in the WAPHA SW Needs Assessment Report as being at significantly higher risk for poor health outcomes, in multiple domains across chronic health conditions, compared to other areas within WA. The aim of the program is to improve access to, and increase integration and collaboration of, primary health care services within the region through client centered care and facilitation of inter-agency communication.

**GP down south was the only organisation, nationally, who was successful in this funding round.**

GPDs has undertaken three phases of evaluation across the region to assist with the initial development of the model.

## Phase 1

Completed in Oct 2022, involved the assessment of current health and community service provision within the region and the development of a detailed RoadMap which was used to identify key stakeholders for Phase 2.

## Phase 2

Completed in Feb 2023, consisted of a thorough stakeholder engagement process comprising 1:1 interviews with individuals from various health and community organisations and was conducted to ascertain current service provision, collaborations, and identified areas of support required relevant to their service. In total, 50 stakeholder interviews were conducted from 39 key organisations across all four shires:

- 5 interviews from 4 Shires
- 29 interviews from 22 organisations
- 13 interviews from 10 medical practices
- 3 interviews from 3 hospitals



## Phase 3

Community consultations were completed in March and June 2023, through two rounds of engagement forums in the nine main townships within the region to discuss access to and experiences with health care in the region, and identified gaps in service provision.

In total, 176 individuals provided feedback, both in person and privately via phone interviews.

The Program Manager/Lead Care Coordinator commenced mid-January 2023. She has established an internal working group which provides feedback and support along with a local working group which will grow to include all key stakeholders in the region.



Beedelup Falls: Frances Andrijich

### Some key successes to date:

- Engaging with an innovative agency providing in-home care the My Health Partnerships program provided introductions to two townships that had raised this as a significant gap in their communities. The IMCWB team have undertaken further engagement with the program providers for future collaborations in relation to training opportunities.
- A Recreation Centre in one small township expressed a need for professional input into the purchase of new gym equipment. The My Health Partnerships team linked an exercise physiologist with a member of their Board to provide this input. This led to local community members participating in a health and wellbeing program delivered collaboratively with WACHS by the GPs exercise physiologist.
- Through liaison with local medical practices by the My Health Partnerships team, the need for local allied health provision such as dietetics and exercise physiology were ascertained and fed back to the ICDC (Chronic Disease Care program by GP down south) program manager. This enabled the expansion of ICDC service provision to outreach areas.

The team will continue to grow and further phases of the program will be rolled out over the next 12-months.

# Financial Overview



*GP down south (GPDs) has successfully navigated new challenges in the 22/23 year. The ever increasing client demand for innovative services has been met by our passionate, dedicated staff. Increased wages and general cost pressures due to high inflation combined with difficulties in recruitment has negatively impacted some of our management positions but we remain committed to retaining, recruiting and up-skilling suitably qualified personnel. Despite all these difficulties the Board and Staff have worked together to remain focused on achieving its primary objectives.*

Service delivery has remained strong and is being continually developed and refined to support those in need. Critical new funding streams have been achieved as GPDs continues to lead the way in all areas of the health and well being for those in need. Obligations outlined by our funders have all been met or exceeded and we expect our current growth in funding streams to continue in 23/24.

The Company returned an overall surplus of \$293,601 driven predominately by efficiencies and timing of staff turnover in the area of corporate services. Cash reserves remain strong which will further allow the organisation to meet all short term and long term commitments. A reinvestment plan is being considered as part of the new strategic direction enabling GPDs to provide internal sourced funding to ensure the continued development and enhancement of our key programs. This financial initiative will ensure communities' needs are fully met now and for years to come.

An increased focus on Risk Management and IT in particular will be forefront in 23/24 to ensure we remain agile and able to reach as many as possible. System enhancement has enabled more programs to offer telehealth services ensuring location is not a barrier to achieving quality services nor reaching optimal health outcomes. GPDs is a leader in building strong partnerships and working collaboratively to create systemic efficiencies. Our core values of respect, connection and excellence in action.

The Board and Organisation as a whole, continued to operate and meet in a hybrid format. This has delivered an opportunity to address sustainability and decrease our carbon footprint – which is challenging for an organisation of such geographic spread.

Operationally the Peel Health Hub (PHH) has remained the GPDs flag ship bringing together new partnerships and collaborations which in turn will only further strengthen the community benefits and allow the continued operation of Peel Youth Medical Services. Increased GP services is key to increasing capacity and will be a focal point in 23/24. This key, free service, has positively impacted the lives of so many young people. We will continue to support GPDs Innovative Model of Care which has proven to bring significant benefits to the community.

Our ultimate goal is to extend and support this model as a key focus for regional areas. We are confident these initiatives will be realised in the not-too-distant future. Our success in achieving better health outcomes for those in need is greatly supported by the Board, State and Federal governments.

Going forward, continued modest results are expected with the 2023/24 target being to absorb wage increases in line with CPI, have a full compliment of corporate staff to improve service delivery and have a balanced zero budgeted surplus.

GP down south is proud of its innovative approach towards assisting young people at PYMS via the provision of a holistic model of care. These services will continue to be internally funded and financially supported for 2023/24.

Our vision and values remain strong and we will continue to provide and develop better health services for those in need for many years to come irrespective of what challenges come our way.

**Patricia Scaffidi**  
Company Secretary



# Statement of Profit or Loss and Other Comprehensive Income

	2023 (\$)	2022 (\$)
<b>OPERATING REVENUE</b>		
Revenue	7,106,247	7,034,871
Other income	351,526	223,370
<b>TOTAL OPERATING REVENUE</b>	<b>7,457,773</b>	<b>7,258,241</b>
<b>OPERATING EXPENSES</b>		
Consultancy and contractors	(524,716)	(312,602)
GP Fees	(531,208)	(594,579)
Depreciation expense on property, plant and equipment	(408,077)	(436,659)
Amortisation expense on right-to-use asset	(25,200)	(59,661)
Interest expense	(540)	(2,393)
Employee benefits expense	(4,693,980)	(4,377,876)
Program materials	(130,364)	(130,769)
Rental expense	(358,334)	(321,329)
Repairs and maintenance and vehicle running expense	(98,635)	(102,105)
Impairment losses on financial assets	(77,346)	(74,541)
Administration expenses	(233,063)	(241,041)
Other expenses	(82,709)	(68,854)
<b>TOTAL OPERATING EXPENSES</b>	<b>(7,164,172)</b>	<b>(6,722,409)</b>
<b>SURPLUS</b>		
Surplus/(deficit) for the year	293,601	535,832
Other comprehensive income	-	-
<b>Total comprehensive income for the year</b>	<b>293,601</b>	<b>535,832</b>
<b>RETAINED EARNINGS</b>		
Retained earnings at the beginning of the year	2,501,307	1,640,995
Transfer from Peel Health Hub Reserves	324,480	324,480
Retained earnings at the end of the year	3,119,388	2,501,307

# Statement of Financial Position as at 30 June 2023

	2023 (\$)	2022 (\$)
<b>ASSETS</b>		
<b>CURRENT ASSETS</b>		
Cash and cash equivalents	1,351,922	1,863,919
Trade and other receivables	53,855	71,620
Financial assets	2,507,937	1,504,877
Other current assets	215,895	169,194
<b>TOTAL CURRENT ASSETS</b>	<b>4,129,609</b>	<b>3,609,610</b>
<b>NON-CURRENT ASSETS</b>		
Property, plant and equipment	7,794,198	8,181,825
Right of use assets	45,773	26,498
<b>TOTAL NON-CURRENT ASSETS</b>	<b>7,839,971</b>	<b>8,208,323</b>
<b>TOTAL ASSETS</b>	<b>11,969,580</b>	<b>11,817,933</b>
<b>LIABILITIES</b>		
<b>CURRENT LIABILITIES</b>		
Trade and other payables	347,347	410,947
Employee benefits	536,846	641,171
Contract liabilities	514,368	564,802
Lease liabilities	23,700	26,137
<b>TOTAL CURRENT LIABILITIES</b>	<b>1,422,261</b>	<b>1,643,057</b>
<b>NON-CURRENT LIABILITIES</b>		
Employee benefits	114,401	56,877
Lease liabilities	22,103	785
<b>TOTAL NON-CURRENT LIABILITIES</b>	<b>136,504</b>	<b>57,662</b>
<b>TOTAL LIABILITIES</b>	<b>1,558,765</b>	<b>1,700,719</b>
<b>NET ASSETS</b>	<b>10,410,815</b>	<b>10,117,214</b>
<b>EQUITY</b>		
Retained Earnings	3,119,388	2,501,307
Peel Health Hub Reserve	7,291,427	7,615,907
<b>TOTAL EQUITY</b>	<b>10,410,815</b>	<b>10,117,214</b>



# AMD Chartered Accountants

\* Excerpt from the Independent Audit Report to the Members of GP Down South Ltd

## Report of the Financial Report

### Opinion

#### Opinion

We have audited the financial report of GP Down South Limited which comprises the statement of financial position as at 30 June 2023, the statement of profit or loss and other comprehensive income, the statement of changes in equity and the statement of cash flows for the year then ended, notes to the financial statements, including a summary of significant accounting policies, and the declaration by those charged with governance.

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

1. giving a true and fair view of the financial position of GP Down South Limited as at 30 June 2023, and of its financial performance and its cash flows for the year then ended; and
2. complying with Australian Accounting Standards and Division 60 of the Australian Charities and Not-for-profits Commission Regulations 2022.

Dated this 24th day of October 2023

AMD Chartered Accountants  
Level 1, 53 Victoria Street, Bunbury,  
Western Australia

Maria Cavallo  
Director

*\* full version available upon request.*



# GP down south

Local health. Our business.

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