

MDAS
MALLEE DISTRICT
ABORIGINAL SERVICES

**ANNUAL 20
REPORT 22**



Contents

About MDAS

For Community, By Community – Vision, Purpose, Values	04
In Community - About MDAS	06
How we work	08
Constitution Preamble	09
MDAS leadership structure	10
Our MDAS Board	12
Chair Report	14
Operations Report – Building connections	17

Our People

Years of service	19
Keeping up with the Joneses	24

Health and Clinical Services

Healthy Art – Health Promotions Art Competition	28
Mildura Report	29
Creating better futures – Wiimpatja Healing Centre	32
Social and Emotional Wellbeing	34

Family and Community Services

Out of Home and Kinship Care	38
Family Services	40
Family Violence Report	43

Swan Hill-Kerang

Swan Hill-Kerang Annual Report	45
--------------------------------	----

Corporate Services

Quality and Governance	51
Assets Management	56
Learning and Development	58
Human Resources	60

Financials

Financials , Year End 20 June 2022	63
------------------------------------	----

With Thanks

Our partners and supporters	69
MDAS Staff – Thank you Team!	70

Our Services Index

72

Warning: Aboriginal and Torres Strait Islander people are warned this document may contain images of persons who are now deceased

Photography in this report courtesy: NewsAlert PR, AdMedia, Gange Productions, Lisa Milne, Sunraysia Daily, Swan Hill Guardian, Staff MDAS Mildura, Swan Hill and Kerang

For Community, By Community

We acknowledge the traditional custodians of the lands on which we deliver services to our communities across the Mallee Region. We pay our respects to the Elders past and present, and to our emerging leaders, and acknowledge the ancient connection they hold with their Country. We acknowledge that our traditional Aboriginal lands have never been ceded.

We are the proud and strong descendants of the oldest living Culture in the world.

Our vision

Self-determined, healthy, robust and culturally strong Aboriginal communities across the Mallee Region.

Our values

MIND: Integrity, Accountability, Confidentiality

SPIRIT: Respect, Elders, Culture

BODY: Compassion, Empathy, Nurturing

Our purpose

Healing, supporting, serving and protecting our communities throughout the Mallee Region.

Healthy, resilient and capable Aboriginal people and families who can be their very best selves and exercise true self determination. Caring for, strengthening, empowering, motivating and guiding our Mob.



In Community

Our offices

Our Mallee communities are serviced by MDAS offices in Mildura, Swan Hill and Kerang.

Mildura (administration)
120 Madden Avenue, Mildura
PO Box 5134 Mildura 3502
Phone (03) 5018 4100

Swan Hill
70 Nyah Road, Swan Hill
Phone (03) 5032 5277

Kerang
9 Nolan Street, Kerang
Phone (03) 5412 6004

Mallee District Aboriginal
Services Limited ACN 607 331 144
MDAS Limited ACN 602 202 139

Cover Artwork

The artwork on the cover of this year's MDAS Annual Report is adapted from an original artwork by Darlene Thomas.

Symbolism of our logo

Our logo is based on a design by Sharon Kirby.



Mallee District Aboriginal Services wishes to pay tribute to all community members who have passed away in the Mallee this year, as well as those in other communities with a family connection to MDAS members, staff or community as a whole.

setting our sights on the future

MDAS is a proud Aboriginal Community Controlled Health Organisation (ACCHO) that has a 30-year history of delivering sustainable, grassroots services and providing the local community with a vehicle for self-determination. We believe the imposition of structures without community control as a central tenet will fail.

As Aboriginal Australians, we are best-placed to decide and implement the programs and services that work for our communities.

With MDAS and the community working together, we know we can positively enrich the lives of all Aboriginal people living and working along the many river systems across the Mallee district.



How we work

The Helping Hand of MDAS

The MDAS Core Business Model has been developed to underpin the key operational functions of MDAS.

At MDAS we have “the person” at the centre of all that we do.

Our business model is depicted as the “Helping Hand of MDAS”, where the person is at the centre of our service delivery, surrounded by the community.

MDAS provides service delivery in a holistic manner to meet all needs including: Person-Centred Ages and Stages; Soul & Culture; Family, Children & Youth; Social and Emotional; Body Health/Housing; Environment/Self-determination.

The MDAS vision is aimed at assisting clients and community to be empowered and achieve the self-determination that can create lasting change.



Constitution Preamble

Our Constitution enshrines the rules of MDAS as a company, and ensures democratic fairness and integrity in MDAS representation and operation.

MDAS is one of very few Aboriginal Community Controlled Organisations to adopt a Preamble as part of the Constitution.

Our MDAS Preamble outlines the context in which our Constitution operates.

Constitution Foreword

As an Aboriginal Community Controlled Organisation, we operate under two systems of law.

We abide by and comply with our statutory legal obligations under the Corporations Act [Cth] 2001. We report to and are regulated by both the Australian Securities and Investment Commission and the Australian Charities and Not for Profit and Commission.

In addition to the western legal system that governs our operations we also follow and honour our own cultural obligations under Aboriginal LORE. Our LORE sets the foundation and values by which we operate our business and deliver services to our communities.

Our LORE is the customs and stories of Aboriginal peoples learned from the Dreamtime, passed from generation to generation through our ceremony, songs, stories and dance and requires us to respect Country. Our LORE from time immemorial has governed all aspects of our lives. Our culture is a vibrant evolving expression of who we are.

We acknowledge the four cornerstones to our LORE:

LAND – our ancestors birthing Country is our link to our sacred lands where ceremony and healing takes place.

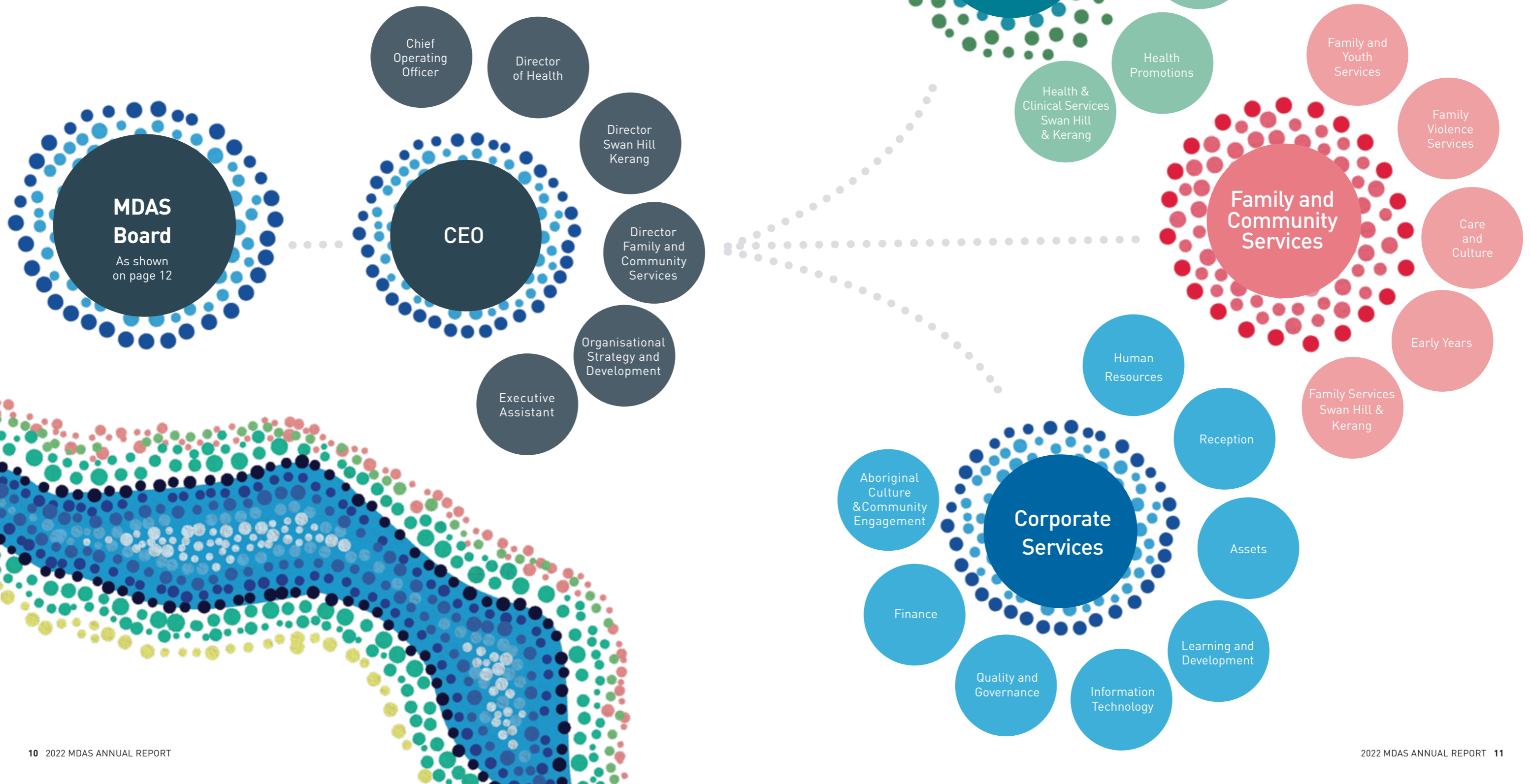
ORAL – our history is an oral tradition, we pass on generation to generation our language, customs, song lines and ceremonies through story telling.

RESPECT – we show respect for our Origin, our Country, our Elders, our cultural practices and the cultural practices of others, our animals and our Dreamtime.

ELDERS – are our wisdom holders, our story tellers, our links to our culture and history. They are our knowledge keepers and spiritual guides for our families and people.

Our constitution has been written to guide the governance of our company under western law, and through the Objects expressed in clause 6, to ensure we honour and acknowledge our obligations under our LORE

MDAS leadership structure 2021-22



Our MDAS Board

As of June 2022, we had a nine-person Board, with each member bringing a diverse range of experiences and skill sets to MDAS.

Each member represented the voices of the communities that stretch across our catchment, from Mildura to Kerang. Their insights provided for lively discussion and guided the Organisation as it continued the new course it committed to, in the previous financial year.

For the bulk of this reporting period, COVID-19 was a lingering challenge but despite this, the Board met all its commitments and obligations and supported a staff who were understandably feeling the pressure of a health crisis that was having profound impacts on the wellbeing of community.

With a vision for self-determined, healthy, robust, and culturally strong Aboriginal communities across the Mallee, the Board listened to and addressed many of the

concerns raised by MDAS members. In so doing, as the 2021 – 2022 financial year comes to an end, the Organisation is well-placed to seize the opportunities that await.

A successful Board relies on collaboration, accountability and integrity and the path is now set for existing members and those yet to come, to make a positive difference in their community.

At the end of June 2022, our full complement of Board members was as follows:



Vicki Clark, (Chairperson) OAM (Swan Hill) As a professional Aboriginal woman, I believe in self-determination that empowers Aboriginal organisations and communities to strive for a fair and just service into homes for all families. My appointments through my professional career are diverse and ones which have held high responsibility and consideration of many complex needs from a community perspective.



Thelma Chilly (Deputy Chairperson) (Robinvale) Born in Robinvale, Thelma has ties to the Wiradjuri, Muthi Muthi, Wemba Wemba and Yorta Yorta nations. She has been a strong advocate for the Koori community for more than 38 years. Thelma was placed on the Women's Honour Roll in 2010 and was a finalist in the Dreamtime Awards in 2018. Thelma qualified in Community Development and Planning at Swinburne University and has strong knowledge in family violence prevention. She has worked for State Government for the past 18 years and is responsible for the Local Aboriginal Networks in the Mallee.



Debra Chaplin (Swan Hill) Debra has been an active member of her community for many years, and worked in many areas on different levels. She bases her decisions on past lived experience and mistakes, always for the betterment of her culture and community. Debra regards her greatest achievement as her children and grandchildren, and walks in her mother's footsteps as a proud Aboriginal woman.



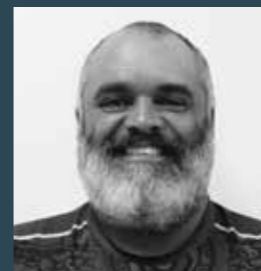
Sharon Johnson (Mildura) Sharon is a Senior Aboriginal Health Practitioner (AHW/AHP) of 26 years. She grew up at Melton until she was 15 when her parents moved back to Charleville, Queensland. Sharon lived and worked in the Northern Territory for 20 years before moving to Mildura 2019. Sharon is on the Mildura Council Aboriginal Action Committee (AAC), the Mallee Regional Partnership Group, and is on the Mildura Base Public Hospital Board.



Shantelle Thompson, OAM (Mildura) Shantelle Thompson is a proud Barkindji and Ngyampaa woman, three-time jiu-jitsu world champion, and mother of five, who was recently awarded a Medal in the Order of Australia for services to the Indigenous community of Victoria. Shantelle is strongly connected and committed to her community, and is proud to join the MDAS Board. Shantelle combines and brings her lived, learned and earned experiences to everything she does. She is speaker, mentor and the founder of Kiilalaana.



Steven Hancock (Kerang) Steven was born in Tamworth, New South Wales, but has lived in Kerang, Victoria, for more than 40 years. He's passionate about the local community and is a keen lawn bowls competitor, having held numerous leadership positions within the sport. He is proud to serve on the MDAS Board.



Damien Murray (Chairperson) (Kerang) Damien has lived in Kerang for approximately 43 years and represented Kerang in different pursuits including football, cricket, golf, lawn bowls and basketball. Damien has spent most of his working life serving the Kerang and Swan Hill communities, but is passionate about the welfare of Aboriginal Communities across the Mallee.



Jemmes Handy (Mildura) Jemmes Handy is well known for her work in health and justice services in the Mildura region over the past 30 years, where she has helped to develop culturally appropriate policing and health services. Jemmes has worked in the education sector on both sides of the river and has also been a volunteer on the Aboriginal Community Justice Panel. She has received numerous high-profile awards for her contribution to Indigenous communities in Victoria, including a Public Service Medal.



Jenene Murray (Mildura) Jenene is a proud Wiradjuri woman from central New South Wales who has worked and lived in this community for 26 years. Jenene has an extensive working knowledge of the education sector and has been employed in this field for over 25 years. Jenene is currently employed as the Koorie Education Coordinator for the North Western Victoria Region (NWVR) Mallee area.



Pearl Dunn Growing up in the Swan Hill and Kerang regions, Pearl is passionate about working together to drive better outcomes for community living along the Murray River. Recently completing a Diploma in Nursing, Pearl is committed to the journey of healing that will support healthy, strong and empowered Aboriginal people.

Chair Report



Vicky Clark
Chair

Reflecting on the last year as Chair, I thank the members of Mallee District Aboriginal Services (MDAS) for trusting the Board to be their voice, fighter and survivor, as we carry out the responsibilities of governing our community's greatest asset across the Mallee.

Members have been very clear in their expectation of us – that we must build and strengthen our organisation – they want a focus on resetting our future, reconnecting our communities by ensuring equal services at all sites, and enhancing MDAS's reputation across the region.

With a Board that is elected from three municipalities, we heard this message and we committed to delivering on our obligations, as one body with many parts, without compromise.

That means ensuring we are a strong and capable business and

service, strategic in direction, and with community control at the centre of what we do. From our various standpoints, we are building an organisation that prioritises the overall wellbeing of our communities, now and into the future.

Being a Board member is an incredible and complex role. Not only do we have to hear the voice of community – we must also hear and respond to our stakeholders and our funders. Although our primary responsibility is to community, we can only meet that responsibility with the cooperation and investment of our partner organisations, at all levels. We are grateful for the support they have provided us with, as we have navigated our way through the past twelve months.

I also wish to place on the record my admiration for the resilience, determination and commitment of staff in all of our MDAS locations. This has been a time of uncertainty and the upheaval you have all experienced over an extended period has been difficult both personally and professionally. And yet, our staff have continued to deliver quality, compassionate services to a community that relies on them to do so. A heartfelt thank you for your loyalty and professionalism during a difficult time.

My fellow Board members have also shared a heavy load of responsibility. It is important to remember that the challenges that have faced MDAS around the Board table this past year have not been the only issues our Board members have had to manage.

Each of us has faced challenges and events individually, in community, and within family, that have tested us. That is a part of life, but I am proud of the compassion Board members extended to each other during difficult times.

They were willing to step up, to do extra and to be understanding in a way that allowed others to heal.

I am proud of how we have moved together as a group to support each other. I am also proud of Board members who faced difficulties but demonstrated resilience, honouring the trust placed in them, and continued to serve the community.

We have had many unexpected challenges during this year – and we know we will face more tests ahead, but I am confident that collectively, we will develop solutions.

The Board will continue to work with the communities of Swan Hill and Kerang, exploring the opportunities for them to determine their own future in their patch of the Mallee.

We invite all our communities to share the journey with us, to give positively and to look at what each of you can contribute to an exciting future. None of this is, or will be easy, that is why we are here.

As a proud Mutthi Mutthi/Wemba Wamba woman, I thank you for your trust in me as your Chair.



Building connections with people

Connections

If last year was about building resilience and strength, the 2021 – 2022 financial year has most certainly been about building connections with people.

Guided by the new MDAS Strategic Plan, our Organisation has remained steadfast in a commitment to become what our Mobs need us to be – a hub that delivers the services and offers the supports they deserve.

Given the difficulties we all faced, as COVID-19 continued to impact our communities, and our ongoing work towards the reformation of MDAS, the 2021 -2022 year was not without its challenges. Difficult decisions had to be made, in line with government directives, but there were also achievements; partnerships were forged and through the dedication of staff and the Board, a brighter future for MDAS came into focus. As a community, we can be very proud of the effort we all put in during the pandemic.

Adopting an all-of-community approach, we developed a partnership with local allied organisations to help protect our Mobs, both through a COVID-19 immunisation program, which saw a huge uptake of vaccinations amongst our community, and other programs that allowed us to continue delivering vital services, even during lockdowns.

The success of these partnerships demonstrated the value of a collaborative approach both for our Organisation and for community, and as we continue to pivot and transform our Organisation, it will be used as the foundation for our growth.

An exciting example of our expanding collaboration is the formalisation of a new alliance with Haven Home Safe. This partnership will deliver benefits to our Mobs for decades to

come, allowing us to transfer our tenants from mainstream tenancy to a community-based support framework. This will provide affordable housing and wrap-around services for all our tenants and beyond that, will give us the capacity to apply for Victorian Government funding through the Big Housing Build initiative. With funding, we will restore and maintain our current housing stock, ensuring the homes are fit for purpose, and developing new housing to add to our portfolio. This partnership, and the undertakings it enables, aligns with the MDAS Strategic Priority 'Create Our Future – Advance Our People and Our Community'. We recognise that access to affordable, secure, and safe housing is a key pillar in the advancement of the health, wellbeing and empowerment of Aboriginal people and families.

As we move forward, we will be exploring other partnership options which will allow us to expand and diversify our service and program delivery while offering our staff the support and additional resources they need to identify and address existing and emerging community needs.

As was highlighted in the opening paragraph, the activities conducted during this reporting period have been driven largely by a desire to establish and rebuild connections with people. We know that without a strong workforce, MDAS cannot provide our Mobs with the services they need, and we also know that after a period of uncertainty, our links to both community and our staff were fragile. This acknowledgement has been the force behind several initiatives and plans that have their foundations in the 2021 – 2022 year. While these will be implemented in the 2022 – 2023 year, much reflection and work has been done this year, in response to feedback.

During times of change, it is normal to focus on the challenges. However,

it is important not to lose sight of the success stories along the way. This year we have seen team members mark up to 24 years of service with MDAS. We have a dedicated staff that comes to work every day committed to making a positive impact. They have worked through COVID-19 and all the other ups and downs and without them, nothing would be possible. We achieved our Quality Innovation Performance Accreditation this year due to the high standard of care and service delivery our team provides. We have a passionate Board who have kept their vision for self-determined, healthy, robust, and culturally strong Aboriginal Mallee communities at the heart of what they do. Most importantly, we have a community, led by the wisdom of Elders, that has kept us accountable, and asked the hard questions. We see you and we thank you.

We would like to remind our community that MDAS is here for you and your families. Aboriginal Community Controlled Organisations, like MDAS, were established by our strong Elders, with a vision to support healthy, resilient, and capable Aboriginal people who live meaningful, self-determined lives. MDAS will not lose sight of who we are, and why we are here. Our history and our future are entwined and we will continue to support the community for years to come. Please seek assistance if you find yourself in hardship.

As an Organisation, MDAS should be proud of the progress it has made over the last twelve months and we can look to the future with positivity, confident that the path we are on will allow us to care for, strengthen, empower, motivate, and guide our Mob.



Our People



OUR PEOPLE

Years of service

At a time when many organisations are struggling to fill vacancies and to retain their workforce, MDAS is proud to have over fifty staff who have been with us for over five years.

Looking to the future, we are committed to being an employer of choice and we will continue to seek ways to not only attract new staff, but to retain the valued members of our team who come to work each day driven by a desire to make a difference.

We thank all our staff for their dedication to community and we

look forward to supporting them as they continue to explore their career pathways at MDAS.

During the 2021 – 2022 Financial Year some of our staff marked significant milestones with MDAS, working over eleven years with our Organisation and we would like to recognise them (and ask them a few questions).

Rhonda McInnes 24 years of service

When did you first begin working at MDAS?
January 1998

What was your first role with MDAS?
I worked on Reception

What is your current role?
I am a KFFE Family Support Worker

What do you love about your role?
I love working with families and seeing them gain their independence, to seeing younger children enrolled in day care and kindergarten and being able to watch them thrive. One of the most significant moments for me in my career was the moment two of my former clients, who I first met when they were both just children, accepted employment at MDAS. That was a real 'wow' moment for me, and I felt so proud.

What value do you see MDAS offering to community?
As we tell our clients, our door is always open and even ten years on, I still have former clients who reach out to me, asking advice and others who have remained connected to MDAS.



Opposite page: Marg and Rhonda
This page: Rhonda

OUR PEOPLE

Nathan Kelly 13 years of service

When did you first begin working at MDAS?
September 2009

What was your first role with MDAS?

I started out as a health transport driver before becoming an Outreach Worker. After this I worked in our Residential Unit for five and a half years, then moved into our Men's Case Management (Family Violence) Program.

What is your current role?

I am now the Coordinator for our Healing Centre at Warrakoo Station.

What do you love about your role?

Being able to support men to get their lives back on track.

What value do you see MDAS offering to community?

I think the range of wrap-around support services we provide are really important and make a difference to our community.



Terry Brennan 14 years of service

When did you first begin working at MDAS?
December 2008

What was your first role with MDAS?

I started as a CJP worker at Bacchus House; it was a 'sobering-up' centre funded by the Department of Justice.

What is your current role?

I am a Coordinator with Social and Emotional Wellbeing Health Service.

What do you love about your role?

I value my role in supporting our community and helping people who may be struggling with substance abuse related issues.

What value do you see MDAS offering to community?

I don't see MDAS as a service provider. I see MDAS as a safe place that offers our family/community/Mob culturally safe, holistic wrap-around supports, for all life's stages – from the womb to the tomb.



Marg Sharman 12 years of service

When did you first begin working at MDAS?
I began work at MDAS in 2010.

What was your first role with MDAS?

I began in the Residential Group Home, which was then in San Mateo Avenue, and then I was part of the move into the current Therapeutic Residential Care Home. It was, and is, a demanding and very necessary role which I loved. It opened my eyes to the importance of Early Intervention and Prevention programs, and this became my passion. It's the reason why I later accepted a role to work in the Early Years Department.

What is your current role?

Parent Capacity Building Service Mentor.

What do you love about your role?

I love that I can learn from my team, and from the community, and the chance this has given me to understand what is important to them, and what their needs are. The training that I have received through MDAS, and my lived experience, has equipped me to build capacity in both staff and families by mentoring and using the knowledge I've gained through my Trauma Informed Care and Secure Attachment training. If we are to care for others, we must also be cared for. Mentoring enables me to support others to reach their potential, this is one of my passions and my job allows me to pursue it.

What value do you see MDAS offering to community?

My reason for wanting to work at MDAS was driven by my belief that we could make a difference in the lives of community members by pulling together and living out the values and ethics that MDAS promoted.

The values of Optimism, Community, Respect for Culture and Compassion have been the guiding force that I have endeavoured to live and work by. If we can honestly offer the community, each other, and our funding bodies integrity, respect and accountability then we will all benefit. I believe MDAS will take the lead in building strong, proud, culturally relevant Indigenous leaders of every age who will work side by side with their non-Indigenous colleagues to close the gap in every area.



Opposite page: Top: Rhonda, Marg & Nathan

Below: Terry Brennan

Group photo: BACK L-R: Joseph Azzarelli, Paul Roberts, Terrence Kuchel, Terry Brennan, Russell Taylor, FRONT L-R Marg Sharman, Rhonda McInnes, Nathan Kelly.



Joseph Azzarelli
13 years of service

When did you first begin working at MDAS?
Early 2009.

What was your first role with MDAS?
IT Helpdesk\Junior Network Admin Support.

What is your current role?
ICT Manager.

What do you love about your role?
I love how IT is the centre of everything. If IT is not working, MDAS and the services we offer comes to a halt. We are lucky in that we get to meet everyone who works at MDAS, and that makes building relationships easier. I also love helping people, so working in a service provider type role such as IT goes well with my character.

What value do you see MDAS offering to community?
Plenty of value! Especially from the Indigenous staff; you can see their passion for community and their dedication to making things better for the local Mob. I believe with the right direction and leadership MDAS will be on track to return to providing community with the support it needs to get back on track to closing the gap.

Paul Roberts
12 years of service

When did you first begin working at MDAS?
I first started working in MDAS in February 2010.

What was your first role with MDAS?
My first role here within MDAS was as a Tobacco Action Worker but I moved into the role of an Aboriginal Health Worker, which is a job I had done previously, when I was working at the Dhauwurd-Wurrung Elderly and Community Health Services in Portland. All up, I have been worked in Indigenous healthcare for the last fifteen years.

What is your current role?
I am currently working as an Aboriginal Health Practitioner, but I am now also learning the Health Management (Clinical) role. I am getting really good support from management so that I can fulfill this role in the future.

What do you love about your role?
I love doing health checks on our community through a series of questions, getting referrals needed for our Mob to see specialists. I really enjoy doing the children's health assessments and seeing the children grow into young adults.

What value do you see MDAS offering to community?
MDAS provides a culturally safe space for all our community, to feel comfortable and to receive ongoing care within the Sunraysia area. MDAS has so many different services which provide overall care, from early years support to care for our Elders.



Russell Taylor
13 years of service

When did you first begin working at MDAS?
October 2009

What was your first role with MDAS?
When I began at MDAS, I had the role of a Justice Worker.

What is your current role?
I am an Aged Care and Disability Support Worker

What do you love about your role?
I get a lot of satisfaction out of working and supporting the Elders and giving back to my community.

What value do you see MDAS offering to community?
MDAS is important in our community because it supports our Mob with culturally based services and keeps culture alive by sharing knowledge and connecting with our Elders.

Terence Kuchel
14 years of service

When did you first begin working at MDAS?
In 2008.

What was your first role with MDAS?
IT Manager.

What is your current role?
ICT Specialist Systems Engineer.

What do you love about your role?
The IT team are the best co-workers to work with, every day is fun and it's never boring.

What value do you see MDAS offering to community?
MDAS has a great range of services to offer the community, and the best part is you can get linked/connected to all those services from the one place.

OUR PEOPLE

Keeping up with the Joneses

MDAS Family

When Derick Jones first began working at MDAS in 2000, which back then was still known as Mildura Aboriginal Service, he never imagined that 22 years later he would be sharing his workplace with four of his children.

“I have always loved learning and working to better myself and that is the great thing about MDAS, it offers so many opportunities to develop and you’re supported to grow. I never told the kids to work here but I think they all wanted the same kind of opportunities I had,” Derick explains.

Derick’s children Tian, Kienan, Shae, and Brodie spent a lot of time at MDAS as they were growing up. They could often be found hanging out with their dad or participating in programs – before school, after school and during the holidays. Sitting around a table with Derick, thinking about those years, they all smile at the memories and say together, as if on cue, ‘we just loved it here.’

“MDAS has always been a welcoming place, we could come in here and feel like we belonged, no matter what was going on outside... Here was like a second home,” Derick says.

“Yeah, I used to fake being sick as a kid, just to come into MDAS, rather than going to school,” Kienan says with a laugh.

The things that first attracted Derick to MDAS are the things that keep him here and clearly, they are also the things that inspired Tian, Kienan,

Shae, and Brodie to find careers at MDAS too.

“For me, working with community, on the ground, is so rewarding. You get to make a difference and really see how that difference plays out in people’s lives, there’s nothing better than that. The work I get to do here keeps me coming back,” Derrick explains.

That said, there are plenty of places that would allow the Jones family to contribute to community, but for them MDAS isn’t just about work, it’s about the way they feel when they are at work. As they take turns speaking, there are common themes; acceptance and a feeling that they are part of something bigger than themselves.

“Connection is so important,” Tian says, “when I am here, I don’t feel judged, there is a sense of familiarity. When I was younger, I was headed down the wrong path and MDAS really helped get me back on track. I am so grateful for that, and I want to do that for other people. I want to support local youth – I’m like dad, I love working on the ground and really making a difference.”

Kienan and Brodie, who both work in Asset Management, love the variety their roles offer.

“Not being stuck behind a desk all day is great,” Brodie says.

And like their father and sisters, they also value the way they have been embraced by all their colleagues.

“Everyone has made me feel so comfortable here,” Kienan says.

Shae, who came to MDAS in 2022, after working with the Country Fire Authority, says she also appreciated the welcoming environment.

“I always wanted to work at MDAS and when I first started here it felt like I was coming home. These walls are the walls of our childhood in many ways,” Shae says with a smile.

Like life, work is what you make it, and Derick has set a fine example for his children. There’s no doubt that he possesses a strong work ethic but his commitment to MDAS and to the community goes beyond that. He is passionate about making a positive impact, to taking a journey with the people he supports and to encouraging them to see MDAS as their meeting place, their safe space. This passion and commitment is clearly reflected in Shae, Tian, Brodie, and Kienan.

“You get out what you put in,” Derick says of his life and work philosophy.

With his kids by his side, Derick is reaping the rewards of time well spent.





Health and Clinical Services



Healthy Art

Health Promotions Art Competition

As the saying goes, a picture tells a thousand words and this year, we challenged local artists to create an artwork that promoted healthy living for our Mob. We were looking for uplifting artistic entries that spoke to the importance of making healthy choices and the impact those choices can have on our future.

We received some stunning submissions, and they were all a reminder of the depth of talent that exists in our region. However, in the end we could only choose two winners.

First place went to Simone Spencer for her artwork, Healthy Mob – Journey

to Healing. Simone says her painting represents our Aboriginal people standing together throughout their health and wellbeing journey – healing together and standing strong – looking towards the horizon with determination and hope for better health in the future.

Simone is a proud Barkindji woman, with a great passion for culture, education, and empowering Aboriginal young people to become the next generation of leaders. Part of an artistic family, Simone has always enjoyed drawing and in the last few years she has extended her artistic skill, experimenting with digital applications.

“I would love to continue to share my art with people and to tell stories through my artwork and my creativity.”

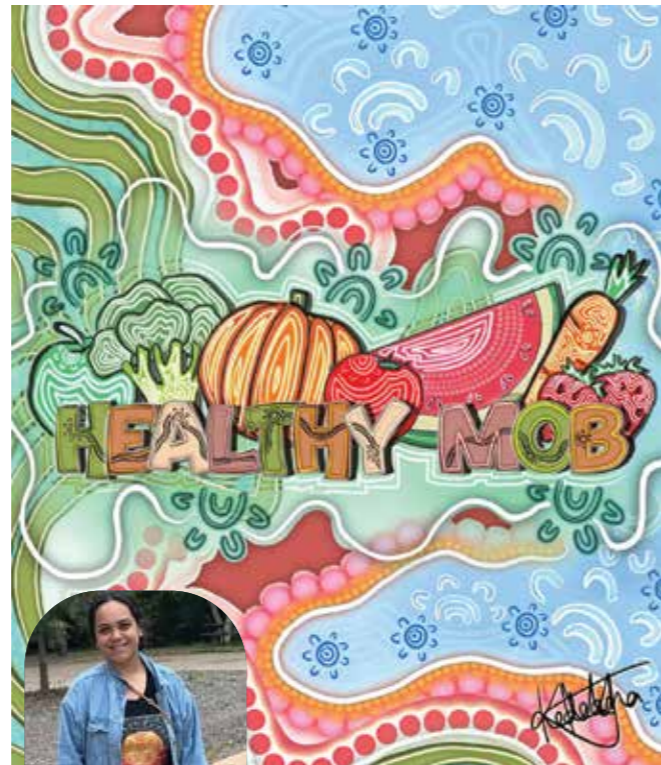
Second place winner was Kedaesha Jackson, who used bright colours to help tell a story around creating better health habits for our Mob and the way those choices can support our families.

Kedaesha is a proud Aboriginal and Tongan woman, she grew up on Latje Latje country and has family ties to the Wiradjuri people. Kedaesha is the oldest of seven children and now with two children of her own, she is passionate about healthy, hopeful futures. The colours she chose for her painting capture this sentiment perfectly.

We congratulate both Simone and Kedaesha and look forward to featuring their prize-winning artworks on MDAS materials in the future.



Simone Spencer
Healthy Mob - Journey to Healing



Kedaesha Jackson
Better health habits for our Mob

Mildura Report

During the 2021 – 2022 financial year we saw many challenges within the health stream. Clearly, one of the biggest challenges was tackling COVID-19 and ensuring our Aboriginal community was kept safe.

Due to repeated lockdowns and the limitations that placed on service delivery, our clinical staff were unable to attend their normal duties until the last five months of the year. As soon as we were cleared to commence, the team quickly got back into the swing of things, catching up on health checks and recalls. The team also re-engaged with Chaffey Secondary College to conduct CLONTARF and STAR health checks on a weekly basis.

The team established a collaborative partnership with Bendigo Health and Sunraysia Community Health Services to provide vaccinations to our Aboriginal and non-Aboriginal community members. This approach enabled staff to provide pop-up clinics and develop a community response team to assist with the delivery of food hampers to the homes of community members who were isolating.

With the support of the Department of Health, MDAS developed a mobile vaccination clinic. We purchased fridges to ensure the vaccines were kept at the appropriate temperature and in collaboration with Sunraysia Community Health Services, Hands up Mallee and the Mildura Rural City Council, we delivered pop-up COVID vaccinations sites in high

density locations, where the data showed there was lower uptake of vaccination. We utilised the MDAS Community Engagement staff to assist with COVID-safe door knocking, to encourage people to get vaccinated. We also began offering COVID-safe transport for those wishing to be vaccinated but without the means of getting to a vaccination hub.

Our data from April to June shows a spike in activity which reflects the vaccination partnership and the support it received from the community, which was largely committed to protecting the health of our more vulnerable members.

Health Promotion

The Health Promotion team highlighted the importance of COVID vaccinations by holding a COVID Information Day. This was about promoting vaccinations in a safe and friendly manner and correcting some of the misinformation that had spread through the community, as a way of encouraging community members to get vaccinated. The Information Day was also an opportunity to provide education in a culturally safe space and allow community members to ask questions and to receive accurate information on a range of health issues.

Once government restrictions allowed, the Health Promotion team re-commenced activities for the community. Preparing for the arrival of the Breast Screen Van was a priority for the second half of the year, as was working to support the Music Festival; the 'It's a Mob Thing

Music Festival' became a valuable showcase for health promotion and healthy lifestyles.

In June we successfully recruited a male staff member to our team, and he will be primarily focused on promoting men's business and working with the Clontarf Program through Chaffey Secondary School. This position will also join the men's group with the Social and Emotional Wellbeing team to assist with men's health promotion and to listen to client stories so that we can ensure the voices of community are embedded in the planning for our strategic health promotions going forward.

In collaboration with Sunraysia Community Health Services, the Cultural Walking Group was established. This is a 12-week program that will run twice a year in February and September. The first program commenced in February 2022, aiming to promote fitness and healthy lifestyles within our Aboriginal community.

Workforce Development and Leadership

Workforce development became a priority for our staff. Our managers and co-ordinators commenced leadership meetings to offer training and support. We have continued to work with the Learning and Development team to identify appropriate further training for managers and staff. We have two staff enrolled in the Masters of Indigenous Management and Leadership at Monash University. We also have MDAS staff who have

Mildura Report

commenced their Certificate III Aboriginal Health Worker training with a view to developing their skills and knowledge so they can take on Aboriginal Health Practitioner roles. As we move into business-as-usual post COVID, developing and sustaining a clinical workforce in health will become the priority.

Preventative Health

Data clearly shows the work our staff in the health clinics have been doing, especially in the improvement of preventative health care provision between December 2021 – June 2022 (post COVID lock downs).

This data will now form the basis for quality improvement projects leading into 2022/23 and beyond.

Topics are:

Tackling Indigenous Smoking

Blood Borne Virus and Sexually Transmitted Disease

Preventive Health

Children’s Oral Health Program

Working Well Together For Health

Aged Care and Disability

The Aged Care and Disability team has been working tirelessly to support the health and wellbeing of our Elders and with demand for service and support growing, we welcomed a trainee Support Worker into our team.

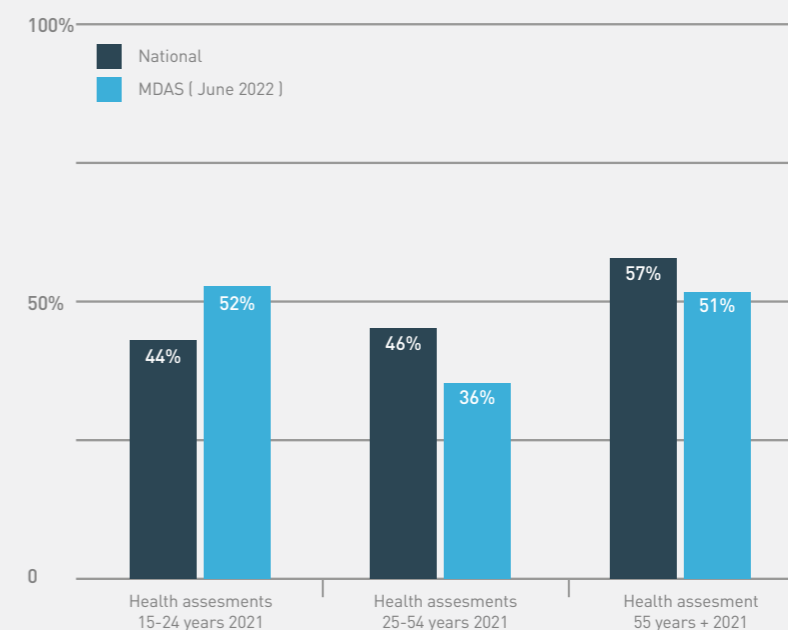
One of the initiatives the team delivers is a support group for the Elders three times per week and the opening of the new Elders Hub, situated at 21 Pine Ave Mildura in April 2022, was a significant advance in the way we can support our Elders. The official opening ceremony had a wonderful turnout from both our Elders and community members. The new Hub has given the Elders a place of their own to hold social group activities and offers them access to MDAS staff for any assistance they may need. Activities at the Hub include art and craft with the Social and Emotional Wellbeing team and specialised visits from national programs.

One of these visiting programs is Let’s Chat Dementia, who share information and resources around

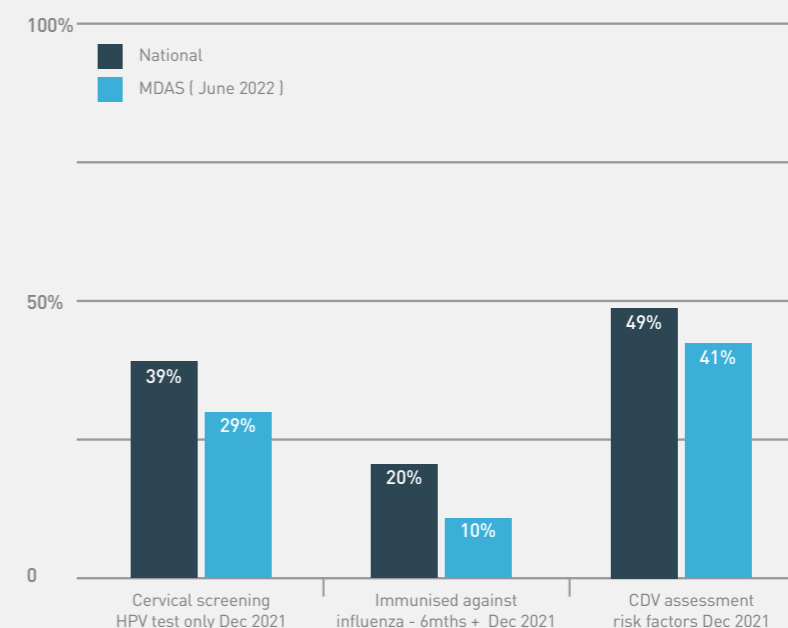
dementia, caring for people with dementia and healthy living. Elders found the information around identifying early signs of dementia useful, they asked a lot of questions and were surprised by the amount of support that is available. Our Health and Aged Care staff also benefited from specialised training and education focused on dementia and assessments.

Finally, in May we were able to take our Elders and students from Dulka Yuppata Centre (TAFE) and Clontarf Academy on country to Lake Victoria. This was an amazing event which gave the students a chance to have a yarn with the Elders and to learn about the cultural significance and history of Lake Victoria. After enduring a lot of isolation over the last two years, this was a special event to be part of, and watching the connection between the students and Elders develop was inspiring. We hope to be able to deliver many more such events in the future.

Health check assessments % National compared to MDAS - Dec 2021



Preventative care % National compared to MDAS - Dec 2021



Creating better futures

Wiimpatja Healing Centre



Wiimpatja Healing Centre is an alcohol and drug rehabilitation program for Aboriginal men who are 18 years and over.

The Centre is located at the remote Warrakoo Station, 115km west of Mildura in New South Wales, on the banks of the Murray River. The program delivered at Wiimpatja offers a wrap-around residential approach, in the fields of health, Alcohol and Other Drugs (AOD) counselling, well-being, living skills, short courses and farm activities.

Over the reporting period, Wiimpatja welcomed Nathan Kelly as our Program Coordinator. Nathan previously managed the MDAS Men's Behavioural Change Program, and he brings important counselling and men's support skills to the team. Nathan was quick to put his experience into action, establishing group and one-on-one sessions, during which the men are encouraged to connect and share

their personal journeys. It's clear that the men have valued the opportunity for meaningful discussion and have benefited from the knowledge that someone is there to simply listen to them.

To further complement the one-on-one and group sessions, we developed a connection project that allows the men in our program to talk with family via video link. Being able to see their family members while they are talking to them helps them to reconnect and build on their relationships.

During the 2021 – 2022 financial year, Wiimpatja supported eighteen clients to complete a twelve-week program, with two of these clients choosing to extend their stay for a further twelve weeks. During the same period, we can only report one breach and for a range of reasons, four clients were not accepted into the program.

It is through the journeys our clients take that we truly see the impact that the Wiimpatja Healing Centre can

have, not only on the individuals in the programs but on their families and friends. John commenced the program during the 2021 – 2022 year and his world looks decidedly different now, compared to what it looked like when we first met him.

John is in his 30s, he is single and has two children who live with his ex-partner. A qualified auto electrician, John has completed three years of a mechanical apprenticeship. Like many people, John began using drugs when his life was spiralling out of control. He got himself in trouble with police as he battled with alcohol and drug issues. As a direct result of his behaviour, John's relationships with his immediate family became strained. John ended up receiving a prison sentence, but he has always said that his lawyer and his mother never gave up on him, constantly encouraging him to 'change his ways.'

Through the court, John was referred to Wiimpatja to complete a three-month program. Initially, John was



quiet, but perhaps fuelled by the faith his mother and lawyer placed in him and driven to be defined by more than his mistakes, he slowly began to open-up. He shared his story with honesty, taking responsibility for his decisions and 'wrong doings'. John spoke at length about his issues and as he continued to talk, the team started to notice changes in him. As his three-month program was ending, John expressed his desire to extend his time at Wiimpatja. He said it was making a positive difference to his life and in his own words, he explained that he was 'tired of being broke, looking over my shoulder, doing the wrong thing and mixing with the wrong crowd.' John missed his children and his family, and he was determined to make the changes he needed to make to turn his life around.

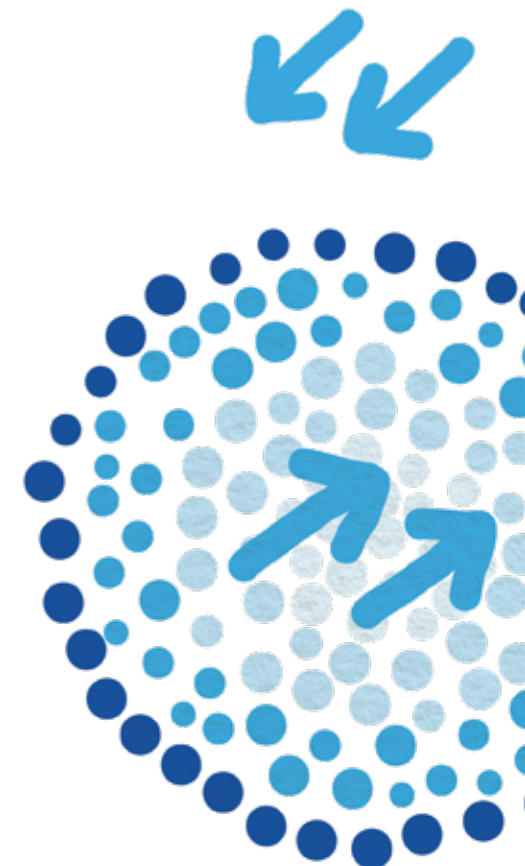
After seven years of estrangement, through the duration of the program, John has reconnected with all his family. Having had no contact with his young children for two years,

we were able to set up video link calls that enable him to see and talk to them and begin the process of re-establishing a meaningful relationship.

In yet another sign of his commitment to change, John has engaged with all visiting programs and has completed some NSW TAFE courses. He is also working towards regaining his driver's licence.

John was ready to make change and he was willing to dedicate the time and effort required to achieve this. Believing he still had work to do, he self-referred himself for a further three months with us, and at the completion of that, he would like to be employed at Wiimpatja as a casual farm worker.

John is now a different person, both in his manner and in his approach to life, and all his family, but particularly his children, will reap the benefits of this.



Social and Emotional Wellbeing

The past 12 months have thrown many different hurdles in the path of the leadership team, SEWB staff and our community. From COVID restrictions and mandates, to staffing shortages, there hasn't really been a down period for us, as we strove to continue providing consistent service delivery to our clients and community.

As we forecast in last year's Report, during this financial year we commenced the development of a new holistic approach to our service delivery – the POD system – and all the SEWB staff in Mildura embraced the change process, keen to make the adjustments that will ultimately improve the service we offer our community. As with all change, we encountered some challenges along the way, however, at the end of the 2021 – 2022 reporting period, we feel that our new approach is working and that we are witnessing the positive impacts it will have on our participants' lives.

Whenever anyone talks about Aboriginal organisations, they talk about the importance of holistic and wrap around service delivery. Our new POD system reflects this model, providing integrated services, with a no-wrong-door approach.

The reality is when people come through our doors at SEWB they will generally have multiple issues impacting their lives, and our POD system addresses these complexities. We have eliminated

a siloed working environment and transitioned to a cohesive working arrangement with teams (pods) of staff, with a range of skills, working together to support participants and providing the services they require to address the various issues they are dealing with.

Mental Health

Our team within the mental health space has continued to experience challenges throughout the past 12 months. Their main priority was to establish methods for supporting clients in a clinically safe space, considering the ongoing pandemic, while ensuring it was also a culturally safe space that would allow our clients to connect, learn, and progress along their individual healing journeys. In partnership with the mental health unit at the Mildura Base Public Hospital, we have expanded our demonstration program, streamlining the process by which our clients can access specialised supports and other extra services. The recruitment of our Clinical Practice Lead, Aroha Shuttleworth, brought a vast range of knowledge and experience to our team, and her guidance has seen improvement to our service and to our staff mentoring program.

Alcohol Other Drugs (AOD)

The AOD team exceeded all their milestones this year, despite the challenges of staff shortages and COVID-19 restrictions and lockdowns. The team were noteworthy in the way they banded together to ensure the integrity and consistency of our service delivery. Like all

programs, transitioning to the new service model required some adjustment and problem-solving but the team embraced these things as opportunities rather than as challenges and the result is a cohesive team that is providing improved care for their clients.

Homelessness Support

Our Homelessness Support team was significantly impacted by COVID-19 and staff shortages and at one stage, we had no available workers within the team. However, the broader SEWB team remained positive and as the POD model began roll-out and COVID-19 restrictions eased, we quickly attracted staff.

It is pleasing to report that as the 2021 –2022 financial year ended, Homelessness Support was fully staffed, with a highly skilled and capable Team Leader in place. The team is working hard and focusing on supporting members of our community who are experiencing homelessness and in need of assistance to find emergency or short-term accommodation. While we don't manage a housing portfolio, the team can also help community members to apply for private rental accommodation and public housing and we are seeing increasing demand for this type of assistance.

During the past year the demand for homelessness support has escalated at concerning rates. Like all states, Victoria has a dire housing shortage, and this is further compounded by rising living costs. Life for those on low and fixed social support incomes are particularly impacted and

unfortunately, we are seeing more people in need of programs like those offered by the SEWB teams.

We would like to acknowledge Trish Watson for the dedication she has shown to the Homelessness Support team. After almost ten years with the team, Trish recently accepted a new Team Leader role within SEWB. Her contribution to the Homelessness team will long be felt and we look forward to supporting her in her new role.

Koori Women's Diversion

This program has encountered many of the same challenges as our other programs but again, they have worked hard and exceeded milestones, continuing to provide support to community. Koori Women's Diversion is a program designed to assist women who encounter the justice system, this includes supporting them through the court process, taking them to and from court, and to all court related appointments. Ultimately, the objective of this program is to reduce their client's contact with the justice system and to help them make the changes that will better their lives.

Koori Men's Diversion

Implementing a pilot program is always an interesting, particularly when it is one that can have an enduring impact for our men in the community. Designed to provide support to our men going through the justice system, with the goal of helping to reduce their ongoing contact with law enforcement, this program is critical for our future.

Fully operational and accepting clients since December 2021, the positive support structures and flexibility that are embedded into the program, have allowed the team to ensure our men are receiving the support they require, when, where and how they need it, to help them build better futures for themselves and their loved ones.



Social and Emotional Wellbeing

Dreamtime at the G

In April, the male staff members of SEWB decided that some of their clients, who had been consistently attending our men's group, deserved recognition and a reward for their commitment and this decision led to a trip to Melbourne to be part of the Dreamtime at the G.

During the planning discussions, there was a desire to ensure the trip was about more than football. As a result, the team connected with Allan Thorpe of Dardi Munwurro and together, they arranged for the men to visit the Dardi Munwurro Rehabilitation Centre in Preston, while they were in Melbourne.

The purpose of the visit to the Centre was to introduce the men to the options that exist for support and service pathways outside the Mildura region and to give them the motivation and encouragement to continue making positive change in their lives.

As a group, they spent a full day at Dardi Munwurro, and were able to mingle with participants from a range of organisations at the Aunty Alma Thorpe Gathering Place. They joined in a yarning circle, which proved to be one of the highlights of the day for both our clients and staff; the opportunity to share experiences and exchange ideas was beneficial and greatly appreciated.

After leaving Dardi Munwurro, our group attended the Friday night Carlton v Sydney game and then spent Saturday morning exploring

the city, discovering a 'fancy' café, which was unanimously chosen for the lunch venue. After 'fueling up' it was time to become part of the Dreamtime at the G experience.

The group joined in the festivities at Federation Square and then participated in the Long Walk to the MCG ahead of the big match. Being part of the Dreamtime at the G and visiting Dardi Munwurro had an impact on all our clients and despite the challenge of temptation, they supported each other and came away stronger, individually and as a group. Indeed, one of our clients, a long-term drinker who was committed to 'cutting back', did not have so much as one drink during the trip, even when a stranger gave him a drink to hold.

The Dreamtime at the G trip created bonds and opened the group's eyes to the opportunities that exist, and the experiences that they can have, when they commit to making their wellbeing a priority.

In closing

We have seen the SEWB programs work seamlessly together in the POD model and the benefits to community are already evident. The success of the new model is a testament to the SEWB team and their dedication to providing the quality services our community needs. Their approach should be recognised both for the outcomes they've delivered and for the better future their work offers to the SEWB program and the people it will continue to support.

Mental Health Demonstration Project:

169 referrals
63 currently active

Koori Women's Diversion Program:

17 referrals
10 currently active

Koori Men's Diversion Program:

(Since Jan 2022)
19 Referrals
11 currently active

Housing:

144 Episodes of Crisis Accommodation
80 currently active

Family and Community Services



Out of Home and Kinship Care



COVID-19 continued to affect the Out of Home Care and Kinship Care space during this financial year but the team worked hard to support families to maintain connections, even when lockdowns prevented face to face contact.

Among the initiatives the team led were hamper and meal deliveries, assistance with COVID-19 testing, and phone and video contact for families when visits had to be postponed. With many of our young people struggling to remain engaged with school during online learning, we made the decision to register them with the Home Base Program. This proved successful in giving the young people assistance with their schoolwork, and access to activities and wellbeing support.

The facilitation of video calls and phone calls, while not the same as in-person contact, did alleviate some of the isolation and distress that was being experienced in our community.

Case Study One

A young mother living with an intellectual disability and mental health issues, had enjoyed regular supervised visits with her young son but a week prior to her son's third birthday, a Lockdown was implemented which meant she would not be able to see her son on his birthday.

The mother was distraught, and her mental wellbeing was clearly being exasperated by the situation. Our team were able to mitigate this by delivering a cake and gift to her son, on her behalf, and we also arranged for the mother and son to have a video call on his birthday.

Case Study Two

A similar scenario played out with a 13-year-old boy who had been having weekly contact with both his parents and it was something the whole family looked forward to. Unfortunately, the boy's birthday was caught up in a Lockdown and both he and his parents were struggling

with this. Our team arranged for both parents to have phone contact with their son on the day of his birthday, which eased the sense of isolation and disconnect they were feeling.

As the calendar year ended, restrictions eased and our team decided to host a lunch for all our carers and children in care, to acknowledge the support they had provided during extremely trying times. The lunch was well-attended, with many of our families grateful for the opportunity to gather, share their stories and reconnect. One of our carers had experienced some significant difficulties during the year and our team reached out to offer her additional support and MDAS sent her a bouquet of flowers and a card.

Reunification

MDAS received a placement referral for a three-year-old boy from the Department of Families Fairness and Housing (DFFH) in late 2020, after concerns were raised about his health and wellbeing, and the drug and alcohol issues related to his mother.

Soon after he was placed with one of our carers, the young child showed improvements; he recommenced childcare and was taken to all his medical appointments. While the required support and care was being given to the child, his mother was also provided care and assistance. She was referred into various programs, which included the MDAS Counselling and Family Reunification programs, and supported by her Cultural Case Worker, the mother started to engage with programs and regular contact with her child was re-established, and from this, a positive relationship was built.

Slowly, we increased the number of contact days the pair shared and once the bond between the mother and child had strengthened, and it was deemed safe, we facilitated 'sleepovers', where the child would stay overnight with his mother. Committed to turning her life around, and to being the parent her son needed, the mother achieved all her goals. With the support of MDAS, a year after he was first placed in Out of Home Care, her son was returned to her permanent care, with improved health, speech and social skills.

Service leads to reconnection

A maternal grandmother had taken on the role of Kinship Carer for her two young grandchildren. The MDAS Case Worker assigned to the children became aware that the grandmother was reluctant to utilise MDAS Health Services due to previous negative experiences, opting instead to use 'mainstream' health care to meet her grandchildren's needs. Over time, the Case Worker was able to change the grandmother's view of MDAS, as

she developed an appreciation for the professionalism and support that both she, and the children, benefited from in their ongoing interactions with the Case Worker and MDAS. During this reporting period, the grandmother has utilised MDAS Health Services for all the children's health care.

A fresh start in a new home

A young teen found himself in Out of Home Care when his mum became homeless. She was given temporary accommodation, but it wasn't stable and nor was it appropriate for her son. On seeing the boy's distress, MDAS immediately began to develop a plan that would allow him to be reunited with his mother.

We successfully applied for the mother to be approved for a unit in MDAS Meminar. While this gave her a safe and stable home, because of his age, her son was not immediately approved to join her. After several meetings, it was arranged for her son to undertake some training and a MARAM Risk Assessment. Upon completion of these two steps, a respite arrangement was implemented that allowed him to stay with his mother at Meminar, while professionals assessed their situation and sought to identify any risks or needs that would have to be addressed. Once this phase was complete, DFFH applied to change the Out of Home Care Court Order that had been put in place for the teen, to a Family Preservation Court Order.

A few months later, with the help of DFFH, the boy's mum got her own house, and he now lives in that home

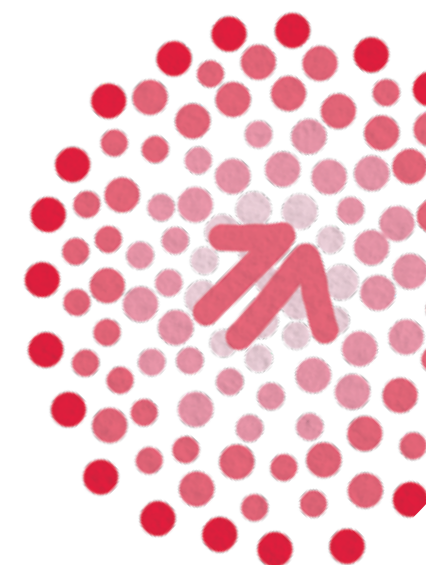
with his mother and his younger siblings, and his future is much brighter.

This story has meant a lot to our team – being able to support the reunification of a family and to see the impact it has had on a young boy who had been in crisis, was extremely meaningful. His mother has expressed her gratitude to MDAS for the support she and her son were given.

Permanent Care

Two of our children in care transitioned into permanent care with their kinship carers after a lengthy assessment procedure. The families and the children are all now happy together and grateful for the support they received from MDAS workers during their journey.

We have successfully had two more carers approved for permanent care of the children they have had in their care, and this will be finalised by the Court in the upcoming months.



Family Services

Building capacity and supporting positive outcomes

Early Years

Like all departments, June 2021 – June 2022 was a very testing time for the Early Years team; with COVID lockdowns and changes in management and office relocation, the Early Years Team really had to work together to adapt to a change in delivery style, and a change in leadership expectations. Despite this, the team were able to keep striving for great outcomes for our clients. Each of the Early Years departments made notable achievements during the financial year which should be celebrated; some of those are:

KFFE (Koorie Families as First Educators)

Perhaps more than any other Early Years Department, the KFFE were tested as a team. They experienced a range of changes including a new office, altered operational procedures and leadership movement. Despite these difficulties, the KFFE team still had successes.

- The KFFE team worked with their managers and coordinators to really familiarise themselves with the guidelines of the program and began implementing changes to better reflect what was expected of them from a funding bodies perspective. This is something they will continue to work on over the next twelve months while continually striving for best practice.
- The KFFE staff all completed the Bringing up Great Kids Facilitator Training. This is a parenting capacity building workshop that will be offered to families in our community.

- The KFFE staff all completed Circle of Security Facilitator Training – this is now being delivered to clients who are engaged in the KFFE program.
- KFFE Staff assisted with NAIDOC celebrations; they ran workshops at the MDAS NAIDOC event at Nowingi Place and provided all children involved in Early Years programs with a custom NAIDOC shirt.
- KFFE staff have been working on promoting the program to hospitals and other government organisations, including the Mildura Rural City Council Early Years team.

KPSA (Koorie Pre-School Assistant)

KPSA is a long-standing program that has flown under the Department of Education's radar for many years, without clear guidelines. When our KPSA started in June 2021, she found few resources to support her work beyond colouring-in sheets. Wanting more clarity around the program and the resources that could be accessed, the MDAS KPSA met with the Department of Education Early Years Advisor and on learning what was expected of MDAS and KPSA role, she got to work. In twelve short months, the KPSA successfully did the following:

- Joined an advisory group that shapes the KPSA guidelines for the entire state
- Created a recording tool that was shared statewide to improve service delivery
- Strengthened relationships with all 55 registered kindergarten groups

- Created a Cultural Resource Tool that was distributed to all funded kindergartens in the Mallee. The pack contained a contact list for key community stakeholders available for advice when working with Indigenous peoples; it included representatives from MDAS, Elders, Department of Education staff and other key community members. The pack also contained language posters and Department approved Indigenous learning resources to encourage educators to instill Indigenous Education into their curriculums, along with program information, referral forms and a calendar of key dates for Indigenous peoples.

- The KPSA also developed two new initiatives to assist in the kindergartens in the Mallee district:

- 1) Kindergarten Start Packs: each Indigenous child enrolled in a funded Kindergarten program for 2022 received a school bag, a lunch box & a water bottle to start the year with.
- 2) Kindergarten Convenience Packs: Each funded kindergarten room in the Mallee was supplied with convenience packs for children at the centre. The packs contain two changes of clothes and snacks for children who may not have been sent to kinder with food for the day. The convenience packs were restocked with clothes once a term, and as needed for snacks.

Both initiatives were greatly appreciated by the kindergartens.

Playgroup

MDAS Playgroup is a safe place for parents and their children (0-8 years old) to feel supported and connected to their community. In March 2022, we had a new facilitator start at MDAS and she has worked tirelessly to provide the best service possible to our clients. Some of the key achievements to be recognised from our Playgroup program are as follows:

- Our playgroup facilitator has had regular peer support meetings with the MDAS Early Years team in Swan Hill; as a result, she was able to instil structure into the Playgroup, ensuring all families have a comfortable environment. The sessions are:
 - Mondays: Sensory Days for Mums and Bubs – generally under 4 years old.
 - Wednesdays: Cultural Days: open to all ages
 - Fridays: School Readiness Day – open for children 4 – 8 years old.
- Our playgroup facilitator was on the MDAS NAIDOC Committee, as a representative for the Early Years team. She filtered back information from the meetings to ensure the Early Years Team were aware of arrangements and she assisted the Committee Chair in ensuring that all NAIDOC celebrations were enjoyable for staff and community members.
- Our playgroup facilitator has worked on building relationships with all staff and families who attend playgroup. She endeavors to empower our parents with

culturally safe activities that will enable them to be their children's first teachers.

In summary, the MDAS Early Years team experienced many challenges during the reporting period, but this did not stop them from providing an outstanding service to our community. The Early Years team is strengthened by a balance of fresh new faces and longer-term staff, and going into the next financial year, without a doubt, they will deliver great outcomes for our community.

HIPPY Program

HIPPY is a Home Interaction Program for Parents and Youngsters; generally, this means our HIPPY tutors make weekly visits to the homes of clients, providing face-to-face support.

However, due to COVID-19 lockdowns, home visits were not possible for large periods of the 2021 – 2022 financial year and this created challenges. During lockdowns, the HIPPY program was delivered over the phone, but this undoubtedly impacted its outcomes and highlighted the importance of in-person program delivery.

The latter half of the reporting period saw an influx of new staff and the team was reinvigorated and full of enthusiasm for change. The new HIPPY team, which consists of two tutors and a Coordinator, started in March 2022. The new team realised that because of the pandemic and the lack of in-person contact with clients, the program had lost its family client base. However, rather than seeing this as a problem, the new team saw it as an opportunity to reinvent the program.

Some major accomplishments for the HIPPY team are as follows:

Between March and May, the HIPPY team were able to successfully engage twenty new families and they have all excelled in the program

The HIPPY Coordinator is now running weekly tutor training

HIPPY Australia site advisor has since observed a HIPPY tutor training session and gave outstanding feedback. She commented, **"This is the best tutor training I've seen in years."**

HIPPY has formed many new partnerships with external organisations, including the Enchanted Treehouse Play Centre (this space is being utilised to run family friendly group meetings), The Family & Child Hub, Head Space, Mallee Family Care, Speech Pathology Australia, Hands Up Mallee & Parents Next at Axis Employment.

HIPPY Coordinator attended the HIPPY National Gathering in the Gold Coast in May – she was able to form many new connections with other HIPPY sites and has joined a HIPPY Community of Practice group – this works in a similar way as the MDAS peer support with other HIPPY sites across Australia

This year our team has worked alongside 108 families, supporting parents to overcome issues and build parenting capacity to ensure a nurturing safe and stable home and we have seen positive outcomes for our families.

Family Services

Building capacity and supporting positive outcomes

HIPPY Australia conducted a site visit to ensure MDAS is implementing the HIPPY model correctly and the review commended the efforts of the new HIPPY team;

HIPPY has been involved in numerous MDAS Community Events including NAIDOC Week activities

HIPPY has transitioned to a 100% electronic system to ensure we have adequate time for exceptional service delivery.

HIPPY has conducted group meetings each month with good attendance rates of clients and guest speakers

The HIPPY community (inclusive of staff and clients) are achieving great things. MDAS and HIPPY Australia have agreed on a Developmental Plan, and we will see more advances made in this space over the next twelve months.

“The MDAS HIPPY team is an excellent representation of the HIPPY model with tutors and clients.”

Family Services

Family Services promotes the safety, stability, and development of vulnerable families, with a focus on building capacity and resilience for our communities in a culturally safe manner. Our aim is to provide services to protect children and young people and improve family dynamics with a strength-based approach and a focus on earlier intervention and prevention.

Family Services deliver Integrated Family Services, Intensive Family Services and the Family Preservation Reunification Response Program which are offered both in a voluntary space and a statutory space.

There have been some exciting changes within the Family Services sector, not least of which was the roll-out of the Family Preservation Reunification Response Program which launched in November 2021. Initially it was slow to start, due to staff shortages and recruitment challenges, however, we are pleased to announce that we now have a full team supporting all our programs.

The number of families and hours of support MDAS provides them has increased significantly, with case workers ensuring more of a collaborative approach, engaging with other MDAS programs and external services, to provide a wraparound support network, whilst empowering our families to make and sustain change.

Youth Services

Youth Services delivers several programs to support better outcomes for our young people. These programs include Youth Justice, Youth Support Services and Early School Leavers. These programs help in a range of settings; supporting youth who are part of the Justice System (Court Ordered), youth on diversion (intervention stage) and young people disengaged from school.

This financial year the team were able to exceed their KPIs by delivering a service to more than 150 young people.

When COVID restrictions were lifted, the team was able to facilitate face-to-face home visits with a much more efficient approach.

In addition, we were able to facilitate school holiday programs which attracted more than 100 young participants, aged between ten and sixteen. One of the highlights was an On Country trip with our local Elders. We had over thirty young people attend the day, and they benefited from storytelling and guided tours with the Elders.

There is a lot to be hopeful for in the coming year, with a new Youth Hub Space in development which will give our youth a space to ‘chill out’ in a safe space and a full team of reinvigorated staff ready to support the futures of our young people.

Family Violence

Using culture to heal and change behaviours

This year the Men’s Family Violence Team utilised culture to heal, educate and change behaviours as a means of promoting healthy and safe relationships.

Part of our approach included bringing younger people into the conversation around family violence. To support this, we appointed an Adolescent Family Violence Worker to provide assertive outreach to young Aboriginal people and their families. We focus on the young person’s relationship with their family and community, recognising that behavioural change can only occur when individual support is delivered within the broader family and community context.

Our Cultural Healing Program is an addition to our suite of men’s case management services and has been running weekly. Through this face-to-face program, we offered a range of engagement activities, including culture camps, cultural outings, and men’s groups.

Like many of the programs and services delivered by MDAS, COVID restrictions impacted the way we could engage with clients and reduced the number of participants we could support in a group setting at any one time.

By way of example:

Men’s group:
Pre-COVID: 10-15 clients
During COVID: 6-8 clients

Culture camps:
Pre-COVID: 8-12 clients
During COVID: 5-8 clients

Cultural outing on land:
Pre-COVID: 10-12 clients
During COVID: 5-8 clients

The team showed great resilience during the COVID phase of the year, juggling the complications of reduced staff and the limited capacity to deliver programs. Open to adaptation, the team changed the way they did things to ensure they could still connect with clients, and this included regular phone contact. Activity highlights were the cultural outings on country and later in the reporting period, with the easing of restrictions, the NAIDOC celebration was a great success.

Program in the Spotlight

Provided in both Swan Hill and Mildura, our seven-week Adolescent Program supports young males who are impacted by family violence.

The Program focuses on:

Cultural identity and the bridge to manhood for adolescents who are experiencing family violence and respect for family members, Elders, and community.

Connecting spiritually and emotionally on country

Open discussion around the impact colonisation has had on culture



Swan Hill /Kerang Annual Report

Swan Hill - Kerang



Whilst COVID-19 continued to impact us over the past twelve months, the Swan Hill and Kerang teams maintained a positive mind-set and sought innovative ways to ensure they continued to support our community.

We adapted our service delivery and drew strength from those around us. In the latter part of the year, as restrictions lifted, our teams pivoted once more, re-establishing our more traditional methods of supporting and engaging with clients. We can proudly say that as the financial year ended, we were supporting more people, seeing the benefits of new programs and successfully applying for funding to further enhance our services and engagement activities as we go forward.

Community Engagement

As COVID -19 restrictions began to ease in the second half of the reporting period staff and community embraced the opportunity to re-connect. The MDAS Swan Hill and Kerang teams held a range of community events and through these, we have witnessed an increase in clients utilising our services.

Our community engagement focused on celebrating culture and encouraging connection and included events to mark Reconciliation and NAIDOC weeks this year, which both began with a Welcome to Country and flag raising ceremony. Our staff also arranged community morning teas, cultural community days, Welcome Baby to Country events, Elders' luncheons, and celebrations for the Indigenous round of football. Our communities have shared in the sense of isolation brought on by COVID-19 restrictions and the events we could deliver, particularly in the latter half of the financial year, were well attended,

with numbers exceeding previous years. It is our hope, moving forward, that we can capitalise on this and provide more opportunities for connection and that we will continue to see our communities participate in greater numbers.

Perhaps one of the highlights this year was the Kutcha Edwards event, 'Circling Time'. Uncle Kutcha Edwards is a well-known Aboriginal singer and songwriter, and he brought his latest show to Kerang and Swan Hill as part of the celebrations marking Reconciliation Week and NAIDOC Week.

Uncle Kutcha says when writing and performing his songs, he is inspired by all those who have gone before him on this land, and by his own life experiences, and he uses his music to help his audiences understand themselves, reconnect with their culture and promote cultural understanding.

Health

During the 2021 – 2022 financial year, Ami Johnson was appointed to the role of Health Service Manager of Swan Hill and Kerang Health Clinics and initially, her focus was largely on keeping community safe, as the pandemic continued to impact every-day life. As part of our response to COVID-19, Ami and her team delivered a total of 4,007 vaccinations across both our Swan Hill and Kerang sites. This figure includes a large percentage of our Aboriginal community who received their 3rd and 4th doses and reflects the work the team dedicated to reaching out to our Aboriginal communities, informing them of the importance of vaccination and allaying the concerns that some community members had.

It is also pleasing to share that health checks have increased over the reporting cycle, with an average of twenty checks completed per month and this growth appears set to

continue. Our Chronic Health Program has also seen consistent gains, with the team supporting an increasing number of clients, living with a chronic illness, who have begun accessing our services.

Our Health team achieved Accreditation this year, having met all our health service compliance safety and quality standards. Moving forward, the team will focus on developing continuous quality improvement strategies to promote safe, and high-quality healthcare for our Mob.

Allied Health

Our Allied Health services have continued to experience excellent attendance. We now have an Optometrist supporting MDAS clients with extra visits as required, a Speech Pathologist visits for a full day on a weekly basis, attending the early years playgroup with education and resources, liaising with staff, and working with us to support young families. In addition to this, no longer constrained by COVID-19 restrictions and mandates, all our other visiting providers, including podiatrists, audiologists, physiotherapists, and dieticians have resumed regular services through our Clinic. Further to this, it is pleasing to report that all our Allied Health Service Agreements have been renewed for the 2022 - 2023 financial year.

Swan Hill /Kerang Annual Report

Social and Emotional Wellbeing

Our SEWB team is committed to improving the mental health, and social and emotional wellbeing outcomes for Aboriginal and Torres Strait Islander individuals, families, and communities. The impacts of COVID-19 lockdowns and other associated pressures have made the work of the SEWB team more important than ever.

The team has worked diligently within community, attending planned activity groups and men's yarn ups and as soon as restrictions would allow, they re-established partnership arrangements. They partner with Headspace, assisting their staff with activities, and they have also entered back into local schools, providing cultural awareness and holistic wellbeing support to students. The team has completed valuable training programs such as Aboriginal Mental Health Accreditation, the Marumali Program (a culturally informed healing program designed to enhance supports for Stolen Generations), Trauma Informed Therapy, the Journey of Healing Model, and Narrative Therapy. The team has a large client caseload and with the increasing referrals, the new financial year will see recruitment begin for a new AOD Worker and a new Support Worker to provide additional support.

Health Promotion

Health Promotions Kerang continued to raise awareness about the importance of health care and to develop and share resources to assist with community health needs. They formed a partnership with Breast Screen Victoria and VACCHO to bring the Victorian Breast Screening Van to our region. The Van visited our three sites and was very well received by community. Each participant was given a beautiful shawl, designed by a local artist, to assist them in feeling culturally safe whilst having their screening.

We followed the Breast Screening with a special women's pamper day which allowed our staff to further connect with community while giving the women a chance to enjoy some well-deserved time out and pampering.

We have worked hard to re-establish a Health Promotions team in Swan Hill and as we look to the new financial year, the focus will be on developing partnerships, including an identified opportunity to partner with Coles to deliver SecondBite in our region. Several community health promotion events are being planned, and education and training opportunities, that will assist our health staff to achieve better outcomes for community, are also being researched.

Building our workforce

During this year, three of our Aboriginal Health Worker trainees achieved their qualifications and one Aboriginal Health Practitioner also attained qualifications and this has had a notable impact on our Clinic, in terms of service delivery. We are extremely proud of the commitment these staff made to progress their careers and to offer care in our community.

Securing a full-time doctor for the Swan Hill Clinic has proved challenging and we have relied on locum providers. This is costly and the lack continuity has a direct impact on care for our clients. We have commenced work on a recruitment strategy to address this issue.

A positive for our MDAS service delivery was the recruitment of two transport officers. This has been a great benefit to the Clinic, and the community, as it provides transport for people who may otherwise not attend our Clinic due to a lack of transport. The result has been an increase in clients accessing our health services and we know that this can lead to better long term health outcomes.

Elsewhere, we continue to recruit, implement partnerships and, most importantly, look to grow the skills and qualifications of our own team and community to build a self-sustaining health practice model.



Swan Hill /Kerang Annual Report

Family Services

Kimberley Bacon was appointed to the Family Services Manager role, in a full-time capacity. Kimberly and her teams are working hard to promote the safety, stability and development of vulnerable children, young people, and their families.

In the Out of Home Care space, we had multiple children move into permanent care over the last twelve months and we also implemented a new program that we believe will deliver great benefits to children and families in our community. The new program, Family Preservation and Reunification Response, aims to provide more preventative services to families who are at risk of having child protection involvement. We have already seen a decrease in referrals to the Out of Home Care program as the number of Aboriginal children requiring care outside their family home has reduced. This is a great outcome and shows that the work we have been doing in the Family Preservation and Reunification Response is having an impact.

The team has also submitted a funding application to support another 'Camp Jungai', a site-based cultural education experience. We've previously seen the benefits of the camp for our young people and hope we can continue to emulate the success of the camp going forward.

New Partners

A new partnership agreement was signed by Kerang MDAS, Gannawarra Shire, Northern District Community Health, Kerang District Health, Cohuna District Health, Victoria Police, Mallee Family Care and Bendigo Health. The partners have worked together successfully for many years. The relationship between us is strong and the Partnership Agreement articulates our principles and recommended approach to working together. The signing of this agreement was another positive step toward reconciliation with our partners and stakeholders. It also shows respect for Aboriginal heritage and the ongoing relationship of the Traditional Owners of this area with their land.

Funding

In November 2021, Kerang applied for, and received, a funding grant of \$136,420 to refurbish the shed at 11 Nolan Street. The aim of the project was to create a meeting space where Elders and community can gather and yarn, where they can share their culture and stories with younger generations and strengthen connections.

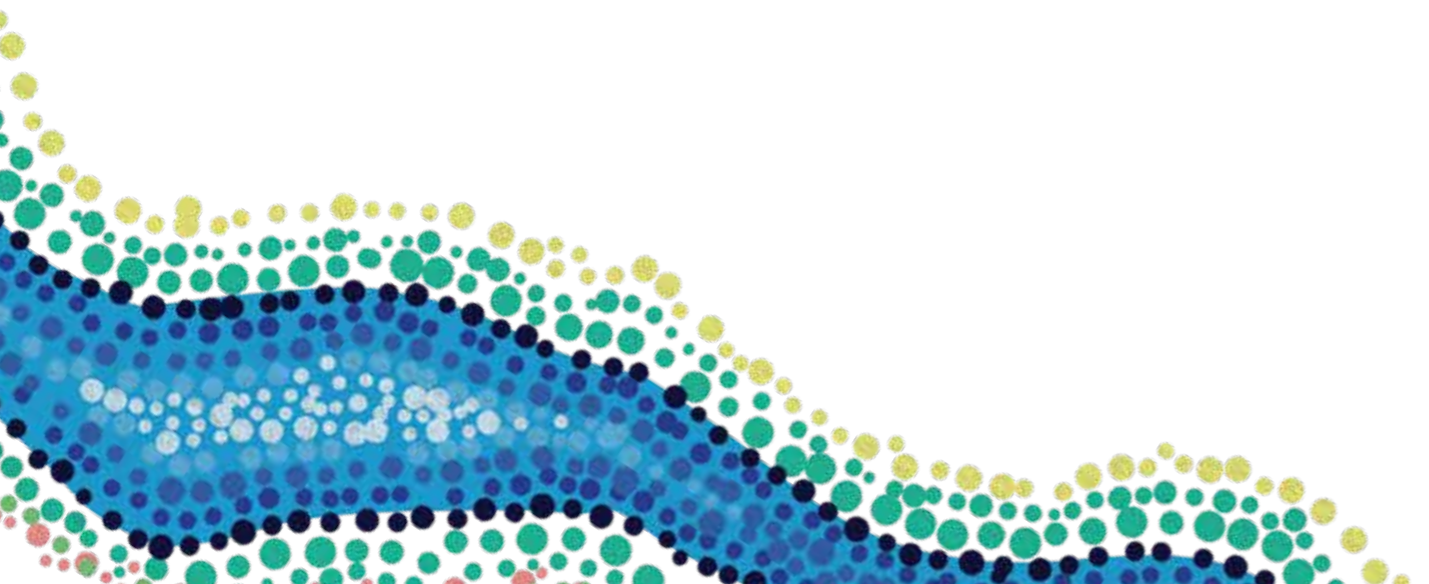
Our Kerang community identified the need for this gathering space and thanks to the grant we will be able to provide this much-needed place.

Innovations

While in many ways, the repeated lockdowns were problematic, they also presented us with the opportunity to reimagine how we can connect and support community. An enduring example of this innovation came through our partnership with Foodbank and SecondBite. As a means of outreach to our Elders and community, we made up hampers that we delivered to those experiencing isolation and vulnerability.

We immediately saw the value in the initiative – we could remain connected to our Mob, ensuring their needs were being met and in turn, they felt safe and valued. In acknowledgement of this outcome and knowing that, pandemic aside, there are people who feel isolated, we have committed to continuing this service for our more vulnerable community members.

As we move into the new financial year, MDAS Swan Hill and Kerang will continue to position itself as the preferred service provider for Aboriginal people across the Mallee.





Corporate Services

CORPORATE SERVICES

Quality and Governance

During the reporting period, MDAS continued to develop a Quality Management System using LogiQC QMS, which has all the features MDAS will need for managing quality, governance, safety and risk going forward.

LOGIQC is an online system that will support the management of MDAS's quality, safety and risk, including performance and compliance monitoring, and business improvement. Once the system is fully embedded, it will assist in simplifying complex tasks, by allocating accountability and timeframes for required actions. LOGIQC is used by many health sector organisations to achieve and maintain accreditation and MDAS believes it will support the Organisation in its ongoing commitment to improving its operational management, governance and reporting culture.

Governance

The governance of MDAS is an alignment of our corporate governance obligations and our LORE.

MDAS corporate governance is a framework of rules, relationships, systems and processes within our organisation and the mechanisms by which accountability is assigned and monitored.

Our LORE sets the foundation and values by which we operate our business and deliver services to our communities.

Our LORE is the customs and stories of Aboriginal peoples learned from the Dreamtime, passed from generation to generation through ceremony, songs, stories and dance and requires us to respect Country. Our LORE governs all aspects of our lives.

We acknowledge the four cornerstones of our LORE:

Land – within our cultural lands we will have a place to heal and draw strength. As our ancestors before us, we need to ensure we continue to take care of our lands

Oral – our history is an oral tradition, we pass on generation to generation our language, customs, song lines and ceremonies through story telling.

Respect – we show respect for our Origin, our Country, our Elders, our cultural practices and the cultural practices of others, our animals and our Dreamtime.

Elders – they are our wisdom holders, our story tellers, our links to our culture and history. Our Elders provide the cultural knowledge and spiritual guidance that we all need.

Framework for Governance of Quality



Quality and Governance

Accreditation

MDAS conducted a Quality Improvement Performance (QIP) reaccreditation audit in February 2022, this included both a QIC and Human Services Standard audit

QIC Health and Community Services

There are five standards for QIC and each of those standards has its own criterion and indicators. For example, Standard One has nine criterion and twenty-nine indicators. In total, there are eighty-nine indicators and of those, during the audit, MDAS was found not to meet, or to partially meet, twelve indicators. This means that MDAS complied with 74.2% of the indicators. This was a pleasing result that demonstrates the work the Organisation has been doing towards continuous improvement and provides a solid foundation for further improvement in the coming year.

Human Services Standard (HSS)

There are four standards for HSS and during the audit, MDAS was shown to be fully meeting two of those standards and to be partially meeting the other two standards. Our Organisation will continue to address the standards we did not fully meet in the coming months.

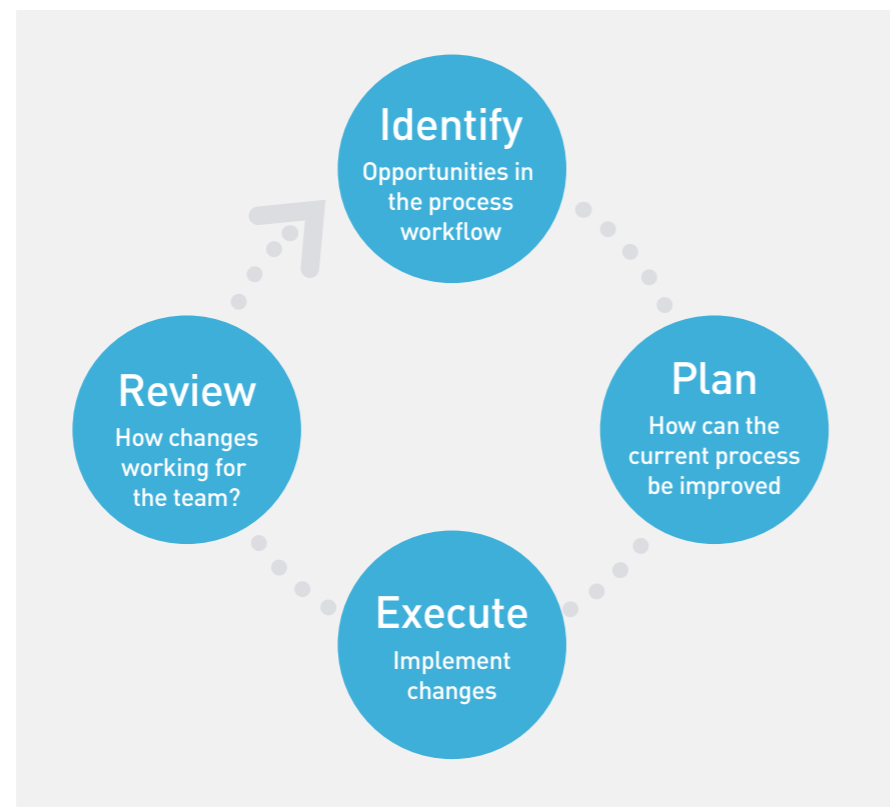
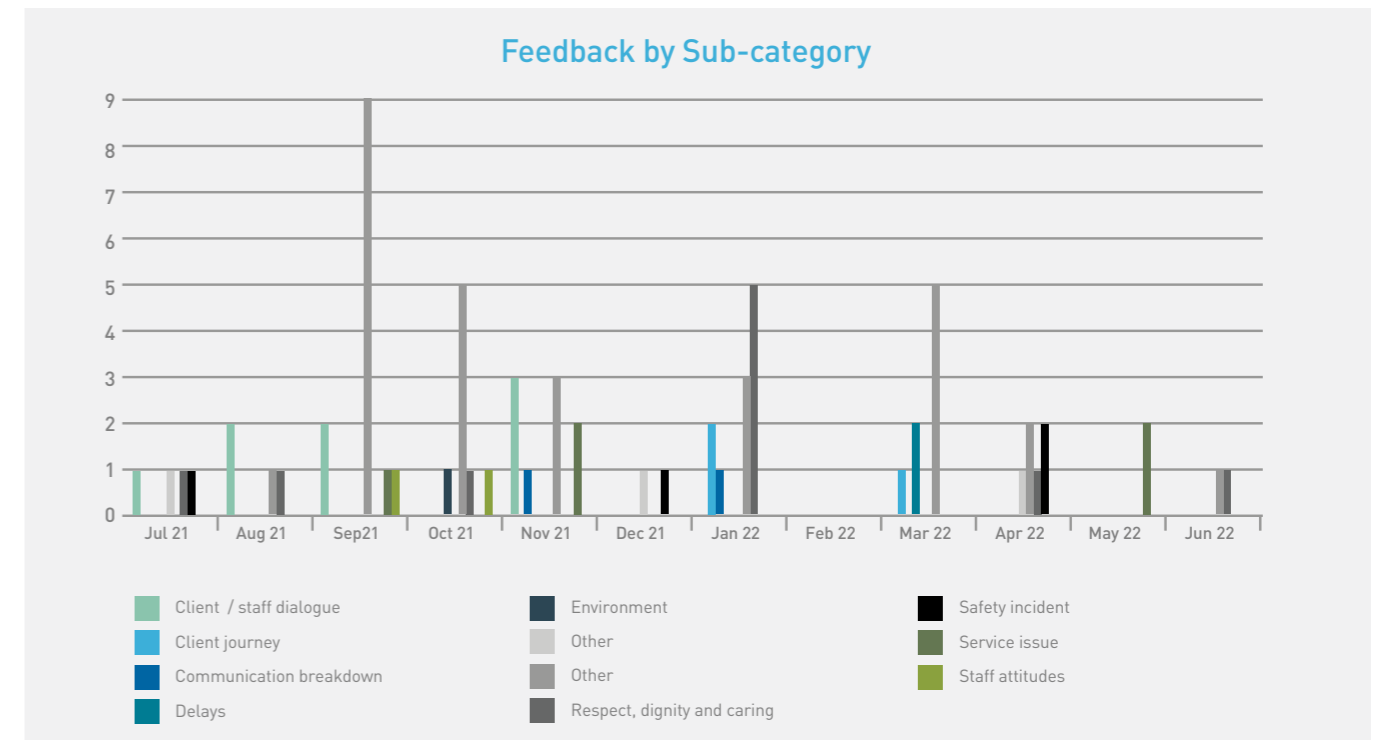
AGPAL

In June 2022 MDAS Swan Hill completed the Australian General Practice Accreditation Limited re-accreditation audit which is measured against the RACGP (Royal Australian College General Practitioners) standards.

There were several continuous improvement opportunities identified through this audit process and MDAS continues to implement strategies to strengthen the delivery of products, services and process.

Feedback

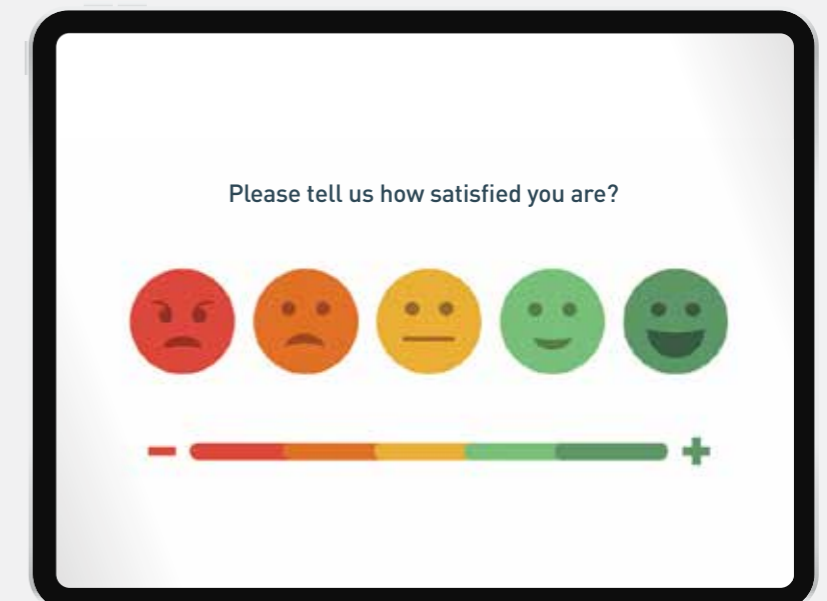
During the reporting period MDAS received 69 individual instances of feedback, 29 of those were complaints:



Continuous Improvements

To encourage further feedback from community, in the next financial year MDAS will introduce feedback KIOSKS at all reception areas. These KIOSKS will allow us to gain better insights into our community and clients' level of satisfaction and this understanding will in turn allow us to create a better experience for people interacting with MDAS.

Digital platforms, like the KIOSKS, typically allow for a higher volume of feedback to be processed – it will be quicker for our clients and community to engage – with higher volumes of data, MDAS can make broader observations about the client experience, and make better strategic decisions that will shape the Organisation.



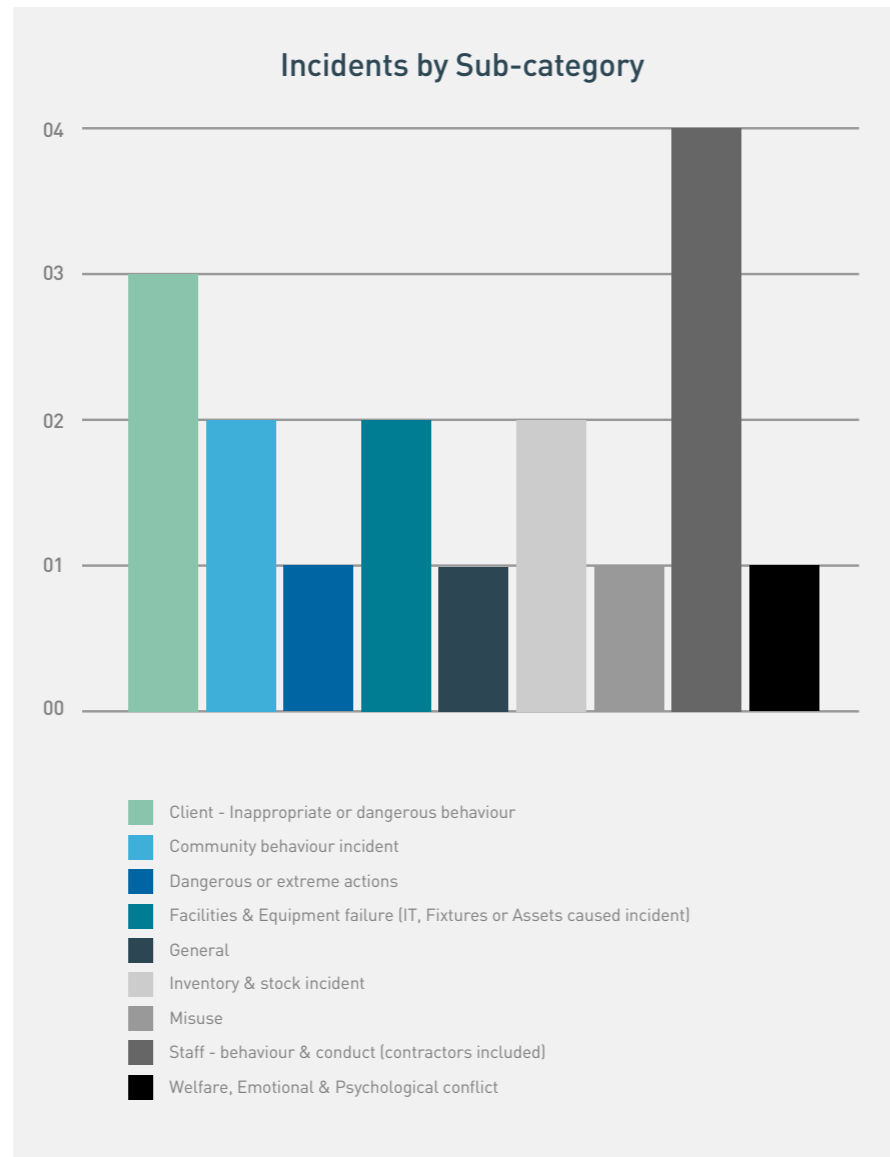
Quality and Governance

Safety and Risk Management

A total of 237 incidents were reported in the financial year, with the bulk of those being in the area of Service Delivery.

The data collected indicates that MDAS needs to focus on Hazard

Identification Training. By improving our staff's understanding of what hazards are, how to identify them, and how to respond to them, we should experience a decline in workplace incidents.



Safety and Risk Continuous Improvement

Fire Safety /Emergency Planning

One of the biggest risks for any business is fire. MDAS conducted a full review of its Emergency Planning with the following outcomes as a result:

Full review of Emergency Response Planning Tool (ERPT) for health services completed, as per Royal Australian College of General Practitioner requirements

MDAS emergency response updated

New evacuation alarm system implemented in Swan Hill and Mildura

Fire and repair services and signage upgraded to meet compliance

All evacuation maps updated

Emergency lighting has been tested

Fire warden training has been conducted

Contract Management

Contract Management System implemented

Occupational Health and Safety Contractor Safety Handbook completed

Incident Investigation

Incident Cause Analysis Method (ICAM) training was completed by seventeen staff. ICAM is an investigation method that is used in a range of industries and sectors and is nationally recognised.

Duress

Duress alarm processes were reviewed with a recommendation that onsite and mobile monitoring response to three levels of emergency be adopted. In the coming year staff will be provided with a 24/7 safety monitoring system.

Risk Management

Mallee District Aboriginal Services (MDAS) Risk Management Framework has been developed in accordance with the:

Victorian Government Risk Management Framework (VGRMF)

Australian Risk Management Standard (AS/NZS ISO 31000:2018).

MDAS completed a self-assessment using VMIA Risk Maturity Benchmark. This will form part of the MDAS annual continuous improvement cycle to:

Assess how well MDAS's current risk management practices are working

Find opportunities to improve MDAS's risk management practices.

Compare MDAS's results year on year.

Assets Management

Haven Home Safe (HHS) and MDAS in partnership

MDAS and HHS have partnered, so that together we can contribute to Closing the Gap and ensure that all Aboriginal and Torres Strait Islander Victorians have safe, secure, culturally safe, and appropriate, affordable housing that is aligned with their priorities and need.

In signing the partnership, HHS has committed to supporting the self-determination of Aboriginal people in line with First Order Principles, in Closing the Gap, and in supporting MDAS to achieve its organisational goals and aspirations, relating to social and affordable housing. We are equally committed to ensuring the objectives of our partnership are achieved, in alignment with the Principles.

We know that suitable, stable, and appropriate housing is a fundamental human right and is a cornerstone

requirement for Closing the Gap in health and social outcomes for Aboriginal people. We also know that it requires a whole of community response.

The Partnership agreement that has been signed by both parties includes a property management agreement and a joint funding agreement. MDAS has provided all but four of its properties to HHS for all ongoing property management activities as of the end of the financial year.

Haven and MDAS are in the process of developing a comprehensive joint funding submission to the Victorian Big Housing Build fund, which closes in October 2022, to support our shared vision for delivering more safe and secure housing in our region.

Below: Art work designed by Aunty Sharon Kirby specifically for HHS & MDAS partnership.

Elders Hub

Aboriginal Elders now have a fit-for-purpose space to meet, following the official opening of the Elders Gathering Place at 21 Pine Avenue, Mildura.

Mallee District Aboriginal Services (MDAS) unveiled the new space on 5th April 2022, which includes meeting areas, medical consultation and intake rooms, an art space for Elders, a quiet room for meditation, an outdoor space, and a men's shed.

Opening of the refurbished Elders Hub aligned with visit to Mildura by the Yoorrook commission. The Elders and community had the opportunity to chat with the commissioners and yarn around the truth telling process.



A Journey of Circles

A journey of the circles which represents our organisations and the lines and footprints show the journey to come together as one.

About Aunty Sharon

Aunty Sharon Kirby is a proud Barkindji woman from far west New South Wales along the Darling River, and now lives in Mildura. In sharing her story, Aunty Sharon said, "My father was an artist and also made various Aboriginal tools, artefacts and weapons. My artwork captures the various animals and the colourful landscape of the Murray River. Within my art I incorporate the animals and their environment. I tell Dreaming and creation stories, which was a traditional way our ancestors passed down information, learning and sharing."



Learning and Development

Staff inductions

All staff, upon commencing with MDAS, participate in our Induction Program facilitated by the Learning and Development Officer. New employees are introduced to the Organisation, our structure, the programs available to community and our Vision, Mission, LORE, and Values. Information is also shared about MDAS's expectations of its employees, and the benefits that are available to our staff.

The Induction Program covers:

- Work, health, and safety,
- Employee duty of care
- Emergency procedures
- Evacuation and fire safety
- Bullying and harassment
- Incident reporting and Hazard Identification
- Privacy, Employee Assistance Program (EAP)
- Code of Conduct
- Our LORE

All-staff mandatory training

During the COVID-19 lockdowns and the working from home period, MDAS was unable to deliver staff training. As restrictions eased and all staff were back onsite, this meant our training schedule was very much behind, and the Learning and Development team has been working hard to ensure staff are catching up on their missed mandatory training. We have focused on delivering:

- Child Safe training
- Sexual Harassment Awareness training
- De-escalation training
- Cultural Safety training
- Bullying & Harassment training
- Privacy & Confidentiality training

We developed a staged approach to ensuring staff were certified (and re-certified in some cases) in the mandatory training for

the upcoming financial year. This staggered approach has allowed for a review of resources and legislation, while avoiding training 'burn-out' or overload. Our team has successfully supported managers, coordinators, and our growing workforce with their training needs as we have responded to the constantly shifting ground over the last two years.

By the end of 2022, the Bullying & Harassment and Privacy & Confidentiality training will have been reviewed and scheduled for rollout and we are confident our training program will have addressed the delays caused by COVID-19. All the staff training records are managed and overseen by the Learning and Development team, and we keep the Leadership team informed on the progress of their staff and alert them when re-certification is due.

Program-specific Training & Traineeships

Specific roles require staff to have additional qualifications or training to ensure safety and best practice. Our team support staff through this

process by assisting with enrolments to relevant Registered Training Organisations (RTO). In addition to this, the Learning and Development Coordinator meets regularly with staff undertaking study to see how they're tracking and to provide wrap-around supports that will leave them best placed for success. The team also liaises with the RTOs on progress, concerns, and graduations.

Training For Success

When required, Learning and Development create training programs for individual staff, teams, or departments to meet specific learning needs. An example of the progress that can be made via this approach during the reporting period, was seen with our Health Reception team.

The Manager Health Reception approached us to discuss the needs of her team, which included additional learning in the Communicare system, customer service training, tailored to MDAS needs, and teamwork skills.

After consultation, we developed a program that included MDAS's Therapeutic Systems Team Practice

Leader, delivering an industry-leading session on 'Above the Line / Below the Line Behaviours.' This was followed by a detailed training package about the Communicare system developed by the Manager Health Reception. The Learning and Development Coordinator delivered a tailored customer service training package to the team on the final day. Feedback from the Reception team about this training program was very positive and offers a perfect example of the success that can be driven through collaboration between our internal departments.

Licensing and extra responsibility training

In addition to their regular roles, some staff put their hand up to perform extra duties, such as being onsite First Aid Officers, Health & Safety Representatives and Fire Wardens. Our team coordinates and plans the training and certification for these roles using external providers but we rely on and are grateful for the proactive contributions of the staff who volunteer for these roles.



Human Resources

The last twelve months has seen a lot of change within the Human Resources team and with MDAS as a whole. In response to feedback and a review, MDAS undertook an organisational restructure to ensure we are best placed to meet community needs.

One of the actions to come from the review was a merger of the Human Resources, Learning and Development and Community Engagement teams. These teams now form part of a broadened Department – People, Culture, and Inclusion – led by its new Director, Darlene Thomas.

As of 30 June 2022, MDAS had 224 staff, 136 of those staff were Indigenous and the remaining 88 were non-Indigenous employees.

Like all areas of MDAS, COVID-19 presented Human Resources with some new challenges during the reporting period, not least of which was the vaccination mandate. We were under pressure to ensure all staff were vaccinated and we had to adhere to strict Government deadlines for this to be achieved. MDAS was not alone in feeling the impact of this vaccination mandate, as organisations across the state grappled with staffing shortages and vaccination hesitancy.

Overall, our staff rallied, supporting each other to ensure as little disruption to our service delivery as possible. A great example of the teamwork, and community-centred dedication of our staff, could be seen through our Vaccination Clinic. Staff came together to manage the busy call centre and to assist all

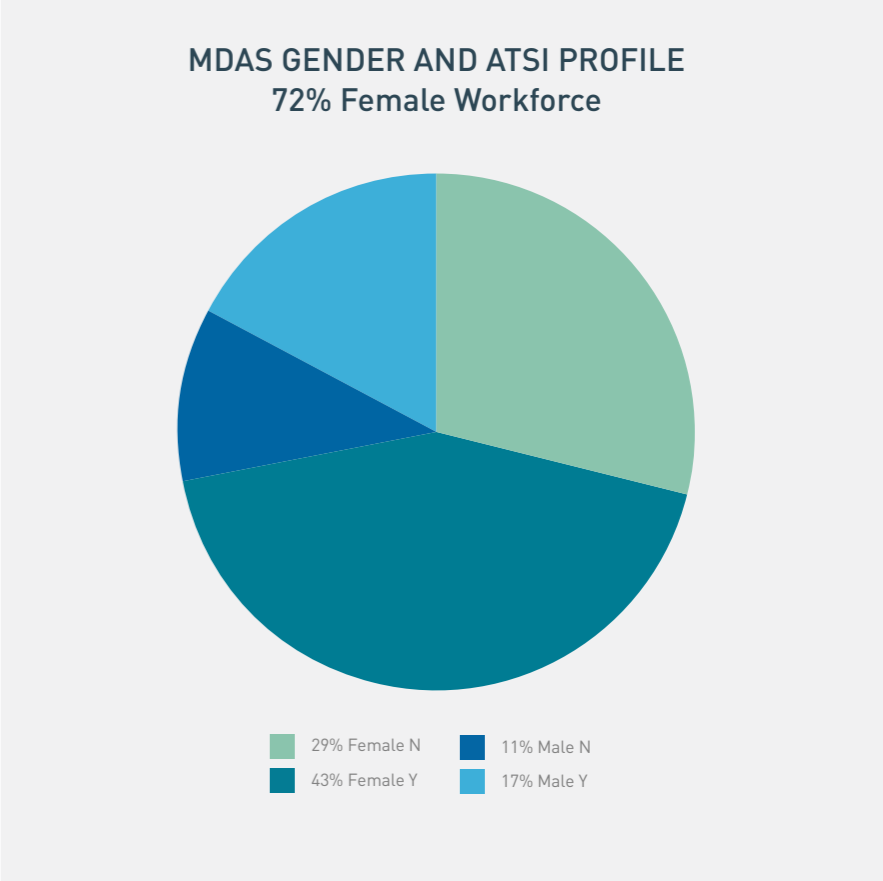
community members who wanted to be vaccinated, to get their job.

As we move towards the next financial year, there is an air of positivity at MDAS. The restructure has allowed us to identify key new roles that will help us to grow as an Organisation and we are beginning external recruitment for those positions, whilst also supporting the career pathways of existing staff.

As we reset to a 'COVID-normal' world, MDAS is underpinned by a growing team, committed to providing best practice service and supporting the resilience and empowerment of our community.

The pie chart indicates the number of Male and Female ATSI and Non ATSI staff as of 30 June 2022.

29% of female staff are non ATSI
43% of female staff are ATSI
11% of male staff are non ATSI
17% of male staff are ATSI





Mallee District Aboriginal Services Limited

Statement of Profit or Loss and Other Comprehensive Income
For the year ended 30 June 2022

	Note	2022 \$	2021 \$
Revenue			
Revenue from operating activities	6	32,998,178	29,138,582
Other income	7	2,937,472	3,213,861
		35,935,650	32,352,443
Expenses			
Employee benefits expense		(17,627,784)	(18,382,489)
Client costs and program development/delivery		(5,755,658)	(4,215,650)
Depreciation and amortisation	8	(995,829)	(1,175,341)
Interest expense		(12,972)	(14,580)
Motor vehicle expense		(430,451)	(319,274)
Occupancy expense	9	(1,451,320)	(1,086,552)
IT expenses		(565,626)	(649,374)
Travel expense		(234,192)	(161,909)
Grant returns		(567,518)	(71,567)
Repairs and equipment replacement		(320,296)	(416,587)
Other expenses		(968,377)	(1,094,478)
		(28,930,023)	(27,587,801)
Profit for the year		7,005,627	4,764,642
Other comprehensive income		378,745	2,060,377
Total comprehensive income for the year		7,384,372	6,825,019

FINANCIALS

Mallee District Aboriginal Services Limited

Consolidated Statement of Financial Position As at 30 June 2022

	Note	2022 \$	2021 \$
Assets			
Current assets			
Cash and cash equivalents	10	17,735,755	10,883,752
Trade and other receivables	11	801,885	88,302
Financial assets	12	894,412	1,005,501
Other assets		6,387	-
Total current assets		19,438,439	11,977,555
Non-current assets			
Property, plant and equipment	13	27,970,440	28,285,579
Right-of-use assets	14	505,542	324,680
Intangible assets	15	1,594,565	1,215,820
Total non-current assets		30,070,547	29,826,079
Total assets		49,508,986	41,803,634
Liabilities			
Current liabilities			
Trade and other payables	16	2,560,671	2,219,735
Lease liabilities	17	389,983	188,883
Employee benefits	18	1,216,521	1,490,528
Total current liabilities		4,167,175	3,899,146
Non-current liabilities			
Lease liabilities	17	120,829	138,011
Employee benefits	18	366,653	296,520
Total non-current liabilities		487,482	434,531
Total liabilities		4,654,657	4,333,677
Net assets		44,854,329	37,469,957
Equity			
Retained earnings		38,267,389	31,261,762
Reserves		6,586,940	6,208,195
Total equity		44,854,329	37,469,957

FINANCIALS

Mallee District Aboriginal Services Limited

Consolidated Statement of Cash Flows For the year ended 30 June 2022

	Note	2022 \$	2021 \$
Cash flows from operating activities			
Grants receipts		31,408,436	28,643,050
Other receipts		3,838,867	4,669,273
Payments to suppliers and employee		(27,789,285)	(25,461,952)
Interest received		75,948	14,171
Interest paid		(12,972)	(14,580)
Net cash flows provided by operating activities	21 (b)	7,520,994	7,849,962
Cash flows from investing activities			
Proceeds from sale of property, plant and equipment		-	141,048
Proceeds from sale of investments		16,692	-
Proceeds from disposal of intangibles		-	143,832
Purchase of property, plant and equipment		(267,129)	(509,589)
Purchase of investments		-	(16,139)
Net cash flows used in investing activities		(250,437)	(240,848)
Cash flows from financing activities			
Repayment of lease liabilities		(418,554)	(505,883)
Net cash flows used in financing activities		(418,554)	(505,883)
Net increase in cash held		6,852,003	7,103,231
Cash and cash equivalents at beginning of financial year		10,883,752	3,780,521
Cash and cash equivalents at end of financial year	10	17,735,755	10,883,752



41A Breen Street
Bendigo, Victoria 3550
PO Box 448, Bendigo Victoria 3552

Ph: (03) 4435 3550
admin@rsdaudit.com.au
www.rsdaudit.com.au

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF MALLEE DISTRICT ABORIGINAL SERVICES LIMITED

Audit Opinion

We have audited the consolidated financial report of Mallee District Aboriginal Services Limited, which comprises the consolidated statement of financial position as at 30 June 2022, the consolidated statement of profit or loss and other comprehensive income, consolidated statement of changes in equity and consolidated statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies, and the directors declaration.

In our opinion, the accompanying consolidated financial report of Mallee District Aboriginal Services Limited, is in accordance with Division 60 of the *Australian Charities and Non-for-profits Commission Act 2012*, including:

- (i) giving a true and fair view of the company's financial position as at 30 June 2022 and of its financial performance for the year then ended; and
- (ii) Complying with Australian Accounting Standards - Simplified Disclosure Requirements (including the Australian Accounting Interpretations) and the *Australian Charities and Non-for-profits Commission Regulation 2013*.

Basis for Opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Report* section of our report. We are independent of the Company in accordance with the accordance with the auditor independence requirements of the Australian Charities and Not-for-profits Commission Act 2012 and, the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110: *Code of Ethics for Professional Accountants* (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Responsibilities of the Directors for the Financial Report

The directors of the Company are responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards and the *Australian Charities and Non-for-profits Commission Act 2012* and for such internal control as the directors determine is necessary to enable the preparation of the financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error.

In preparing the financial report, the directors are responsible for assessing the Company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the directors either intend to liquidate the Company or to cease operations, or have no realistic alternative but to do so.

Auditor's Responsibilities for the Audit of the Financial Report

Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with the Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this financial report.

Richmond Sinnott & Delahunty, trading as RSD Audit
ABN 60 616 244 309
Liability limited by a scheme approved under Professional Standards Legislation



As part of an audit in accordance with the Australian Auditing Standards, we exercise professional judgement and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial report, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the association's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the directors.
- Conclude on the appropriateness of the board of director's use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the association's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required to draw attention in our auditor's report to the related disclosures in the financial report or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the association to cease to continue as a going concern.
- Evaluate the overall presentation, structure and content of the financial report, including the disclosures, and whether the financial report represents the underlying transactions and events in a manner that achieves fair presentation.

We communicate with the board of directors regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Information Other than the Financial Report and Auditor's Report Thereon

The directors are responsible for the other information. The other information comprises the information included in the Company's annual report for the year ended 30 June 2022, but does not include the financial report and our auditor's report thereon.

Our opinion on the financial report does not cover the other information and accordingly we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial report, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial report or our knowledge obtained in the audit or otherwise appears to be materially misstated.

If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

RSD Audit

Kathie Teasdale
Partner
Dated: 28 November 2022



Thank you

WITH THANKS

Our partners and supporters

Achieving better outcomes for our community is made possible through collaboration with our valued partners and supporters.

Department of Justice

Department of Health

Department of Families Fairness and Housing

Koori Justice Unit

Victorian Aboriginal Community Controlled Health Organisation

National Aboriginal Community Controlled Health Organisation

Victorian Aboriginal Child Care Agency

Haven Home Safe

Sunraysia Community Health Services

MacKillop Family Services

Berry Street

National Indigenous Australians Agency

Murray Primary Health Network

Bendigo Health

SecondBite

Mildura Base Hospital

Northern District Community Health

Victorian Responsible Gambling Foundation

Mallee Family Care

Head Space Mildura

Orange Door

Mildura Rural City Council

Coles Supermarkets

Local Aboriginal Justice Advisory Corporation

Regional Aboriginal Justice Advisory Committees

Loddon Mallee Aboriginal Reference Group

Mallee Sexual Assault Unit and Domestic Violence Service



Thank you Team!

And well done to our entire team
(as of 30/06/2022) for another year
of hard work and progress...

Indyca Adams
Sadia Afrin
Rodney Anagipura
Georgi Anil Jaicob
Chantelle Appoo
Andrew Arden
Joseph Azzarelli
Kimberley Bacon
Ryan Bailey
Taylah Baird
Rochelle Barry
Gemma Bates
Aaron Best
Tori Best
Mark Bland
Justine Bowden
Terrance Brennan
Kylie Briggs
Elvie-Marie Britten
Allison Buchanan
Janine Carr
Billie-Lee Carruthers
Shayne Carter
Michele Carty
Jacinta Chaplin
Joanne Chaplin
Latiesha Chaplin
Damien Charles
Madina Charles
Ethan Chilly
Joshua Chilly
Robert Chinnian
Loretta Circosta
Kailey Clark
Riahenna Clark
Tessa Clark
Liz Clarke
Peter Clarke
Sidney Clarke
Bronwyn Coe
Wayne Coe
Katherine Crouch
Lorraine Cruse
Chantelle Curnuck
Rebecca Curphey
Maddalena Dal Farra

Carolyn de Jong
Salvatore Deluca
Robert Dini
Pamela Dunrobin
Jill Edens
Ikeya Edge
Leilani Eggmoulesse
Leroy Eggmoulesse
Bree Evans
Belinda Fanshaw
Angelika Fevaleaki
Aroha Fisher
Genevieve Fitzgerald
Rebecca Fitzgerald
Brody Flowers
Jack Freeman
Krystal Gadsby
Noel Giddings
Marissa Gillbert
Samantha Gledhill
John Goddard
Amanda Goodall
Julia Goodes
Norma Gowers
Jarrod Griffin
Tiffany Griffin
Lowanna Gwilliam
Kelly Haley
Brady Hall
Tamara Hamence
Maresha Handy
Margaret Handy
Rex Handy
Rohan Hansen
Stephanie Harradine
Jadan Havea
Rachel Hay
Briana Hayden
Skye Hayden
Margaret Hayes-Hampton
Krystal Hedges
Holly Highdale
Amy Hunt
Jason Hura
Nathan Hura
Leanne Ibbs

Anna Irons
Tamika Jenkins
Dewella Johnson
Georgina Johnson
Ami Johnston
Brodi Jones
Derik Jones
Diane Jones
Kienan Jones
Shae Jones
Tian Jones
Sharni Kaparny
Erin Kelly
Kaneesha Kelly
Nathan Kelly
Zoe Kelly
James Kennedy
Jessica King
Molly King
Crystal Kirby
Delureen Kirby
Elsa Kirby
Harold Kirby
Toby-Lee Kirby
Julie Knight
Jan Koopermans
Terrence Kuchel
Melanie Lane
Jennifer Laurie
Reeanne Laurie
Russell Lawson
Sonia Lawson
Suzanne Leonard
Malinda Loats
Rachel Lovski
Eric Magoga
Marie Mah
Tamara Marshall
Lola Masasso
Amanda McCole
Pamela McCormack
Leanne McDermott
Rachael McGann
Rhonda McInnes
Tayla McKenzie
Alex McWilliam

Kara Merritt
Amelia Mitchell
Caitlin Mitchell
Joanne Mitchell
Jacinta Molloy
Merle Morgan
Travis Morvell
Jo-Ann Murray
Sarah Nalder
Maralea Nau
Laetitia Nelson
Tahlia Newman
Glenda Nicholls
Kristie Nixon
Carly Noll
Claire O'Connor-Johnson
Tariq Odegaard
Bobbi-Marie Pappin
Anand Patel
Manu Paul
Mason Peter
Melissa Pippin
Jackson Pollard
Jai Portelli
Neive Price
Breanna Quick
Mou Rashid Bose
Jane Reid
Danni Renkin-Kimpton
Geoff Richards
Lali Rigby
Paul Roberts
Darlene Sanders
Janie Schliefert
Sarah Schurr
Ryan Sedgmen
Leah Shanaughan
Ruchika Sharma
Margaret Sharman
Skie Sherwell
Simone Shiner
Tegan Shiner
Kylia Sloan
Lisa Sloan
Rocky Sloan
Chereeta Smith

Derek Smith
Rexy Smith
Tanya Smith
Lakiya Smith
Lacynda Smith
Robyn Smythe
Jesse Staker
Paula Stevens
Tanisha Stevens
Ah Tay
Leanne Taylor
Lois Taylor
Russell Taylor
Zanele Thebe
Darlene Thomas
Remya Thomas
Terry Thomas
Wade Thompson
Bianca Thorpe
Lori Tickell
Sharlee Towle
Alesha Tucker
Vas Tuifao
Jacqualyn Turfrey
Onochie Ugochukwu
Mincy Varghese
Jessica Versteeg
Milka Waitaha
Aimee Waters
Patricia Watson
Harold Webster
Toni Webster
Ian Wescombe
Amanda Whitton
Ashton Williams
Rebecca Wilson
Kara Winters
Olive Winters
Ray Wise
Nathan Yates





OUR SERVICES

FAMILY AND COMMUNITY SERVICES

CARE AND CULTURE

Aboriginal Children Specialist Advice Support Service (ACSASS)

Aboriginal Family Led Decision Making (AFLDM)

Cultural Support Planning (CSP)

Kinship Care

Home Based Care (Foster Care)

Therapeutic Residential Care

Therapeutic Residential Case Management

First Supports

Kinship Reunification

FAMILY AND YOUTH

Family Services

Integrated family services

Stronger Families

Family Preservation

YOUTH SERVICES

Early School Leavers

Youth Support Program

Youth Justice

Koori Connect

Koori Night Patrol

Youth Justice Robinvale

HOUSING SUPPORT

Crisis Support

Aboriginal tenants at risk of eviction

Transitional support

AOD Robinvale

FAMILY VIOLENCE

Meminar Ngangg Gimba – Refuge

Meminar Ngangg Gimba – Outreach (Mildura/ Robinvale/ Swan Hill/ Kerang)

Meminar Ngangg Gimba – Cultural Healing Group Work

Men’s Family Violence Case Management

Men’s Family Violence Cultural Behaviour Change Group Work

Men’s Family Violence Cultural Healing Group Work

Adolescent Family Violence Case Management

Adolescent Family Violence Culture Healing Group Work

SOCIAL EMOTIONAL WELLBEING

Koori Women’s Diversion (Mildura)

Mental Health Demonstration Project (Mildura)

Alcohol and other Drugs Treatment Service

(Mildura Swan Hill/ Kerang Robinvale)

Bringing them Home

(Mildura Swan Hill/ Kerang Robinvale)

Aboriginal Communities Gambling Awareness program (Mildura)

Family Wellbeing program

(Mildura Swan Hill/ Kerang Robinvale)

Local Justice Worker program

(Mildura) (Swan Hill Under Family services)

Dual Diagnosis Model of Care

(Mildura Youth 12 - 25) (Swan Hill Adult 16 - 65)

SEWB Mental Health Access (Swan Hill)

Clinical & Therapeutic Mental Health (Swan Hill)

Mental Health Community Support Service (Swan Hill & Mildura)

HEALTH

GP

Nurse

Aboriginal Health Workers

Outreach Workers

Chronic Disease Management

Maternal Child Health

Nurse Health Checks

Transport

SPECIALIST SERVICES

Drug And Alcohol Worker

Psychologist

Maternal And Child Health Nurse

Podiatrist

Cardiologist

Urologist

Paediatrician

Optometrist

Cardiologist

Audiologist

Physiotherapist

Personal Trainers

Road to deadly Health

Deadly choices (school programs)

MDAS Health program

Nutrition & Public Health Advisor

AGED AND DISABILITY

Commonwealth Home Support Programme (CHSP)

Home and Community Care Program for Younger People (HACC-PYP)

CLINICS

Well Women’s Clinic

Immunisation Clinic

TACKLING SMOKING AND HEALTHY LIFESTYLES SERVICES

Quit Smoking Support

EARLY YEARS

Maternity Services (Swan Hill & Mildura)

Maternal and Child Health (Swan Hill & Mildura)

In Home Support program (Swan Hill & Mildura)

Cradle to Kinder (Swan Hill & Mildura)

Koori Supported playgroups (Swan Hill & Mildura)

Koori Preschool Assistant program (Mildura)

HIPPY (Home Interactive Program for Parents and Youngsters)(Mildura)

Connected Beginnings (Mildura)



MDAS
MALLEE DISTRICT
ABORIGINAL SERVICES

www.mdas.org.au