



Annual Report
2024 - 2025

Acknowledgment of Country

We acknowledge the Whadjuk Noongar people as the traditional custodians of the country we live and work in. We honour and pay our respects to the legacy and the vision of our Elders past and present, our founding members who paved the way and who continue to guide us, and our future generations, who rely on us to maintain our Elders self determination to improve the health and wellbeing of our people.

Our Vision

To be a successful Aboriginal owned service provider; and leader in health and wellbeing for the next forty-five years and beyond to one hundred years from now.

Our Purpose

To lead and deliver on health care, wellbeing and healing care, employment, careers and advancement for Indigenous people who are keen to work in health; and value for owners, service users and staff.

Please be advised that this document may contain the names and pictures of people who have passed away.

Abbreviations

ACCHO	Aboriginal Community Controlled Health Organisation
AHCWA	Aboriginal Health Council of WA
AHP	Aboriginal Health Practitioner
Derbarl	Derbarl Yerrigan Health Service Aboriginal Corporation
DYHS	Derbarl Yerrigan Health Service Aboriginal Corporation
NACCHO	National Aboriginal Community Controlled Health Organisation
NEAF	New Era Aboriginal Fellowship
RACGP	Royal Australian College of General Practitioners
SEWB	Social and Emotional Wellbeing

Our Logo



Our logo is a reflection of our Noongar heritage, designed by local Noongar artist Barry McGuire and represents the Swan River winding through our country.

The water is pure and it also represents our healers, the traditional healers. They have healing hands. The logo also recognises that non-Aboriginal doctors are healers with new modern medicine and gifted people who are able to heal our people. This provides us with the combination of traditional Noongar healers and Wadjella (white) doctors who heal as well with modern medicine.

Our Aboriginal healers had hands-on methods to heal from our own culture. From the healer's hands, the pure water flows and drops in circles to heal our families. The circles represent all Aboriginal communities around us near the Swan River; we work together with our people from the Swan River.

Derbarl Yerrigan Health Service is the place of the long neck turtle. The circles represent the community organisations here in the Perth metropolitan area.

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About Us

Many Voices, One Dream, Health Services, Our Way

The Whadjuk Noongar word for the Swan River is "Derbarl Yerrigan," and like our emblem, it captures the significance of our name's close ties to the river and surrounding country.

Derbarl Yerrigan Health Service was incorporated in 1973 as the Perth Aboriginal Medical Service, and in 1998 became the Derbarl Yerrigan Health Service.

Today, we are the oldest and largest Aboriginal Community Controlled Health Service in Western Australia, providing care to over 14,000 Aboriginal patients on Whadjuk Noongar Boodjar.

Derbarl provides culturally appropriate primary healthcare to over 8,000 regular Aboriginal patients across four clinics in metropolitan Perth.

Our clinics are located in East Perth, Mirrabooka, Maddington, and Midland.

With a focus on prevention, early intervention, comprehensive care, and care coordination (including chronic disease management) across the life course, we aim to provide culturally sensitive and respectful comprehensive primary health services to Aboriginal people. Our treatment approach focuses on the social, emotional, cultural, and physical health of our patients.

The Derbarl service concept is built on cultural safety and awareness, the empowerment of patients and the ownership of our members and community controlled governance structures are at the heart of our service.

In addition to allied health and specialist services, environmental health, dental care, mental health services, social support services, and access made possible by transportation services, we lead an Aboriginal Health Practitioner-led model of care with the integration of nurses and general practitioners and a multi-disciplinary workforce.

All our clinical and social support services are underpinned by a robust and integrated system of clinical and cultural governance embedding continuous quality-improvement.





Our Values



1. Cultural Integrity

We respect Aboriginal cultural distinctiveness and the lived experience of our patients and staff. We are culturally safe in all that we do

2. Equity & Social Justice

We are inclusive, respect diversity and enable equitable access to services and opportunities

3. Honesty

We act honestly and with fairness

4. Professionalism

We are accountable for our actions and always act with professionalism

5. Quality Care

We provide quality care to our patients and our staff

6. Respect

We respect the different views, experiences, values and priorities of our patients and staff

Our History



1973

AMS Opens

NEAF obtains an old house and with donations and volunteer doctors opens its doors to the community and sets the establishment of the **Aboriginal Medical Service (AMS)** in September.

First funding of \$100,000 employs:
AMS Leader | Bill Forest (RIP)
Social Worker | Marian Nelson-Kickett
Aboriginal Health Worker | Teresa Issacs
Cleaner | Aunty Joan Saylor (RIP)
Project Officer | Neil Phillips (RIP)

5

1975

New Staff

The AMS employs 14 staff including eight Aboriginal staff. Three are field officers transporting patients to and from the clinic.

14



1980

A Second Storey

The AMS leases a two-storey building at 154 Edward Street in East Perth.

Forty staff are employed including a second doctor, Dr Raji Krishnan.

40

1983

New Opportunities

An Aboriginal Health Workers Education Program is launched creating new opportunities for Aboriginal people to work as front line health professionals for the AMS.

1984

Over 10,000 patients Milestone

10,664

1985

Three Doctors

The AMS receives funding to employ a third full-time doctor.

1987

Expansion

Services expand to offer medical and child health, welfare support, a transport system, an interpreter service, an AIDS awareness program and hostel accommodation.

11,735

1990

Over 15,000 Patients Milestone

15,900

1991

Accountant

ATSIC responds to a request from the AMS to meet a funding shortfall and funds the first full-time accountant.

1993

First Aboriginal Doctor

The organisation changed its name to the **Perth Aboriginal Medical Service (PAMS)**.

Dr Sandra Eades (now Professor Eades) becomes PAMS first Aboriginal doctor. 80% Aboriginal staff achieved.

1997

New Ground

Work commences on the new East Perth clinic.

1998

A New Name

The organisation changes its name to **Derbarl Yerrigan Health Service (Derbarl)** and moves to its purpose-built premises in East Perth.

A second clinic opens in Midland in May.

2000

Opening

The Mirrabooka and Maddington clinics open. Derbarl is recognised by mainstream and government services.

Derbarl takes over the Elizabeth Hansen Autumn Centre from the Aboriginal Rights League.



1969

NEAF Begins

The New Era Aboriginal Fellowship (NEAF) is formed by a group of volunteers including Professor Fiona Stanley to drive the establishment of an Aboriginal medical service in WA.

1974

First Doctor & Recognition

Derbarl receives funding to employ its first full-time paid doctor, Dr Reid.

The Service is incorporated as the **Aboriginal Medical Service of Western Australia**.

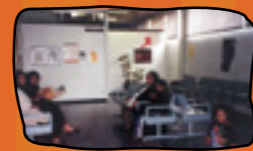
General practice services expand to consultations, clinic treatments, referrals to specialists and health screening.

The AMS is recognised as playing a vital role in improving the health of Aboriginal people.

1976

Patient Numbers Rise

Patient consultations rise to 600 per month with many patients visiting for the first time.



1981

Major Growth

Grand opening of the Edward Street building on 7 July 1981.

The service grows to include a Home and Community Care Program and specialist clinics for dental, podiatry, psychiatric, optical and antenatal care.

A night shelter opens offering Aboriginal people emergency accommodation including the "Bull Paddock" people.

8,330

"From a small, converted house to a spacious two-storey building. From a few forgotten people to 8,330 well cared for patients.

From March 1973 to July 1981.

Only a speck of time in the history of the Aboriginal people, but now, a steadfast landmark in the improvement of Aboriginal Health, and a recognition of the Rights of a People to Self-Determination."

(Maurice Rioli (RIP), Directors Report, Annual Report 1980/1981)

1989

Dental Health

A dental service opens.

14,662



1992

Aboriginal Health Degree

First intake of students in Curtin University's Diploma/Degree in Aboriginal Community Health.

The AMS was instrumental in getting this course on the curriculum.



1995

New East Perth Clinic

With the service having outgrown in Edward Street, planning commences for a new clinic in East Perth.

1999

Two New Clinics Funded

Funding is secured to open two new clinics in Maddington and Mirrabooka.

A second dental room is opened in the East Perth clinic reducing dental wait times from six to three weeks.

2001

Funding Challenges

The Midland clinic closes due to insufficient funding. Commonwealth government appoints an independent funds administrator.

"Derbarl is best placed to deliver primary health care services to Aboriginal people living in this region."

2002

Administration
Funds administration continues until 20 September 2002.

 15,000



2004

Administration Ends
The funds administration period ends on 20 June and the service returns to Aboriginal Community Control.

DYHS records a deficit of \$334,249.

2005

Return to Surplus
Derbarl returns an operating surplus of \$11,386.

2008

Peel Region Assistance
Derbarl assists in the management of Waangkimity Health in the Peel Region.

2013

Accreditation under RACGP & ISO
The first Aboriginal Community Controlled Health Organisation (ACCHO) in WA to receive dual accreditation under RACGP and ISO.

Derbarl celebrates its 40th anniversary year with over 15,000 patients.

2014

Aboriginal Health Practitioners
Ten Aboriginal health workers transition to the new qualification and become Aboriginal Health Practitioners with a further 11 undertaking the training.

2016

Remediation Plan
A commonwealth government review into Derbarl's financial management, governance, organisational capacity and capability and service delivery results in a remediation plan with 19 recommendations.

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2017

AHCWA Administration
The state government defunds the Elizabeth Hansen Autumn Centre and Derbarl makes the decision to self-fund the operations.

The Aboriginal Health Council of WA is appointed as administrator to assist in the foundational rebuild of governance and administrative systems and processes. Derbarl governance transitions from the WA Associations Act to the Corporation Act (ORIC).

Income is reduced to \$15.74M with a \$824K deficit.

2019

Return to Community Control
Derbarl returns to full Aboriginal Community Control under a remediation plan.

The organisation launches a new five-year strategic plan.

2021

All Clinics Administer COVID-19 Vaccine
Derbarl returns to Aboriginal Community Control under a new rulebook and a refined governance model.

COVID-19 vaccination centres open in all clinics vaccinating patients against the virus.

A financial surplus of \$1,034,231 is recorded.

The second longest serving employee, Arnold Yarran, celebrates 30 years of service.

 17,201

2022

Funding for New Midland Clinic
Derbarl secures \$4.7M for a new purpose built and owned Midland clinic.

Patient numbers grow to 18,721 and income rises to \$20.3M.

Dulcie Donaldson joins the rarefied rank of reaching 30 years of service.

Almost 14,000 COVID-19 vaccinations are administered.

Derbarl secures five-year contracts for core Primary Health Care funding and becomes the first ACCHO to operationalise a retinal screen camera for diabetic patients.

GP Registrar, Dr Dan Hunt, receives the RACGP WA GP in Training of the Year Award.

 18,721

2024

High Performing ACCHO
Our Commonwealth core funding agreement is moved to a 5-year term. The government funded NACCHO First National Health Worker Traineeship Program commences. Derbarl participates in the program, designed to build our AHP workforce's capacity and up-skill our workers.

The tender is awarded for the Midland Clinic project works. Two full-time, WAPHA funded pharmacists commence work at Derbarl.

Derbarl becomes the national leader in eliminating Hep C in the community.

NACCHO Chair acknowledges the Derbarl Yerrigan Health Service as one of the highest performing ACCHO's in her address at the AHCWA Member Forum.

2010

2003

Midland Turmoil
The Midland clinic re-opens in March. In June a funds administrator is reappointed due to corporate governance concerns.

Derbarl records a significant deficit of \$955,655.

Midland clinic closes in October.

2007

Accreditation
Maddington becomes the first clinic to gain accreditation.

A Special General Meeting is held to change the constitution.

A new prison outreach service commences.

2010

120 staff employed
70% Aboriginal staff.

 120

"At last we have a Medical Service, one that has stood the test of time, and which was established by and available for our people, to get professional care by people they know and trust."

Derbarl Annual Report 2008-2009

2012

Midland Clinic Reopens
The clinic re opens in new premises with more sustained funding.

2015

Income Grows
Income grows to \$16.3M with an operational deficit of \$303,210.



2018

Income Stabilised
Income stabilised in comparison to the prior year with an improved deficit of \$309K.

Derbarl continues to operate the Elizabeth Hansen Autumn Centre as an unfunded service to ensure Aboriginal patients on renal dialysis have access to safe accommodation.

2020

COVID-19 Global Pandemic
Derbarl returns to a surplus financial position of \$240,755. The service is accredited under the WA General Practice Education and Training to host General Practitioner Registrars and two join the workforce. All clinics are now managed by Aboriginal Clinic Managers.

Services and patients are challenged by the unprecedented major COVID-19 global pandemic. Derbarl implements a robust and culturally responsive pandemic plan as services and work arrangements are modified under the WA State of Emergency and Public Health Act. Two temporary respiratory COVID-19 testing clinics in Maddington and Mirrabooka open.

A majority of Directors agree to put the corporation into voluntary administration to strengthen governance practices.

 13,935

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2023

50 Year Anniversary
Derbarl celebrates its 50th anniversary and is announced as the 2023 WA Best GP Practice by the RACGP.

138 staff are employed including 5 Aboriginal doctors and 24 Aboriginal Health Practitioners.

Patient numbers reach 19,062. Income rises to \$22.7M

The WA Council of Social Services presents Derbarl with a Community Service Award for its COVID-19 response. Aboriginal GPR, Dr Corey Dalton, is awarded the RACGP WA GP in Training of the Year.

 19,062

 138



 \$26.23M

The Year At A Glance



Governance

Board of Directors



Joslyn Eades-Tass

Chairperson (appointed 18 July 2025)
Member Director (appointed 23 November 2024, ceased 18 July 2025)

Joslyn Eades-Tass is a culturally grounded and proud Noongar person, and a devoted mother of two. Her advocacy focuses on achieving meaningful and lasting change for Aboriginal and Torres Strait Islander peoples through strategic policy influence, regulatory accountability, and legislative reform.

Guided by the core values of trust, integrity, honesty, courage, and confidence, Joslyn's leadership reflects the wisdom passed down from her ancestors and mentors, and her ongoing commitment to her cultural identity and community empowerment. She is currently completing dual degrees in Law and Arts, specialising in Indigenous Knowledge.



Nathan Riley

Deputy Chairperson (appointed 18 July 2025)
Member Director (appointed 23 May 2025, ceased 18 July 2025)

Nathan is a proud Noongar man who brings a wealth of experience in nursing, along with a strong passion for disability advocacy and community health. His professional background, lived experience, and deep cultural knowledge are invaluable as Derbarl continues to deliver culturally secure and community-led health services.



Kaya Carson

Member Director (appointed 17 July 2024)

Kaya Carson is a proud Noongar Yorga, born in Whadjuk. Her family originates from Ballardong and Nyaki-Nyaki in the Wheatbelt. Kaya works for the Department of Justice and operates her small business, 'Kaya Lee's'.

Kaya's qualifications and achievements include a Certificate I and II in Leadership, Certificate IV in Training and Assessment, a Diploma of Community Development, an Advanced Diploma of Applied Aboriginal Studies, and a Bachelor of Arts in Adult Education and Community Management.

Currently, Kaya is completing a Certificate IV in Leadership and Management with a strong focus on community development.



Tuguy Esgin

Independent Director (appointed 23 July 2025)

Associate Professor Tuguy Esgin is Derbarl's first Noongar Independent Director on the Derbarl Board. Tuguy Esgin is a proud Noongar Yamatji man and a respected academic, known for championing Indigenous excellence in higher education. He also brings 20 years of experience in community development and stakeholder engagement.



Uncle George Hayden

Member Director (appointed 22 August 2025)

Uncle George Hayden is an Elder of the Noongar nation with cultural ties to Whadjuk, Ballardong and Njaki Njaki and brings both deep cultural knowledge and wide experience in board and governance. He has held various board positions including Chair of the Noongar Boodjar Language Cultural Aboriginal Corporation and currently sits on the Western Australian Parole Review Board and Aboriginal Justice Advisory Council. George also has also studied and lectured in Indigenous Community Health at Curtin University.



Mat Wilson

Member Director (appointed 29 August 2025)

Mat Wilson is a Ballardong, Whadjuk and Gnaala Karla Booja person and current CEO of the Ballardong Aboriginal Corporation. His work with the Ballardong Aboriginal Corporation, particularly through a period of strong growth, has built experience in organisational structures, risk management and leadership skills.



Richard Brooks

Independent Director (appointed 18 July 2025)

Rick Brooks brings expertise in Commerce, Human Resource Management, and Information Systems, along with his governance and Board experience across many sectors.

Previous Directors

Professor Dan McAullay

Chairperson (ceased 3 October 2024)

Deputy Chairperson (appointed 4 October 2024, term ended at the AGM 23 November 2024)

Katiska Davis

Member Director (appointed 4 July 2024, ceased 10 December 2024)

Deputy Chairperson (appointed 11 December 2024, resigned 18 July 2025)

Jasmine Eades

Member Director (appointed 23 November 2024, resigned 10 April 2025)

Thierra Clanton

Member Director (ceased 3 October 2024)

Chairperson (appointed 4 October 2024, resigned 18 July 2025)

Professor Sandra Eades AO

Deputy Chairperson (ceased 3 October 2024)

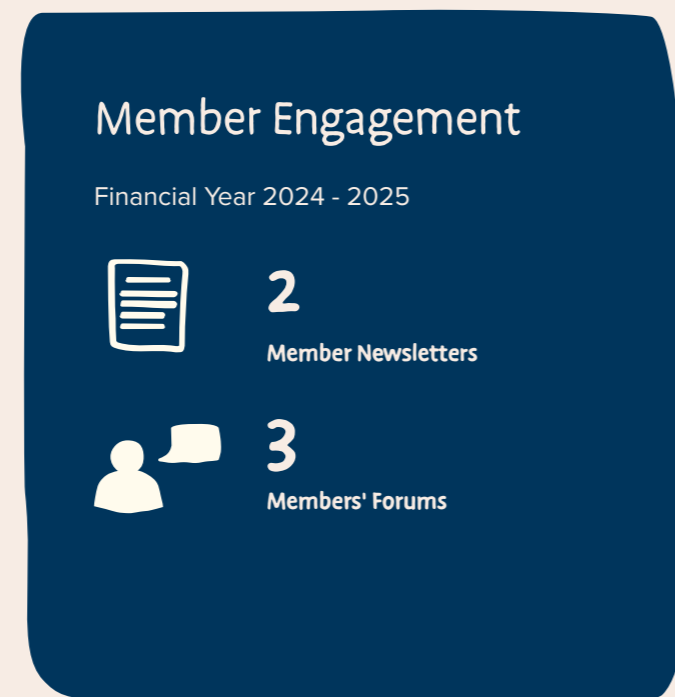
Member Director (appointed 4 October 2024, term ended at the AGM 23 November 2024)

Paul Gregory

Independent Director (appointed 21 May 2024, resigned 11 July 2025)

Brian Roche

Independent Director (appointed 16 April 2024, resigned 11 July 2025)



Board Meetings and Attendance Table Financial Year 2024-2025

Name of Director	Position	Number of Meetings Attended whilst a Director	Number of Meetings Held whilst a Director
Professor Dan McAullay	Member Director & Chairperson	3	4
Professor Sandra Eades AO	Deputy Chairperson & Member Director	2	4
Thierra Clanton	Member Director & Chairperson	10	11
Katiska Davis	Member Director & Deputy Chairperson	10	11
Kaya Carson	Member Director	10	10
Joslyn Eades-Tass	Member Director	6	7
Jasmine Eades	Member Director	4	5
Brian Roche	Independent Director	11	11
Paul Gregory	Independent Director	8	11

Chairperson's Report



"Our mission remains steadfast, to deliver the highest standard of holistic health and wellbeing services that are culturally safe, compassionate, and community-driven."

It has been both an honour and a great responsibility to serve as Chairperson of Derbarl Yerrigan Health Service Aboriginal Corporation. I was privileged to be elected as a Director at the November 2024 Annual General Meeting and later to assume the role of Chair following the resignation of Thierra Clanton in July 2025.

As Chair, my focus is to ensure Derbarl continues to stand strong as a community-led organisation built on the principles of self-determination, respect, and cultural integrity. For 52 years, Derbarl has been a place of healing and belonging for Noongar and non-Noongar Aboriginal peoples living on our beautiful Whadjuk Noongar Boodja. Our mission remains steadfast, to deliver the highest standard of holistic health and wellbeing services that are culturally safe, compassionate, and community-driven.

This year, Derbarl entered an exciting new chapter with the launch of our five-year Strategic Plan, Stronger Together 2025–2030. The plan sets a bold vision across five focus areas; our patients, our community, our partnerships, our organisation, and our employees. It reflects the voices and aspirations of our members and provides a clear roadmap for growth, accountability, and excellence.

Over the coming year, our Board and CEO will oversee an organisational health check to ensure our daily operations align with the ambitions of this plan.

A significant milestone in 2025 has been the progress of our new Midland Clinic. This \$8 million investment, supported by our funding partners and community, is on track for completion before Christmas and will more than double our capacity to deliver care to the Midland region. It represents a tangible commitment to improving access to culturally secure healthcare for Aboriginal families in Perth's eastern corridor and surrounding regions.



We also welcomed our Chief Executive Officer, Mr James Christian PSM, during the year. James brings a wealth of experience in Aboriginal community leadership and a deep commitment to strengthening Aboriginal Community Controlled Health Services. The Board fully supports his vision and leadership, which is already fostering a culture of stability, accountability, and excellence across Derbarl.

I would like to acknowledge our dedicated Board of Directors, who bring a wealth of knowledge, diversity, and passion to their roles. Our Board represents a rich mix of age, backgrounds, and perspectives, reflecting the communities we serve. This diversity is one of our greatest strengths and ensures that the decisions we make are well-rounded, inclusive, and grounded in cultural and community wisdom.

To our staff and clinicians, thank you for your dedication, professionalism, and care. Every day, you embody Derbarl's values of cultural integrity, respect, honesty, professionalism, equity, and quality care. Your commitment to our patients and families is the heart of this organisation.

Finally, to our members and Elders, thank you for your ongoing trust and guidance. Derbarl belongs to you, it was built by you, for you, and will continue to be guided by your voices. Together, we will keep building a strong, resilient, and self-determined future for generations to come.

Joslyn Eades-Tass
Chairperson



CEO's Report



It is a privilege to present my first Annual Report message as CEO of Derbarl Yerrigan Health Service Aboriginal Corporation (Derbarl).

Having started as interim CEO in May, I was made permanent by the Board, after an independent selection process, in mid-August. I am honoured to follow in the footsteps of highly respected Aboriginal leaders.

There have been other changes at Derbarl. In the first quarter of 2025–26 four Board members resigned – the Chairperson, Deputy Chairperson and two Independent Directors. A transparent, merit-based selection process saw new directors appointed – including Associate Professor, Tuguy Esgin. He is the organisation's first Noongar Independent Director. Welcoming him marks a new chapter in Derbarl's commitment to greater community representation in governance. We are fortunate to have a Board of such quality and calibre.

I would like to extend my thanks to former CEO, Tracey Brand, for her exemplary service and ongoing guidance. Tracey joined Derbarl in 2020 and led the service for 5 years through a period of growth and quality improvement. While the search for a permanent CEO commenced, Deputy Medical Director Dr Daniel Hunt stepped in to maintain the organisation. He concluded his tenure in May 2025 and Derbarl is grateful for his service.

We also farewelled after many years of service, Medical Director, Dr Richelle Douglas, her tenure to pursue new opportunities. We're grateful for Dr Richelle's important contributions and wish her well.



Derbarl began 2024–25 with a strong \$1.5m surplus. Revenue growth was driven in part by a 11% (\$589K) increase in Medicare billing. Strategic negotiations also secured a better deal on our daily operating account – we now receive term deposit rates without having to lock funds into fixed terms.

We received a \$500,000 donation, towards our new Midland Clinic fit-out, from the Minderoo Foundation. This clinic doubles our service capacity and introduces dental services to the Midland community. There will be one chair by mid 2026 with potential for another, subject to demand and funding.

This year East Perth dental served 1330 patients, supported by a dedicated team of 3 dentists and associated staff. We are impacted by funding constraints.

Across our four Perth clinics we also delivered 49,771 episodes of comprehensive health care and support to more than 13,477 patients.

Our children's health initiative, Derbarl Kids, continues to grow in capacity and impact. Our attendance rate for babies, children and families is 93.5% and this year's health check and GP Management Plan statistics are better than 2023-24's.

Derbarl's approved staff budget covers 200 FTE positions. At the end of the 24-25 Financial Year, our staff headcount was at 172 people including:

- 48% Aboriginal employees
- 74% female employees
- 25% male employees
- 1% non-binary individual.



"Our children's health initiative, Derbarl Kids, continues to grow in capacity and impact. Our attendance rate for babies, children and families is 93.5% and this year's health check and GP Management Plan statistics are better than 2023-24's."

Our Strategic Plan, Stronger Together 2025–2030 began operating in July 2025. We're doing an organisational health check and preparing the organisation, leadership, teams and systems for the challenges of coming decades.

The Aboriginal Advisory Committee continues to generously offer me invaluable, wise cultural advice. Thank you to Co-Chairs Patricia Yarran and Martin Penny for providing a culturally safe forum for Aboriginal employees to advise the CEO.

I again acknowledge the Board. Despite many changes and challenges, they have stayed focused on upholding cultural integrity across all aspects of governance. They maintained compliance with the Derbarl Rule Book and the Corporations (Aboriginal and Torres Strait Islander) Act 2006 and worked with our amazing staff to maintain uninterrupted care for the community.



For 52 years, Derbarl has steadfastly advocated for Aboriginal community health across Noongar Boodjar and played an important role in broader national health discussions. I am deeply committed to building on this strong and enduring legacy of community service. I'm excited to see what our incredibly committed team can achieve – together with the Aboriginal people we serve.

James Christian PSM MPA
Chief Executive Officer

Strategic Directions

During 2024–2025, Derbarl undertook a comprehensive strategic planning process to guide the organisation’s direction from 2025 to 2030.

The process was delivered by the Board in partnership with Yamagigu Consulting, and was grounded in Aboriginal ways of working, co-design, and community engagement. The intent was to build a strong, evidence-based plan that honours cultural authority and community voice while positioning Derbarl for long-term success, sustainability, and impact in Aboriginal health.

The process began in June 2024 with project inception and planning, including the development of a stakeholder engagement plan, environmental scan, and document review.

This early work established the foundation for informed decision-making, drawing on internal data, Board reports, performance dashboards, and external policy frameworks such as the National Agreement on Closing the Gap and the Western Australian Aboriginal Health and Wellbeing Framework 2015–2030. A Board SWOT workshop in August 2024 and staff survey analysis provided early insights into strengths, challenges, and priorities for organisational growth.

From July to September 2024, extensive consultations were held with Derbarl members, community, staff, and key partners including WA Health, WACHS, AHCWA, NACCHO, WAPHA, and the Mental Health Commission. A series of community yarning sessions, staff workshops, and partner interviews captured lived experience, operational perspectives, and system-wide priorities.

These consultations resulted in the Strategic Insights Report (October 2024), which identified recurring themes of cultural safety, workforce development, service accessibility, governance, and financial sustainability.

Findings from the consultation phase informed a Strategic Development Workshop with the Derbarl Board in October 2024, where the organisation’s vision, purpose, and five strategic pillars were refined. The final *Strategic Directions 2025–2030: Stronger Together* plan was endorsed later that month. The plan sets out five interconnected pillars—Patients, Community, Partnerships, Organisation, and Employees—each with clear goals, actions, and performance horizons.

This process reflects Derbarl’s commitment to community-controlled governance, evidence-based planning, and cultural integrity. It ensures that the voices of Elders, members, staff, and partners remain central to shaping a stronger, sustainable, and culturally safe health service for the next generation of Noongar people.

-  OUR PATIENTS
-  OUR COMMUNITY
-  OUR PARTNERSHIPS
-  OUR ORGANISATION
-  OUR EMPLOYEES



New Midland Clinic



The establishment of Derbarl Yerrigan Health Service in Midland began with a bold and visionary step—launching a clinic with just two dedicated staff members. This modest beginning was not just about providing healthcare; it was a statement of belief in the community’s need and a commitment to meeting it.

From those early days, the clinic has grown significantly— and in 2026 it will jump to a site more double its current size – 330m2 to 880m2. This growth is not merely a reflection of operational expansion; it is a testament to the trust the Midland community placed in Derbarl. The community recognised the value of culturally safe, accessible, and responsive healthcare, and they showed up. They engaged. They supported. And they helped shape the service into what it is today.

Derbarl extends thanks to the Commonwealth and Minderoo Foundation for their generous support and for joining us on the development journey to ensure the delivery of an innovative clinic with culture and our clients at the centre.

Smoking Ceremony

On the 11th of June, a Smoking Ceremony was performed at the new site by John Mogridge and Lyell Bowie to mark the beginning of the Clinic interior’s construction. Derbarl staff and community representatives gathered at the building and enjoyed Elder Patrick Eagan’s Welcome to Country, along with greetings from Derbarl Chair and CEO.



Cultural Immersion Workshops

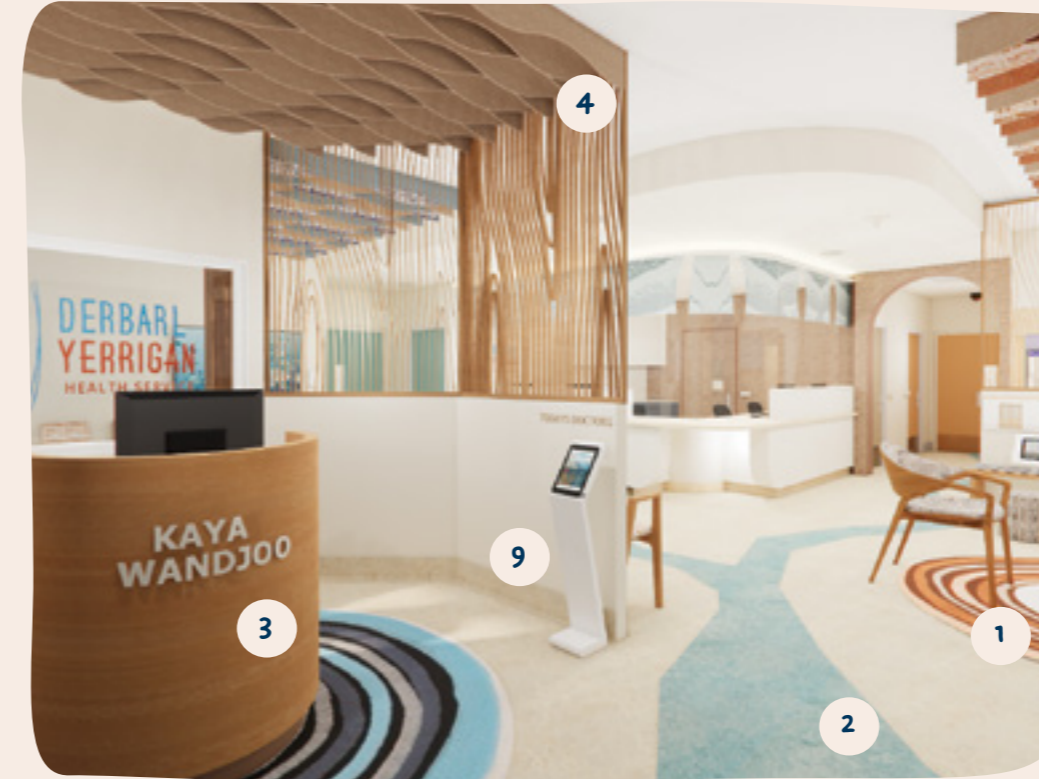
As a central pillar of the Clinic development, Derbarl hosted Cultural Immersion workshops, attended by a focus group of Community and staff to develop the look and feel of the new space.

Kambarang Services, under the leadership of Mr Danny Ford and Mr Jonathan Ford, led the cultural immersion program for the new Midland Clinic with Community members, the Aboriginal Advisory Committee, employees from the current Midland Clinic and Board members.

A report of the consultation was developed following the initial three sessions with the Working Group, and presented to Perfect Practice, the project construction company. Perfect Practice completed a review and integration of all elements of the working group report and feedback and has developed a design intent document that was presented back to the working group for endorsement on 22 July 2025. Feedback from the Working Group was exceptionally positive.

The new clinic represents a significant upgrade in available space and services, and Derbarl is very excited to get it up and running and serving the community.

The included renders may not reflect the exact end result.



Examples of how the consultation has been incorporated into the proposed design.

Ancient and Traditional Significance

Midland was a central location for cultural exchange, where communities would gather for trading and sharing knowledge.

The Derbarl Yerrigan served as a vital life source.

1) Sharing Knowledge 2) Derbarl Yerrigan / Swan River

Design and Environment

Community Members have expressed a clear vision for spaces that reflect cultural identity through both visual design and environmental features.

3) Kaya Wanjoo 4) Timber 5) Greenery

Cultural Safety and Atmosphere

Community members have emphasised the importance of creating a culturally safe and welcoming atmosphere.

Waiting areas should be designed to be comfortable and family friendly, including dedicated spaces for children to play in ways that reflect cultural values.

6) Family 7) Kids Play

Cultural Representation and Functionality

Visual representation of key cultural elements should be integrated throughout. Furniture selections should prioritise comfort and familiarity. To support learning and engagement, technology access points should be incorporated along with information corners and community event boards.

8) Cockatoo 9) QR Codes / iPads 10) Community Board



Cultural Governance

Aboriginal Advisory Committee

The Aboriginal Staff Advisory Committee (AAC) helps keep culture at the heart of everything Derbarl does by providing cultural advice and guidance to our CEO at bi-monthly meetings.

These typically include:

- discussion of cultural safety issues in Derbarl
- providing a cultural lens and clearance for new publications and business matters
- sharing local community feedback.



Key achievements of AAC in 2024–25:

- providing a local cultural lens and leadership in workshops to develop our first Cultural Governance Framework
- Thanks to funding from WA Primary Health Alliance (WAPHA), we engaged CEO, Donna Murray, of Indigenous Allied Health Australia to facilitate and had her challenge our thinking
- developing Derbarl's Cultural Governance Framework to embed our lived culture as mob, families and communities while recognising governance layers and embedding culture and cultural legitimacy
- validating cultural ways of working at Derbarl that align mutual accountability with cultural caring needs and expectations
- supporting the CEO with cultural leadership to embed the Cultural Safety Framework into everyday Derbarl practice
- engaging Kambarang Services Pty Ltd as our cultural awareness training provider
- facilitating Derbarl cultural inductions for new staff and ensuring all staff attend full day cultural awareness training every quarter



Aboriginal Advisory Committee



- working with Executive Management Team and Kambarang services to arrange cultural immersion days for the new Midland Clinic
- collaborating with Health Promotions and Social Media to organise artists and artwork for 715 health-check shirts
- overseeing Derbarl at community events of national and local importance like Survival Day, Apology Day, Sorry Day, NAIDOC and Reconciliation Week
- upgrading the East Perth Yorga and Maaman gardens.

AAC Co-Chairs: Martin Penny and Tricia Yarran

Elders Advisory Group

The Board moved to establish the Elders Advisory Group, to create a place for Elders to provide cultural advice and guidance to the Derbarl Board and Executive team. The primary goal is to strengthen cultural safety, ensure cultural accountability and enhance health and wellbeing outcomes.

The members of the group will be appointed by the Board and will be recognised cultural knowledge holders and respected Elders with direct connections to local Noongar families and Country. The group will be composed of 50% men and 50% women.

Aboriginal Health Service Delivery



Derbarl Yerrigan Health Service has entered a new phase – with leadership changes, expanded programs and a strong focus on strategy, accountability and culturally safe care. We continue our firm commitment to improving health outcomes for Aboriginal people living on, or visiting, Whadjuk Noongar Boodja.

New Leadership

In May we welcomed a new leadership team. They bring fresh perspectives and a renewed focus on strategy, working more efficiently and being more accountable. The new team is working hard to stabilise core functions, strengthen internal systems and make sure we have the right structures and processes to achieve our long-term goals.

I extend my sincere thanks to Dr Richelle Douglas, for her 5.5 years as Medical Director. She played a key role in guiding us through periods of significant growth and change.

Since Dr Richelle left in May, I have had the honour of serving as Acting Medical Director. It's been a privilege to work alongside such a dedicated and passionate team focused on the highest quality care to our community.

Growing to meet community needs

During 2024–25, all our programs grew to meet community needs and health priorities. This growth reflects not only the increasing demand for culturally safe services but also the dedication and expertise of our staff. From primary health care and chronic disease management to mental health and social support services, our programs have strengthened their reach and impact across our region. This reflects not just demand for culturally safe services but our staff's dedication and expertise.

Our teams are committed to caring for the community. Through lived experience, professional development and on-the-ground knowledge, many have become both cultural and technical experts in

their fields. This is recognised nationally, with Derbarl team members contributing to Closing the Gap targets, informing national clinical guidelines and advising on major health system reforms.

Our plans for the future

We will continue improving our services by listening to our community and using health data and best practice models.

We will build on the strong foundations already in place to develop new initiatives and strengthen existing programs. We will broaden our reach – improving health outcomes and ensuring culturally safe and accessible care for all.

By working with our partners, we will continue to create meaningful long-term change and help close the gap.

Dr Jeanita Wong
Acting Medical Director

Clinical

Whole-of-Life Care

Derbarl Kids

Paediatric and Allied Health Team

This year, we focused on stabilising our team so we can keep our waitlist open and wait times down. We are grateful for the overwhelming support from our stakeholders and positive feedback from families. We're also grateful to the generous philanthropic grants and new pilot projects that allowed us to support 288 children and their families.

Our paediatricians have maintained service for 1.5 days a week and our Allied Health Team has provided 267 sessions. These outcomes are a true credit to our dedicated staff and their close work with families in providing culturally safe and comprehensive case management. Their team work led to over 5,000 case-management interactions.

New roles

The year we welcomed a provisional psychologist, and created a new family advocate role to help families with the ongoing challenges of housing demand.

Advocacy

Our approach as an Aboriginal Community Controlled Health Service is proven to work. We will continue to promote our model of care and support families from pregnancy to the early years, through adolescence and to the transition into adulthood.

We proudly lead the way in child development and met with key decision makers and government committees for system reform including:

- Ms Emily Hamilton MLA (Parliamentary Secretary to the Minister for Education, Early Childhood and Preventative Health)
- Senator Jordan Steele-John
- Child and Adolescent Health Service (CAHS) Board



288
Children and their families supported

Our services

Our wide range of services to support the health and wellbeing of children include:

- neurodevelopmental assessments
- speech and occupational therapy
- drop-in groups and social supports
- medical reviews health checks and prescriptions
- support with Ear, Nose and Throat (ENT)
- meeting audiology, respiratory, and dermatology needs
- school support.

We were pleased to expand our ENT and audiology services to the Midland clinic.

Future directions

We will continue to build strong relationships with our government and philanthropic partners to sustain and grow our services. We've applied for a philanthropic grant for 2026. We're committed to closing the gaps in health services that affect our families, especially dental care.

NDIS Support

Supporting families who need NDIS services has been challenging this year due to recruitment issues and changes to the system. We've responded by upskilling and helping families with applications and understanding their rights.

Thanks to our funding partners, philanthropists and community advocates for your vital support and to our staff for their incredible dedication. Most importantly we thank our Derbarl families. We are honoured to walk with you. Your strength, resilience and connection to family and culture lie at the heart of everything we do.



Maternal and Child Health

Our Maternal and Child Health (MCH) Team of midwives, child health nurses, Aboriginal health practitioners and GPs supported more than 65 women with antenatal education in second half of the financial year.

We continued to provide home visits at the two-week post-natal mark, focusing on practical, compassionate care for new mums, babies and families. This tailored support included:

- help with feeding
- checking baby weight
- early identification of post-natal mental health needs
- referrals
- whole family wrap-around supports.

Feedback tells us that mums feel safe, listened to, not judged and that their choices are respected. A key milestone was lifting immunisation rates in the 6–8 week age group. We did this by recalling mums for their 6-week post-natal check and making appointments easier to attend.

Shared Antenatal and Postnatal Care

We took on a GP with obstetric training, who will work 0.3 FTE, to provide a shared antenatal and postnatal care clinic. We're developing the clinic in partnership with midwifery groups to create smooth care pathways.

Partners include:

- Aboriginal Midwifery Group Practice at King Edward Memorial Hospital
- Boodjari Yorgas
- other community midwifery services.

Strong Born Campaign

Derbarl's Strong Born event celebrated pregnancy and cultural connection, giving women and families a space to feel empowered. The campaign also helped our community better understand Fetal Alcohol Spectrum Disorder (FASD) and the importance of alcohol-free pregnancies.



"A key milestone was lifting immunisation rates in the 6–8 week age group. We did this by recalling mums for their 6-week post-natal check and making appointments easier to attend. "

Leadership and Advocacy

Derbarl staff presented at the FASD Conference sharing our community-led approach and showing why Aboriginal voices must guide service design.

Looking Ahead

We're expanding the Maternal and Child Health team to support families from conception through a child's first 2,000 days. This will ensure family support during the most formative years and strengthen long-term health and wellbeing outcomes.

We have plans to coordinate playgroups for pregnant mothers to network, yarn and build strong, lifelong friendships. We'll continue to work closely with tertiary hospitals, Aboriginal Medical Services, and midwifery programs across metropolitan Perth.

These partnerships help us:

- fill service gaps
- provide wrap-around support
- ensure families get holistic care.



Elder Care Support

Our new Elder Care Connect team is growing quickly. It regularly meets with Elders in the community to walk alongside families as they navigate systems and services. The team's success was reflected in winning WA Perth NAIDOC Program of the Year in July 2025.

Yarning Circles, which ideally contain 10 to 15 clients, allow two-way information sharing and opportunities for external services to connect with Elders and their families. In the first 6 months of 2025, our team held 27 external yarning groups and events, in collaboration with other community organisations and service providers.

The team:

- does a formal, fortnightly presentation at Heathridge Community Centre and yarns with attendees about the Elder Care Support program and My Aged Care (MAC) services
- participates in the Social and Emotional Wellbeing Support Group, sharing information about Elder Care and MAC with care and family support members.

The Elder Care Connect team is building relationships and cross-referrals, and growing community awareness of the support services available.

Visiting Specialists

Expanding our specialist services

We've expanded our network of partners to bring more specialist care to the community:

Respiratory clinics

A new partnership with East Metro Health Service and Respiratory Care WA allows us to provide lung function testing at our specialist respiratory clinics.

Dermatology clinics

To meet growing demand, we have increased referrals and appointments for our dermatology clinics, which we run in partnership with Fiona Stanley Hospital.

Optometry services

We launched a new optometry service in collaboration with the University of WA, providing essential eye care to both adults and children.

Ophthalmology services

Our successful partnership with Lions Outback Vision continues to provide vital ophthalmology services, with consistently strong referrals and attendance.

Visiting Specialists

Our rapidly expanding roster of visiting specialists cover:

- adult and paediatric dermatology
- general and developmental paediatrics
- gynaecology.

Thanks to external funding and collaboration we can provide medical specialists and health services at East Perth including:





- cardiology
- renal
- endocrinology
- dermatology
- respiratory
- geriatrics
- ophthalmology
- optometry.



Specialist clinics

Attendance at our visiting specialist clinics for adults grew significantly this year, showing a strong community need for these services.

Our key referral numbers were:

	85 Cardiology referrals
	47 Nephrology (kidney health) referrals
	21 Endocrinology (diabetes and hormones) referrals
	45 Geriatric Memory Clinic referrals

Sexual and Reproductive Health

Our Sexual Health team works across all our clinics to support staff and provide confidential advice and care to patients. We create clear, simple material to help people make informed choices about their sexual health and safer sex behaviours.

This includes:

- promoting regular testing and treatment
- the importance of knowing your status
- encouraging open conversations about consent and healthy relationships.

A key focus this year has been our syphilis testing program. It allows on-the-spot screening, education and GPs referrals. We work in close partnership with the WA Department of Health's Sexual Health and Blood Borne Virus Program to train staff and support state wide responses to the ongoing syphilis outbreak.

Collaboration is vital to our work. We partner with a wide range of services including the National Aboriginal Community Controlled Health Organisation (NACCHO) and the Aboriginal Health Council of WA (AHCWA).

Our strong partnership with Boorloo Communicable Disease Control means we attend Metropolitan Syphilis Outbreak Response (MSORT) working groups for priority at-risk cohorts – pregnant women and homeless or street populations.

Derbarl provides all these response groups with culturally safe perspectives arising from lived Aboriginal community experience.

Our Sexual Health team also partners with King Edward Health Services and Sexual Health Quarters to deliver women's community health clinics. These provide essential care, including contraception and gynaecological health.

The Sexual Health team have presented our successful responses to syphilis and Hepatitis C at key health conferences and forums including:

- the WA Department of Health Quarterly STI/BBV forum
- the NACCHO Conference
- Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine's (ASHM's) Viral Hepatitis Conference
- Community Health Promotion events.

Our health promotions team create and share important sexual health messages. This year they developed a campaign for Sexual Health Week 2025 across Facebook and Instagram. All content is developed in consultation with the Derbarl Yerrigan Aboriginal Advisory Committee to ensure it is culturally safe and effective.



Presentations:

- AHCWA Sexual Health workshop – March 2025
- Sexual Health Week – DYHS East Perth clinic
- Sexual Health Week – DYHS Maddington clinic
- Sexual Health Week – DYHS Midland clinic
- Sexual Health Week – DYHS Mirrabooka clinic
- Curtin University – Cultural Awareness – April 2025
- Women's Health Day Event – May 2025
- Metro school presentations x 2 – Sexual Health
- NAIDOC Week July 2025



Collaboration/liasing with:

- Western Australian Syphilis Outbreak Response Group (WASORG)
- SORG Syphilis Metro Response team
- WA Metropolitan Syphilis Outbreak Response team
- Boorloo Public Health Unit/ Metropolitan Communicable Disease Control
- WA Department of Health's Sexual Health Blood-borne Virus Program
- Northern Territory Syphilis Register team
- NACCHO
- Aboriginal Health Council of Western Australia (AHCWA)
- Homeless Healthcare
- Sexual Health Quarters
- Peer Based Harm Reduction
- Hepatitis WA
- East Metropolitan Health Service
- King Edward Memorial Hospital – North Metropolitan Health Service
- MSORT Syphilis in Pregnancy Working Group
- MSORT People Who Experience Homelessness Working Group



Wins:

- Increased gynaecology clinics to fortnightly
- Outreach clinic collaboration with King Edward Memorial Hospital
- Monthly clinics for women about contraception
- Collaboration with Royal Perth Hospital gastroenterology and hepatology services to plan Hep B outreach and Fibroscan clinics at Derbarl
- AHCWA Grants for health promotion and community engagement

Chronic Disease Management

Rheumatic Heart Disease

Derbarl Yerrigan has established a dedicated team to lead the ARF/RHD Project, an initiative funded by the National Aboriginal Community Controlled Health Organisation (NACCHO). This project forms part of Australia's evidence-based national strategy aimed at eliminating Rheumatic Heart Disease (RHD) within the next decade.

Derbarl Yerrigan has adopted the slogan "Let's End RHD." Rheumatic Heart Disease (RHD) is a preventable condition that represents a profound health inequity, disproportionately affecting Aboriginal and Torres Strait Islander peoples.



Recognising the complexity of this challenge, Derbarl Yerrigan is focusing on five key priority areas. There is no single or simple solution—addressing RHD requires a comprehensive and collective effort across all areas of action.

Key Priority Areas

- Aboriginal Leadership
- Community-Based Programs
- Healthy Environments
- Early Prevention
- Care and Support for People Living with ARF and RHD

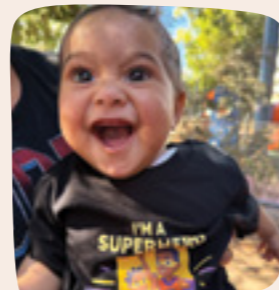
Healthy Environments Addressing the Social Determinants of Health

The Healthy Environments program focuses on improving living conditions and raising awareness about the connection between home environments and health outcomes. The team conducts home assessments and home education on personal and environmental hygiene.

Referrals were made for family home assessments, with 55 families visited. During these visits, families received:

- environmental health products through Healthy Living Bags
- home assessments with a large focus on waste removal & pest control
- education and support on maintaining clean and healthy homes
- information on ARF and RHD, including early intervention strategies for managing school sores and sore throats.

Families were also provided with guidance on personal and environmental hygiene to help prevent infections and reduce the risk of Acute Rheumatic Fever (ARF) and Rheumatic Heart Disease.



Ongoing Data and Clinical Quality Improvements

Regular liaison with the State RHD Register ensures records are accurate and reconciled for all individuals living with ARF or RHD, Derbarl Yerrigan have 393 clients with ARF/RHD diagnosis. Comprehensive RHD audits have been completed for all current and regular clients, with echocardiogram and cardiology reports sourced and uploaded into Communicare.

Improved Access to Cardiology and Echo Services

Efforts have been made to improve access to specialist cardiac care:

- All pregnant women attending Derbarl Yerrigan are reviewed to identify those at risk of ARF/RHD.
- "At-risk" pregnant women are provided with echo referrals to ensure early detection and management.
- Echo & Cardiology clinics have been established and are held regularly at Derbarl Yerrigan Health Service, East Perth, providing accessible, culturally safe cardiac care for clients. 4 echo clinics have been conducted at East Perth clinic, 100% of clients with overdue echos due have been offered an echo appointment. A client with a new diagnosis of Moderate RHD was discovered in one of our echo clinics, this client is for review in 6 months with the possibility of facing heart surgery.
- Increased recalls for Bicillin compliance, echo and cardiology appointments, and monthly site-reports.

Collaboration and Community

Early prevention activities have focused on increasing awareness of Group A Strep (GAS), Acute Rheumatic Fever and Rheumatic Heart Disease through community-led education and culturally safe engagement.

Mums and Bubs Yarning Group

Sessions held on personal and environmental hygiene, including a bicarb and vinegar workshop demonstrating how to make affordable, safe cleaning products.

Elders Group – Maddington

Delivered education on domestic and personal hygiene, ARF/RHD awareness, and the impact of living environments on overall health. Healthy Skin Packs were distributed to support good hygiene practices.

Hospital Outreach

Visits to Sir Charles Gairdner and King Edward Memorial Hospitals to raise awareness of ARF/RHD causes, symptoms, and treatment options among patients and community members.

"There is no single or simple solution—addressing RHD requires a comprehensive and collective effort across all areas of action."



NAIDOC Champion Centre, Armadale & Bendat Basketball Binar Health Embassy

Derbarl Yerrigan hosted an ARF RHD information booth – promoting services and education on GAS, ARF, and RHD.

Over two days, 604 participants completed health checks and received education, with 386 people engaged on day one and 218 on day two.

Baby Expo 2025 – Koongamia

ARF/RHD awareness activities including an interactive "dolly wash" for children to learn about hygiene and healthy skin.

NAIDOC Midland

Information booth providing education and resources about ARF/RHD prevention and care.

Raising Awareness and Improving Care for ARF and RHD at Derbarl Yerrigan

Derbarl Yerrigan continues to lead education and clinical programs to prevent and manage Acute Rheumatic Fever and Rheumatic Heart Disease.

Community Education:

- A new superhero-themed pamphlet featuring Derbarl boy Marli educates on the link between skin sores, sore throats, and ARF.
- Posters reinforcing key messages about Strep A, ARF, and RHD prevention were displayed across all four clinic sites (Midland, Mirrabooka, Maddington, and East Perth).



Clinical Initiatives:

- A Bicillin survey was conducted to understand and improve treatment adherence.
- The My Needle My Way program was introduced to promote self-determination and to reduce pain during regular Bicillin injections.
- All Aboriginal Health Practitioners and nurses received Pain Minimisation Toolkit training, particularly for children under 10.
- Clinics were supplied with resource packs, including pamphlets, distraction tools, shot blockers, colouring pages, and “Let’s End RHD” flyers.
- A new clinical item in Communicare supports ongoing data capture and reporting.
- The East Perth clinic hosts an RHD Walk-In Clinic every Tuesday (9:00 am–12:00 pm), with 15 sessions held to date.
- To enhance treatment options, Derbarl is participating in current research on subcutaneous Bicillin delivery (SCIP), in collaboration with the Telethon Kids Institute, aimed at reducing pain and improving patient experience and decreasing disease burden.



Heart Health

Derbarl was pleased to launch our Heart Health Program in 2025.

The program provides a culturally safe environment to yarn about heart health and receive direct help in managing heart disease through group physical activities with an exercise physiologist, education and individual Heart Health Management Plans.

Derbarl was joined by representatives from the Heart Foundation at the launch event where patients shared their stories and spoke of the great success of the program so far, and Heart Foundation CEO David Lloyd expressed the organisation’s support for the initiative and on the need for similar programs around the country.



Needle and Syringe Program

Derbarl is the only ACCHO in the State which offers a Needle and Syringe Program to ensure harm minimisation for people using intravenous drugs, reducing the chance of transmission of blood borne viruses including Hepatitis C.

Derbarl will continue to implement new technology to improve record keeping and data collection. Across our clinics, 4982 fit packs were provided.



Research

The Derbarl Research Program grew significantly over 2024–25. We started nine new projects, bringing our total to 11, with five more planned.

We have more projects because:

- research is now a key priority
- we're strengthening partnerships with leading research institutions.

To support this growth, we've appointed a dedicated research manager to lead the management of the Research Programme Portfolio and expanded the research team with Aboriginal Health Workers (AHWs) and Aboriginal Research Officers to lead and support the implementation of specific projects.

Finances and staffing

- current operational research portfolio: ~ \$2.0 m
- research budget secured in 2024–25: > \$1.65 m
- dedicated staff for five projects
- nine staff fully or partly employed by research projects by end of Q4 2025
- funds earmarked for a new staff member in Q1 2026, with ongoing discussion around budget for others.

Our close work with the following partners made these investments possible:

- The Kids Research Institute Australia
- University of Western Australia
- Edith Cowan University
- University of Melbourne.

Portfolio status

- 11 operational projects (9 ongoing, 2 starting)
- five approved but not operational (4 expected to start by 31 December 2025)

Research – Clinical linkages

Research is tightly integrated with Derbarl's health services, so our findings translate into direct community benefit. These research areas reflect the main health issues seen in Derbarl's clinics:

- cardiovascular health
- infectious diseases (including Sexually Transmitted Infections (STIs) and Blood-Borne Viruses (BBVs, like Hepatitis)
- rheumatic heart disease
- skin diseases
- social and emotional wellbeing (SEWB).

Flagship Program

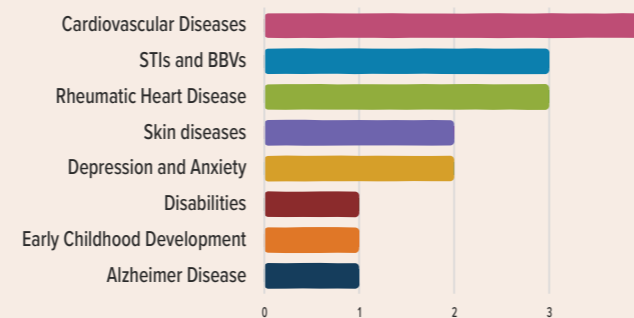
The Australian Strep A Vaccine Initiative (ASAVI)

Aboriginal children are at high risk of developing rheumatic heart disease due to frequent infections.

In partnership with the Kids Institute, this project targets the leading bacterial cause of recurrent sore throats and skin sores – Strep A.

ASAVI aims to deliver the first-ever Strep A vaccine.

Number of Projects in Key Areas



Thematic priorities

Our research activities also address ten themes:

- chronic and non-communicable disease prevention and management
- health promotion and education
- clinical trials and therapeutics
- epidemiology, data science and modelling
- health systems strengthening and infrastructure
- infectious disease control and surveillance
- primary health care and service delivery
- maternal, child and adolescent health
- mental health and SEWB
- health equity

Governance

The Research and Development subcommittee and the Board of Directors review all research proposals to ensure they align with community priorities.

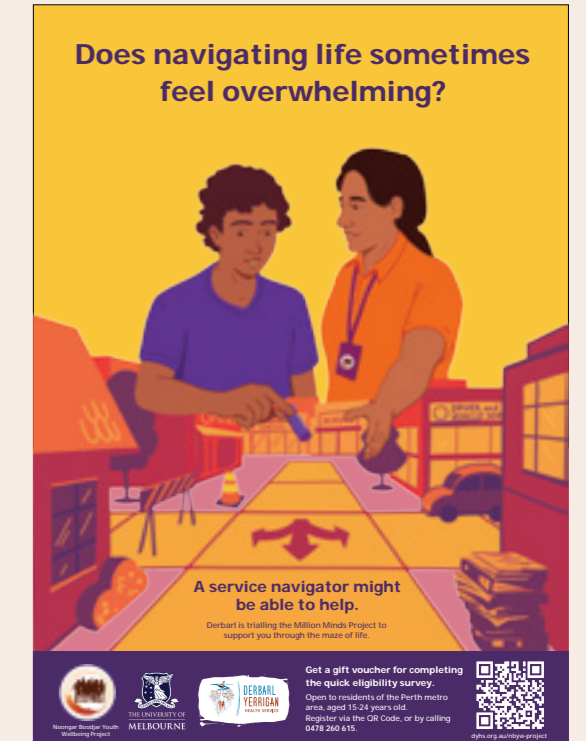
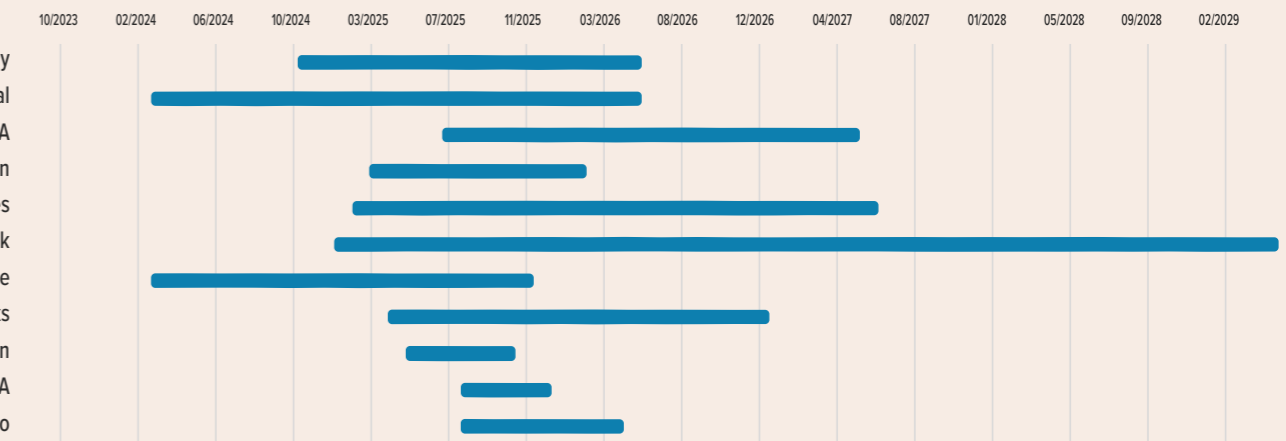
Derbarl Research and Development subcommittee evaluates both projects seeking direct Derbarl involvement, as well as projects that require a letter of recommendation for submission to WAAHEC (Western Australian Aboriginal Health Committee). This is to ensure that all projects implemented in Perth Metropolitan Region demonstrate appropriate consultation and understanding of the local context and priorities.

To get Derbarl's direct input a project must meet the following criteria:

- research is co-designed by us
- there's funding for Derbarl
- Aboriginal staff are acknowledged and involved.

Research Projects

- (ASAVI) Phase 2 - Active surveillance of Pharyngitis through a Sore Throat Study
- Next Generation (P 2) Youth Service Navigation Trial
- Development of an Urban KICA
- Maawit Maladjin
- Equitable Access to Health and Disability Services
- The ATLAS Indigenous Primary Care Surveillance and Research Network
- Yorga Moorditj Kooritj (YMK) Women's Solid Hearts - Phase One
- Koolungar Moorditj Marp - Healthy Skin Storybooks
- RETFound Aboriginal Australian Population
- Ngangk Ngabala Ngoonda (Sun Safety) of Young Mob of WA
- Yorga Moorditj Kooritj (YMK) Women's Solid Hearts - Phase Two



Social and Emotional Wellbeing

Supporting Social and Emotional Wellbeing

SEWB is about caring for every part of a person – their mind, heart, spirit and connections to culture and community.

By growing partnerships with local organisations, the SEWB team is helping strengthen social ties and create better support for our community's social and emotional wellbeing.



New Projects

Our Social and Emotional Wellbeing (SEWB) team has worked on some important new projects this year. Here are some of the highlights:

Cancer Support Program

We secured national funding from Cancer Australia to co-design and deliver culturally safe support for community members affected by cancer.

Aftercare support

We co-designed a new service, funded through Culture Care Connect, with a strong focus on suicide prevention, and tailored follow-up care after a suicide attempt for Aboriginal people in Perth.

Regional Suicide Prevention Plan

We worked with community members and partners, including Culture Care Connect, to create a local plan for suicide prevention across Perth metro and regional areas.

Healing for Families

With funding from the National Indigenous Australians Agency (NIAA) we worked with local Aboriginal communities to co-design a new service that provides holistic support for the entire family.



Family and Domestic Violence Support

We partnered with the WA Primary Health Alliance (WAPHA) on a pilot program to make it easier for people to access support for family, domestic and sexual violence within general practice. Our SEWB team leads this work within the Aboriginal community.

Ongoing Programs

Family and Domestic Violence Program

With more funding from the Aboriginal Health Council of Western Australia (AHCWA), we have strengthened our services to support community members experiencing family, domestic and sexual violence.

Community Liaison Officer (CLO) Service

We secured funding from the Mental Health Commission to continue our CLO service. Our CLOs provide a vital link between cultural and clinical services in suicide prevention and mental health care.

Wiern Moortidj Program

This unique program supports families and communities through holistic healing and it continues to grow.

Culture Care Connect

Our Culture Care Connect (CCC) program continues to deliver suicide prevention, after care and post intervention services. This work is led by the community and guided by Aboriginal cultural governance.

More Successes

New Clinical Leadership

We welcomed our first Clinical Psychologist, who now leads the Wiern Moortidj Program. This role adds valuable clinical experience and strengthens our team.

Securing Major Funding

We successfully secured several major grants for cancer support, suicide prevention and family healing programs.

Building Community Trust

We saw large and consistent turnouts at suicide prevention events, yarning circles, cancer support sessions and family healing activities. This shows the strong trust and support we have within the community.

Leading with Community

Our SEWB team continues to lead the way in co-designing our services. We work closely with Elders, survivors, carers and other Aboriginal organisations to ensure lived experience is part of everything we do.

Stronger Partnerships

We expanded our partnerships with Wungening, Yorgum, Anglicare WA, Lifeline WA, AHCWA and others, to create a more connected and effective service system for our community.

Developing our Team

We are committed to professional development for our staff, through ongoing training and upskilling. We are embedding Clinical Psychology leadership within the organisation.

Sharing Our Knowledge

The SEWB team were active in ongoing professional development and clinical and cultural supervision. They also represented us at local and national conferences and were part of important conversations, sharing our leadership in Aboriginal health and wellbeing.



Health Promotions

Our health promotions team connects our community with timely advice and information to support healthy active lifestyles. They support other teams across all Derbarl departments to get their messages out.

In line with the new strategic plan, the team will continue to grow, connect with more people and keep our services visible and accessible.

The team has been busy yarning with mob all year. Here are some of the highlights.

**AUG
2nd**



National Aboriginal and Torres Strait Islander Children's Day

**SEPT
2nd**



Women's Health Week

**SEPT
12th**



R U OK! Day & Suicide Prevention Day

**OCT
10th**



Noongar Radio Family Day

**FEB
3rd**



Back to School

**NOV
4th**



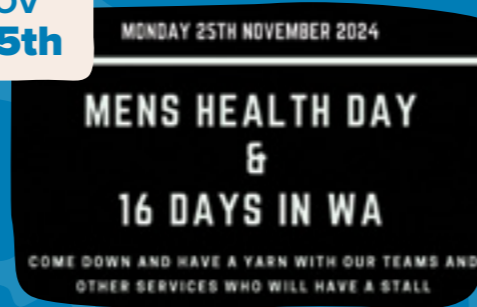
National Diabetes Day

**NOV
1st**



Lung Cancer Awareness Month

**NOV
25th**



Men's Health Day, Movember and 16 Days in WA.

**DEC
5th**

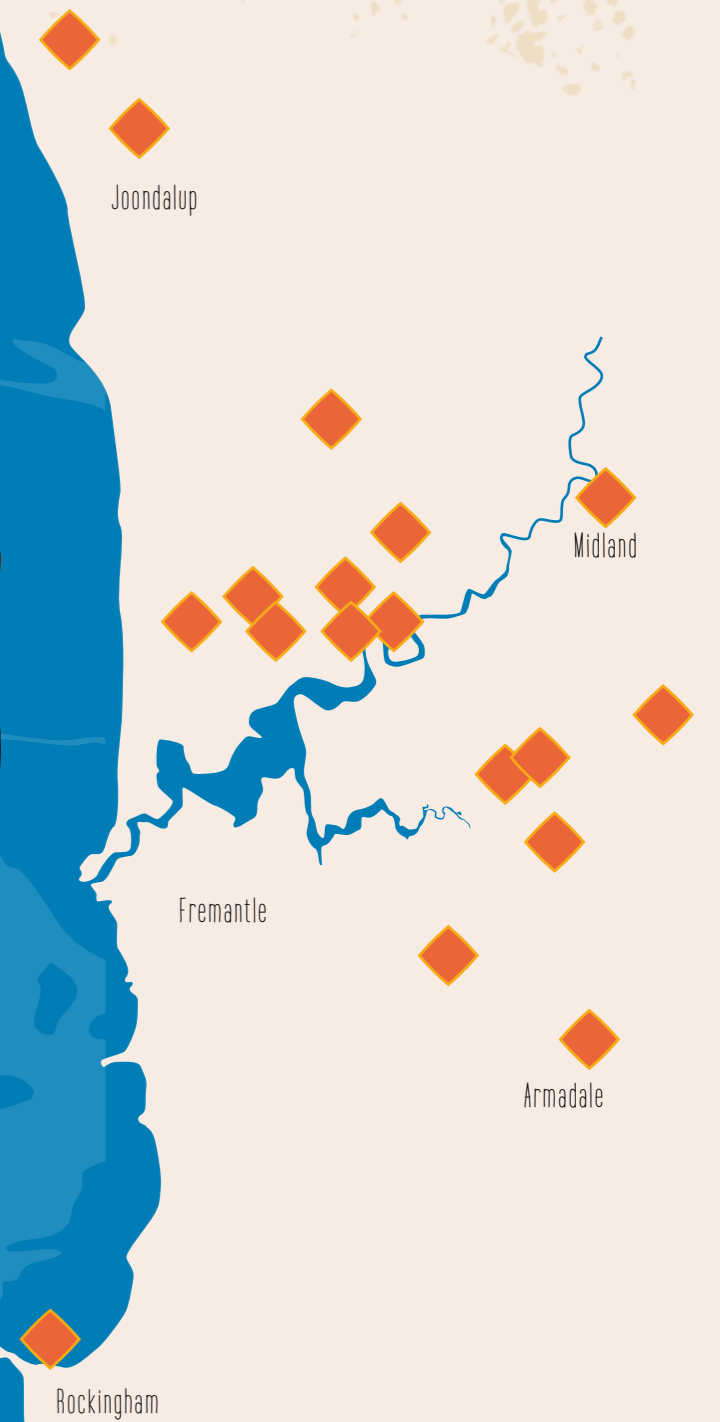


Seniors' Day

**MAR
18th**



Strong Born Maternity Photoshoot



Environmental Health

Our Environmental Health program delivers holistic and culturally responsive community care to our metro clients. It keeps Derbarl patients healthy and in healthy homes, improves wellbeing and helps prevent communicable and chronic health conditions.

Home support services include:

- waste management and removal
- cleaning education and pest control
- access to available social supports
- healthy living information
- support letters and housing assistance
- community liaison
- comprehensive health assessments.



We give the 'Derbarl Easy Cleaning Booklet' to each client after a home assessment or referral. The booklet provides practical advice for keeping a healthy home environment.

Our Environmental Health Workers (EHW) provide a vital service to all patients. They collaborate with other Derbarl teams and are also working with remote teams to adapt their approach to metropolitan Perth.

“Our Environmental Health program ...keeps Derbarl patients healthy and in healthy homes, improves wellbeing and helps prevent communicable and chronic health conditions.”

As patient numbers grow rapidly, and disease and infection linked to environmental health issues rise, we need sustained and expanded investment in this area.

The program is looking for opportunities to meet growing needs in the community. We would like to include an advocacy role and a female environmental health officer to ensure Derbarl is providing the necessary supports. We will continue to explore additional funding avenues through new or existing partnerships.



Wugen Wal-Yan

Tackling Indigenous Smoking

We continued to subcontract the Tackling Indigenous Smoking (TIS) program to the Aboriginal Health Council of Western Australia (AHCWA). TIS aims to reduce smoking and vaping by helping people quit and preventing them from starting.

The Derbarl Wugen Wal-Yan (Healthy Lungs) team had a very successful year. They:

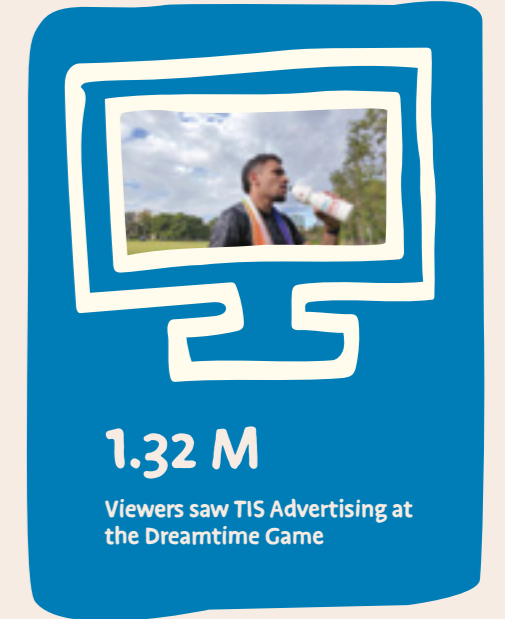
- shared the TIS message at 65 community events
- ran smoking and vaping awareness sessions for 1,200 students at 57 school visits
- reached 254 mothers, via fortnightly visits, through our partnership with King Edward Memorial Hospital for Women.

TIS Events

We organised our annual Wugen Wal-Yan Indigenous Baseball event with Baseball WA.

We held the Wugen Wal-Yan World No Tobacco Day event with stars, Clontarf and Deadly Sister Girls. Nearly 100 students from six schools attended.

Our ongoing partnership with Fremantle AFL club meant we were able to share the non-smoking message at every home game of the season. This included the Dreamtime game at Optus Oval, which featured a Derbarl Wugen Wal-Yan promotional ad, seen by up to 1.32 million viewers.



Dental Services

1,600

Dental Exams

768

Teeth Extracted

890

Emergency Appointments

795

Fillings (teeth restored)

1007

Non-Emergency Appointments

63

Full dentures made

261

Clients referred to GP

71

Partial dentures made

Derbarl provides culturally appropriate dental care to Aboriginal people aged 13 and above.

It's one of only a few such services in WA. Regular Derbarl patients or clients who've had an Aboriginal Health Check by a GP can get:

- emergency treatment
- scales and cleans
- fillings (restorations)
- root canal therapy
- extractions
- dentures
- crown and bridgework
- mouthguards.

This year the University of Western Australia (UWA) Dental School and Derbarl offered fortnightly clinics with a specialist to investigate non-dental oral conditions. This is the only oral medical service embedded in an Aboriginal Community Controlled Health Organisation (ACCHO) in WA.

UWA dental registrars are treating patients in our East Perth walk-in clinic and are streamlining the referral pathway to dental specialists at WA's Oral Health Care Centre. Derbarl is also talking to North Metropolitan TAFE about placing dental assistant students there.

This year we expanded our capability to store reverse osmosis water and send it to our sterilisation and disinfection plants. This will ensure we meet the highest standards of infection control. In addition, new state-of-the-art scaling and powder therapy equipment will improve the patient experience.



CQI

Continuous quality improvement program

Our Clinical Quality Improvement (CQI) program has matured over five years into a model driving real change.

By introducing CQI initiatives we've:

- increased audit completion rates
- clarified management processes
- built a system that other organisations now look to for guidance.

We are proud of the fact that the program has attracted national interest and recognition for its positive impact on Aboriginal health outcomes.

Using data to improve care

Good quality data helps us improve Aboriginal health. Our approach focuses on:

- collecting and analysing meaningful data
- sharing insights across our teams
- using evidence-based tools and resources
- supporting high-quality improvements in healthcare delivery.

These elements work together to improve health outcomes for our community.

Partnership with University of Notre Dame

We're partnering with University of Notre Dame to strengthen our clinical capacity. Through this partnership medical students work in our clinics, under the supervision of two senior GPs, conducting clinical audits in areas we've identified.

Leading clinical excellence

Derbarl shared our model at 12 conferences this year, including the Aboriginal Health and Medical Research Council of NSW and NACCHO's CEO Forum.

We're proudly leading the country in managing patients with Hepatitis C, achieving a 96% clearance rate for antibody positive patients.

Key CQI projects this reporting year included:

- Hepatitis C And B Management
- Rheumatic Heart Disease
- Heart Failure Audit
- Kidney Transplant Work Up
- Notre Dame Student Audits
- National Key Performance Indicators (NKPIS)
- Customised Communicare Audit Reports And Clinical Items
- Women's Health Cancer Screening.



Enabling Services

IT and Facilities

IT highlights

Cyber security upgrade

We partnered with Lindentech to set up our new ultimate cyber security service and a Security Operations Centre to greatly improve threat detection, incident response and compliance.

Monthly cyber review meetings and better reporting has fostered stronger cyber awareness.

Essential 8 security roll out

Critical to our cyber security plan was the adoption and deployment of the Australian Cyber Security Centre's Essential Eight controls, which bolsters our cyber security, reduces threats and better aligns Derbarl with the national standard. This saw major work for the organisation to ensure best practice cyber security equipment, policies and procedures are operational and operating across all areas of the organisation.

IT Plan

A new IT plan for the next five years commenced development in line with the organisation's Strategic Plan.

New hardware and desk phones

In October/November all users will get new monitors, keyboards and mice, as well as upgrading our computer operating systems to Microsoft Windows 11. We've replaced outdated Polycom desk phones with new Yealink devices.

"This saw major work for the organisation to ensure best practice cyber security equipment, policies and procedures are operational and operating across all areas of the organisation."

Assets and facilities highlights

Room 16 Division Project – East Perth Clinic

This \$125,000 project divides Room 16 into five consultation rooms which will house our new relocated and growing Optometry Services.

Dental Air Conditioning Upgrade – East Perth Clinic

A major improvement to our East Perth Dental Clinic, with a \$55,000 project that replaced the old ducted system in the dental rooms with four new split systems.

Soundproofing Project – all clinics

As part of our ongoing \$300,000 Maintenance Grant, we commenced soundproofing improvements for all four clinics. A variety of strategies are being trailed before final solution are deployed.

Outdoor Improvements

Two additional grants were obtained for improvements at East Perth Clinic for a new front entrance awning and a gazebo for the Uncle Arnold Yarning Circle. These are scheduled to be completed before the end of 2025.

Communications

Media highlights

Social media growth

Our Facebook and Instagram reach grew 31% and 194% respectively. LinkedIn has steadily improved, peaking at a comparative 199% growth from one month to the next.

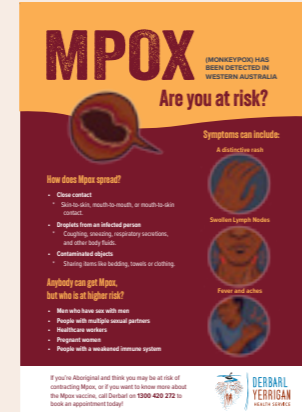
New promotional materials

A fresh, colourful and contemporary feel for our sexual health materials and the 'Easy Cleaning' environmental health booklet have better engaged young people. Key health messages are reinforced with vibrant banners, posters and branded items that capture community attention.

Website upgrade

The Derbarl website is undergoing a review and is being work-shopped to better suit the needs of the community and the organisation. Redeveloping our site is progressing strongly with two of three development workshops now complete.

These sessions provided valuable insights into the new site's structure and functionality and mark an important step forward for our online presence.



People Services

At Derbarl Yerrigan Health Service, our people are our greatest strength. In 2024–2025, we took bold steps to create a workplace where safety, respect and cultural integrity are at the heart of everything we do. This year has been one of transformation. We've delivered real results, strengthened governance, and built momentum toward a positive, proactive culture where our people can thrive.

Work Health and Safety

Building on our progress from 2024, we reminded the entire team that safety is everyone's responsibility – from leadership to frontline staff. A thorough psychosocial hazard risk assessment showed we are leaders in complying with the Work Health and Safety Act 2020. But we didn't stop at meeting requirements. We raised the bar, setting new standards for how Derbarl protects and supports our people every day.

There is no place for lateral violence¹ at Derbarl. We took steps to make this message clear across the organisation.

All staff participated in an interactive face-to-face training session, designed to raise awareness and strengthen their skills in respectful communication and conflict resolution. This was just the beginning as we tackle the problem head on.

Looking ahead we plan to hold a workshop with Australia's leading expert on lateral violence. We're driving a culture of safety, unity and respect by giving staff the tools they need to recognise and address this issue.

We also re-imagined staff consultation on work health and safety (WHS) so everyone has a real say. A new work WHS Committee and a network of health and safety representatives allow staff to guide decisions. Daily, clinic huddles create an 'action-first' approach where concerns are quickly resolved with our CEO there in person reinforcing the importance of psychosocial safety and respect.

Our approach to injury management is much better too. Capacity assessments now happen within hours of an incident and care arrives quicker. This more proactive approach keeps claims from escalating. Our results speak volumes.



¹ Lateral violence is often thought of as 'in-fighting' between people from the same group who have historically been oppressed. It can show up as trying to tear at someone's identity, in the same way that governments/ settler-colonisers do. In the workplace, lateral violence includes things like gossiping, bullying and put-downs and it affects everyone – workers, managers, employers, boards, volunteers and visitors. <https://www.sbs.com.au/nitv/article/lateral-violence-explained-how-to-deal-with-its-many-forms/f6s54whcp>

The shift is clear. Derbarl is no longer responding to problems. We are preventing them. Wellbeing is crucial to safety. Our people have growing confidence to step up and report potential hazards when they appear and to shape solutions.

People Services

This year, our workforce became even stronger, more capable and more deeply connected to the communities we serve. Recruitment was strong, but our focus was on more than just filling positions. We invested in building a culturally respectful, future ready team with clear pathways for growth and leadership.

We continued to employ more Aboriginal people so we live our vision of a workforce that reflects, represents and resonates with community. We also invested in the next generation of leaders.

Staff are completing nationally recognised qualifications, including:

- Certificate IV Aboriginal Health Practice
- Certificate IV Community Health
- Certificate IV Human Resources Management
- Certificate IV Leadership and Frontline Management
- Diploma Leadership and Management
- Diploma Project Management.

This formal training, combined with leadership workshops and professional supervision, give our people the confidence and skills to step into leadership roles.

Cultural integrity continued to anchor our strategies to shape a workplace where everyone feels safe, valued, and respected. We:

- strengthened recruitment processes with cultural security front of mind
- embedded cultural awareness training into inductions
- shared protective policies against bullying and harassment.

Engagement has surged. Town Hall meetings, our half day Staff Summit, full day Staff Summit and volunteer planning committees provide new ways for staff voices to be heard – and heard loudly. Our initiatives aren't just improving communication. They're building pride and ownership as staff directly shape the future of Derbarl.



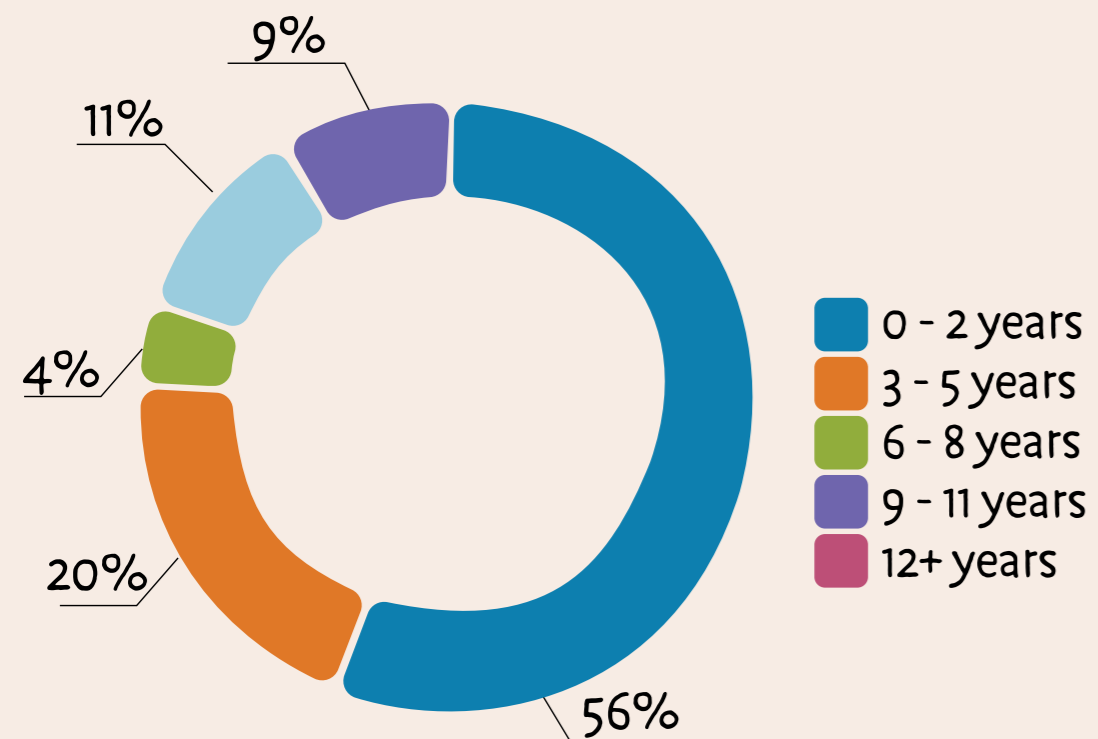
Looking Ahead

We have achieved a lot this year. Derbarl's foundations have been made stronger by people who are living our values of cultural integrity, equity and social justice, honesty, professionalism, quality care and respect. Our workplace is rising to greet the opportunities ahead.

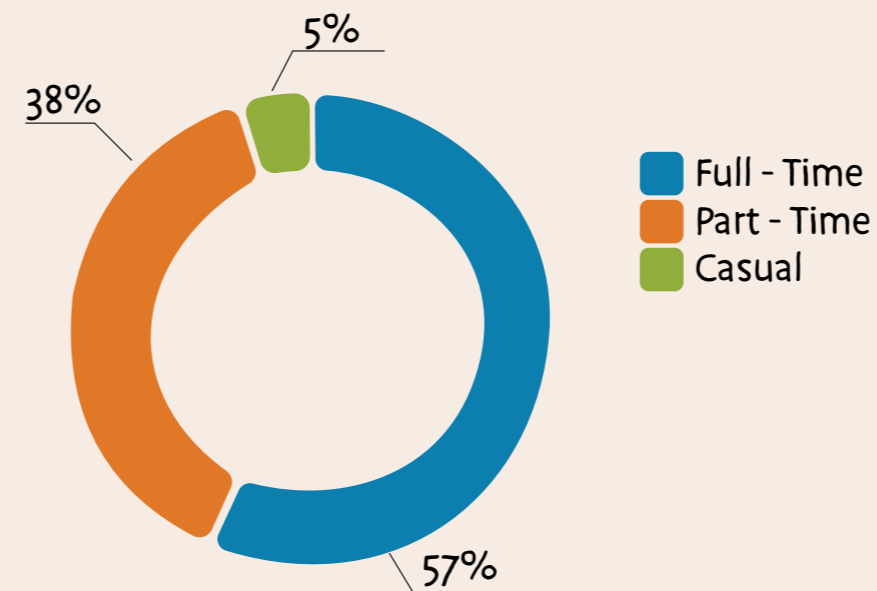
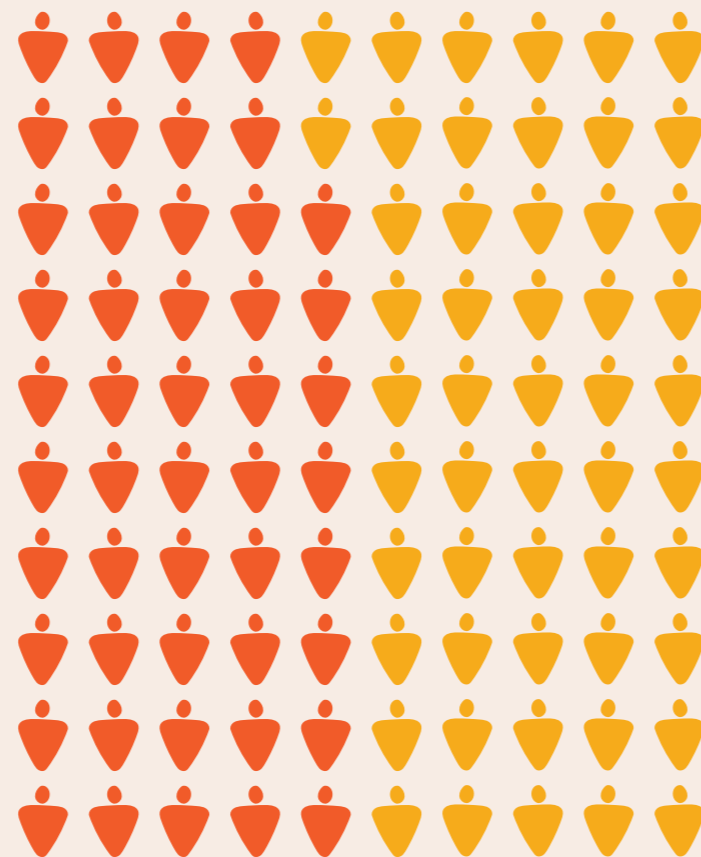
We will create deeper layers of safety, respect, and inclusion, expand pathways to Aboriginal leadership and refine workforce planning so we're not only sustainable, but agile in meeting community needs. Great things are possible.



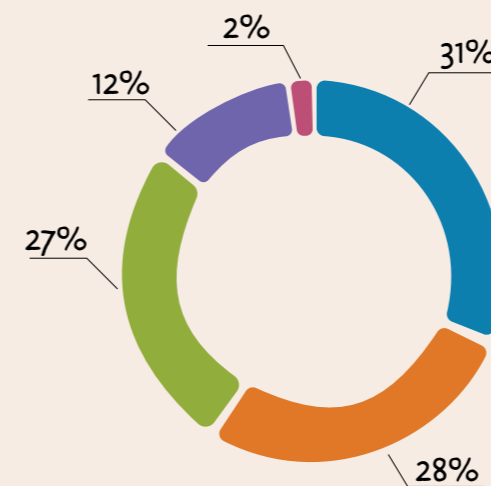
Workforce



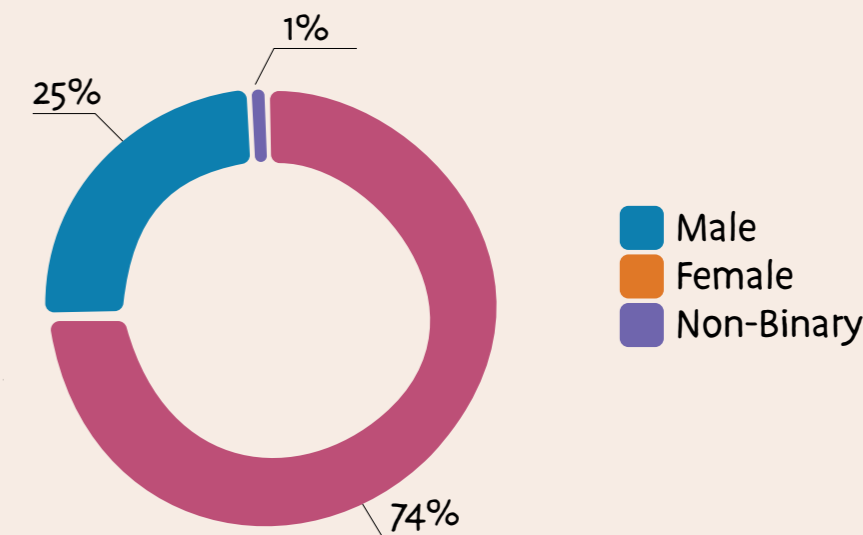
Employment Tenure



Employment type



Age Diversity



Gender Diversity

Staff Recognition

AHCWA Awards

Elder in the Community Award

Diane Ugle

Aboriginal Health Practitioner

Diane has worked at Derbarl for 17 years and is currently situated in the Mirrabooka service, and serves as Acting Clinic Manager when needed. She is a valued and hard-working member of team Derbarl.

Young Achiever Award

Bianca Penny (Collard)

Clinic Manager

Bianca started her journey at Derbarl as a receptionist, stepping into the role of Aboriginal Liaison Officer, then Aboriginal Health Practitioner and now Clinic Manager. Bianca is an aspiring leader in the Derbarl community.

Elder in the Contribution by an ACCHS Employee Award

Daniel Ryan

Handyman / Gardener

Daniel has been with Derbarl for 25 years – he is the handyman/gardener – and is always available to assist staff and patients. Daniel ensures through his dedicated work that all staff and patients are provided with a safe space to work and receive care.

2025 Perth NAIDOC Awards

Nursing & Midwifery Award (State-wide)

Rowie Winmar

This is awarded to an individual who provides care within health and acknowledges their excellence in delivering safe, quality care to the community. As an enrolled nurse (EN), Rowie has been a valued member of the Derbarl Yerrigan Health Service paediatric team for the past three years. Throughout her time at Derbarl, Rowie has consistently demonstrated compassion, professionalism, and a deep commitment to improving the health and wellbeing of Aboriginal children and families. Rowie's paediatric clinics consistently achieve over 90% attendance, a remarkable outcome that reflects the deep trust families place in her care.



Program of the Year Award

Elders Care Connect

Program of the Year recognises Not-for-profit organisations that deliver quality programs to the Aboriginal and Torres Strait Islander community. Derbarl's Elder Care Connect team's work directly addresses systemic barriers and is grounded in cultural knowledge, compassion, and community connection. Despite limited resources, they have helped establish a model that engages with over 90 Elders each month through yarning circles, educational sessions, and community outreach. Their ability to connect with Elders, listen deeply, and respond with culturally appropriate support has been instrumental in the program's success.



Staff Summit Awards

At our late year Staff Summit we recognised and celebrated the achievements and service of our staff and their contributions to our community.

Service Awards

5 Years

Richelle Douglas

Lily Hiew

Debalina Gon Chaudhury

Borut Klopčič

Cherylee Wallam

10 Years

Esther Staniland

John Dickie

Pooja Bharti

Kelly Hart

Himadri Ellepola

Ingeborg Shea

Josephus De Jong

Margo Richardson

Cecilia Cox

15 Years

Michelle Little

Susan Prosser

20 Years

Shelley Thorne

Aunty Joan Winch Award

Kira Kenney

Extraordinary commitment to Aboriginal health through collaboration, respect, integrity and humility

Innovation & Quality Award

Dr Lakhbinder Kang

Dedication to improving processes and quality care.

Rookie Award

Lacey Harrison

Recognising the impact and progress made by an individual in their first year with Team Derbarl.

Customer Service Award

Hope Ugle-Hayward

Outstanding service to clients - demonstrating outstanding teamwork - for taking pride in your work - and inspiring us to go above and beyond in all that we do.

Living Derbarl Vision Award

Marion Davies

Embracing and living the Derbarl values.

Inspirational Award

Samantha Foster

Selfless service and dedication to inspiring students early in their careers, by the sharing of on-the-job knowledge and experience

CEO Award

Dr Ingeborg Shea

Embracing and living the Derbarl values, and consistently going above and beyond for her patients.

CEO Award

Kellie Kickett

Embracing and living the Derbarl values and providing absolute dedication to our elders.

CEO Award

Anisha Mouvery

Embracing and living the Derbarl values and providing high quality and diligent support to team Derbarl.

CEO Award

Cowan Bonson

Embracing and living the Derbarl values and being responsive to the needs of team Derbarl.

CEO Award

Abhilash Karunakaran

Embracing and living the Derbarl values and being a conscientious, compassionate and trusted Chief Financial Officer.

Finance

Financial Report

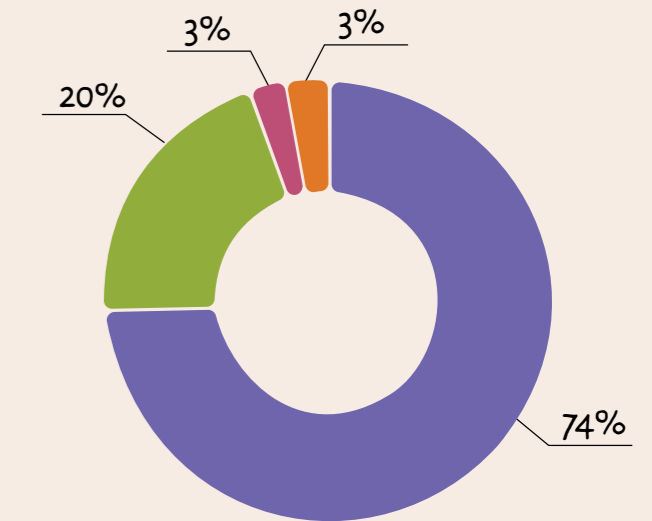
Derbarl enters the new financial year in a strong, resilient and sustainable position. This is thanks to the careful financial management, ongoing support from our funding partners and dedication to our mission by Derbarl's staff and Board. This secure financial position means we can invest in new initiatives, strengthen our clinical services and continue meeting community needs.

We use every dollar we receive to support community health. Frontline services take up most of this – from clinical care and chronic disease management to social and emotional wellbeing programs. Despite recruitment challenges and rising healthcare costs we ended the year in surplus while maintaining high quality services.

Our operating surplus was \$827,000 with an interest income of \$752,000. We'll reinvest the resulting \$1.58m net surplus in better patient services and securing our long-term sustainability.

Statement of Comprehensive Income

Income	
Program Delivery Grants revenue	\$21,814,018
Medicare income	\$5,899,914
Other income	\$849,050
Total income	\$28,562,982
Expenses	
Staff expenses	\$20,244,076
Operating Expenses	\$5,785,867
Rent and other property expenses	\$1,066,034
Motor vehicle expenses	\$125,305
Depreciation	\$514,692
Total expenses	\$27,735,974
Operating Surplus	\$827,008
Interest income	\$752,153
Net Surplus	\$1,579,161



Income

- Service Delivery Grants
- Medicare Income
- Interest Received
- Other Income

Key financial highlights

Revenue

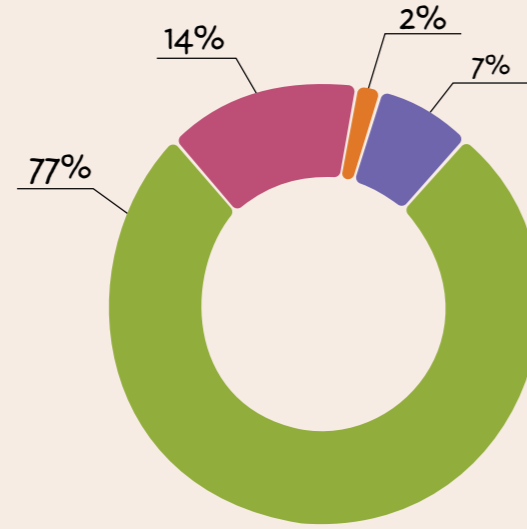
Total revenue was \$29.3m, up 12% on last year. This was driven by program grants, Medicare income and strong funding support from our generous partners.

Our primary funders for this year were:

- WA State Health Department (WA Country Health Service)
- Commonwealth Health Department (Indigenous Australians' Health Program)
- National Aboriginal Community Controlled Health Organisation whose support underpins much of our efforts
- Medicare income contributed \$5.9m.

Assets and Liabilities

Assets	
Current assets	\$21,329,442
Non-current assets	\$7,671,636
Total assets	\$29,001,078
Liabilities	
Current liabilities	\$17,628,816
Non-current liabilities	\$779,161
Total liabilities	\$18,407,977
Equity	\$10,593,101

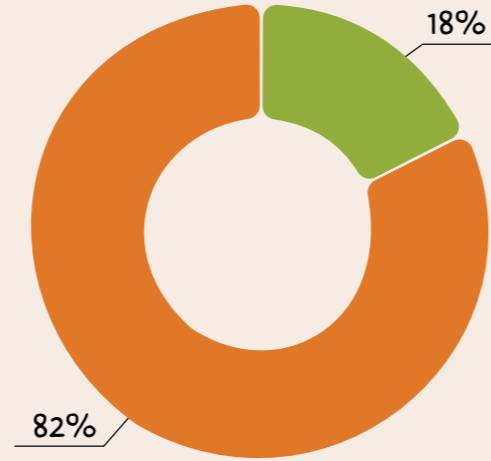


Expenditure Type

- Operating expenses
- Rent and other property expenses
- Motor vehicle expenses
- Depreciation

Expenses

Our expenses for 2024–25 were \$27.7m. Staff costs accounted for the largest proportion. Consistent with our mission, most spending went to frontline healthcare – the high-quality, accessible services our community deserves.



Expenditure Focus

- Administration
- Clinical Services

A Net Surplus

Our \$1.58m net surplus demonstrates our commitment to strong financial stewardship. It will be reinvested into better community services. With our strong balance sheet, we can provide vital health services well into the future.

Abhilash Karunakaran
Chief Financial Officer

Our Funders and Partners

I extend my gratitude to our funders, partners, staff and Board for their strong support and commitment. You have enabled us to achieve this result and helped position us well for the future.

- WA Country Health Service
- Department of Health, Commonwealth
- National Aboriginal Community Controlled Health Organisation
- Aboriginal Health Council of Western Australia
- Services Australia
- The Royal Australian College of General Practitioners
- Mental Health Commission, WA
- WA Primary Health Alliance
- Mental Health, Public Health and Dental Services, WA
- Rural Health West
- Cancer Australia
- National Heart Foundation of Australia
- Department of Communities WA
- Pharmacy Programs Administrator
- National Indigenous Australians Agency
- Lotterywest
- Department of Health, WA
- The Channel 7 Telethon Trust
- Stan Perron Charitable Foundation
- Minderoo Foundation
- McCusker Charitable Foundation
- The Kids Research Institute Australia
- The University of Melbourne
- Edith Cowan University
- Curtin University
- The University of Queensland
- The University of Western Australia
- Lions Eye Institute
- Women and Newborn Services, WA
- Wungening Aboriginal Corporation
- University of Notre Dame
- Uniting Church in the City

Cover Artwork

Artist: Isabella Grace Indich

This artwork is an oil painting of the Derbarl Yerrigan (Swan River) before settlement, it is a landscape which focuses on the land and flora along the river, without buildings, roads, and artificial structures. This landscape shows Herrison Island, Kings Park, and the Derbarl Yerrigan, and incorporates the native animals and bush medicine along the river. These animals are kangaroos, black swans, and dolphins, and the bush medicine includes marri trees, eucalyptus trees and balga.

When creating this artwork, I incorporated a Warinyan (sunset) with the use of warm toned colours which include yellows, oranges and pinks which reflect onto the river bringing life and colour into the painting.



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Maddington Clinic

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**DERBARL
YERRIGAN**
HEALTH SERVICE