



**Broome**  
Regional Aboriginal  
Medical Service

# Annual Report

## 2019-2020



Healthy People  
Strong Community  
Bright Future





# CONTENTS

About us.....	5
Our Organisation.....	6
Our Workforce Profile.....	7
Our Board of Directors.....	8
Chairperson’s Report.....	9
CEO Report.....	10
2019/2020 Highlights.....	11
Governance.....	25
Our Progress Data.....	30
Staff & Patient Profiles.....	31
Our Partners & Supporters.....	34



Broome  
Regional Aboriginal  
Medical Service



**BRAMS**



# ABOUT US

The Broome Regional Aboriginal Medical Service (BRAMS) is an Aboriginal Community Controlled Health Service. When we opened our doors in 1978, BRAMS was the first remote Aboriginal Medical Service in Western Australia.

BRAMS provides comprehensive, holistic and culturally responsive primary health care and social and emotional wellbeing services to Aboriginal people living in Broome. BRAMS provides around 40,000 occasions of service to the Broome community each and every year.

## Our Vision

Healthy People – Strong Community – Bright Future

## Our Mission

Provide holistic and culturally responsive health and wellbeing services for Aboriginal and Torres Strait Islander People. That means making our Mob healthy.

## Our Guiding Values

**Respect:** Treat one another and others with respect.

**Integrity:** Be truthful, honest and ethical in our dealing with one another and others.

**Accountability:** Take responsibility for what we do and the decisions we make.

**Quality:** Provide high quality services that meet the expectations of our clients and the community.

**Privacy:** Respect patient confidentiality at all times.

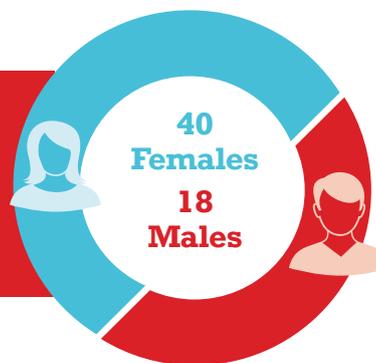


BRAMS wishes to acknowledge and pay tribute to all community members who have passed away in the Kimberley this year, as well as those in other communities with a connection to BRAMS.



# OUR WORKFORCE PROFILE

66% ATSI Staff



## Number of people in the following positions

AHW (Including Team leader)	8	Case Workers (SEWB)	2
Medical Administration (including Transport Officer)	11	Health Promotion Educators (TIS including)	4
Registered Nurses	3	Corporate Services (including Team Leader)	4
Child Health/Midwife (including Endorsed Midwife)	2	Cleaning/Gardening	2
Senior Managers (Including CEO)	7	NDIS Worker	3
GP's	10	COVID Screener	1
Psychologist	1		

**Total 58**



# OUR BOARD OF DIRECTORS

Our 2019/2020 Board of Directors

*Janet Cox*

Ceased 20.11.2019  
Meetings eligible to attend: 9  
Meetings attended: 8

*Raymond Sahanna*

Ceased 20.11.2019  
Meetings eligible to attend: 9  
Meetings attended: 8

*Barbara Wright*

Ceased 20.11.2019  
Meetings eligible to attend: 9  
Meetings attended: 9



*Leah  
Dolby*

Commenced 20.11.2019  
Meetings eligible to attend: 14  
Meetings attended: 14



*Timothy  
Garrett*

Commenced 20.11.2019  
Meetings eligible to attend: 14  
Meetings attended: 14



*Duane  
Tang  
Wei*

Commenced 20.11.2019  
Meetings eligible to attend: 14  
Meetings attended: 14



*Christopher  
Bin Kali*

Meetings eligible to attend: 23  
Meetings attended: 20



*Diann  
Britton*

Meetings eligible to attend: 23  
Meetings attended: 22



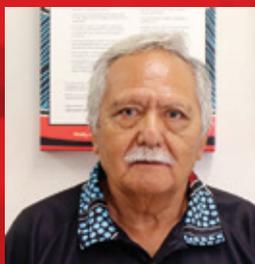
*Trevor  
Cox*

Meetings eligible to attend: 23  
Meetings attended: 22



*Leonie  
Kelly*

Meetings eligible to attend: 23  
Meetings attended: 20



*Philip  
Matsumoto*

Meetings eligible to attend: 23  
Meetings attended: 20



*Kathleen  
Watson*

Meetings eligible to attend: 23  
Meetings attended: 22

# CHAIRPERSON'S REPORT

*Christopher Bin Kali*



I would like to begin this report by acknowledging the land we are meeting on – Yawuru - and respect the Past, Present and Emerging Traditional Owners of the land.

This past year will be one to remember due to the Coronavirus (COVID-19) pandemic and the impact that it had on our community and the nation. When it was first announced that the virus had arrived in our part of the world, BRAMS had to immediately develop and implement policies and procedures to protect the safety of our staff, our patients, and other visitors to the clinic. This entailed significant changes and disruption to BRAMS' normal operations, and while measures such as screening initially prompted frustration among some people, the community was soon on board with the necessity of these arrangements as the seriousness of the COVID-19 threat became better understood.

The pandemic affected the delivery of BRAMS' services in all sorts of ways, such as preventing us from providing outreach care to the community, but these difficulties also led to innovative solutions, and it was pleasing to see the introduction of telehealth consultations over the phone as an alternative to face-to-face appointments.

I would like to extend my thanks to the BRAMS management team and all staff for the exceptional way they adapted to the challenging circumstances of Covid. I would also like to congratulate Kimberley Aboriginal Medical Service (KAMS) and its affiliates, West Australia Country Health Services (WACH's) and the local COVID-19 Taskforce for implementing a process that enabled essential services to enter both Kimberley and the remote communities. The protection of those remote communities was our number one priority, as Coronavirus had the potential to devastate our people, especially our Elders and senior Knowledge holders.

While dealing with the pandemic seemed an all-consuming task for much of the year, I'm pleased that BRAMS was able to make important progress in a number of other areas during the past 12 months. As requested by Members, we instituted a review of the organisation's Constitution, and facilitated a number of workshops relating to that process. Ultimately, a Special General Meeting was held and the revised Constitution has been sent to the Office of the Registrar of Indigenous Corporations (ORIC) for approval. There were some issues raised at the SGM regarding the Renewal of Membership process, the definition of the Shire of Broome, and Prohibited Organisations, and these will be discussed later in the AGM for consideration and endorsement.

As you will note in both the Financial and Audit reports, BRAMS is in a sound financial position, and while it's pleasing to record a small surplus at the end of the year, our aim is not to deliver large surpluses, but rather to provide a comprehensive and caring health service to our people and our community.

BRAMS has developed and implemented its five-year Strategic Plan, and the CEO and senior managers continue to provide updates on its progress against annual targets. At our most recent update, it was identified that there are areas that we

need to address, and we are always looking to improve the quality of the services we provide. There has been a major restructure of the organisation and it is encouraging that 80% of BRAMS' senior managers are Aboriginal people. We will continue to take a proactive approach in this space and support all staff who wish to further their careers in the health sector.

BRAMS is now a registered National Disability Insurance Scheme (NDIS) provider and is assisting eligible clients with their NDIS plans. The aim of the NDIS is to enable clients to receive the supports they want and need, and perhaps haven't been able to access previously. We will continue to encourage and help clients with their plans and support services.

As we look to the year ahead, WA has 12 months to develop Key Performance Indicators (KPIs) for 16 Closing the Gap targets, which will be both State and Local indicators. We will be working closely with both KAMS and the Aboriginal Health Council of WA (AHCWA), in providing input into these indicators, especially the health targets.

Finally, the Directors and Management are looking at possible sites for the development of a new facility for BRAMS. Unfortunately, it would not be practicable to redevelop the current site as that would entail too many disruptions to the delivery of our services, and may impact on the hospital's capacity to provide care to our people.

We look forward to a smoother 2021 now that vaccines for COVID-19 have been developed.

**“I would like to extend my thanks to the BRAMS management team and all staff for the exceptional way they adapted to the challenging circumstances of Covid.”**



# CEO REPORT

*Cassie Atchison*



Reflecting back on the past 12 months, BRAMS has undergone significant changes in what was a turbulent year at home and abroad.

In spite of the challenges presented by the Coronavirus pandemic, I am pleased to report that the organisation has taken major steps in strengthening our internal processes and systems, and enhancing the services we provide to the local community.

We instituted three new governing committees, in Clinical Governance, Corporate Services, and Quality, Risk and Safety, to improve oversight of key organisational functions, and I'd like to take this opportunity to thank those committee members for their hard work and dedication to the task.

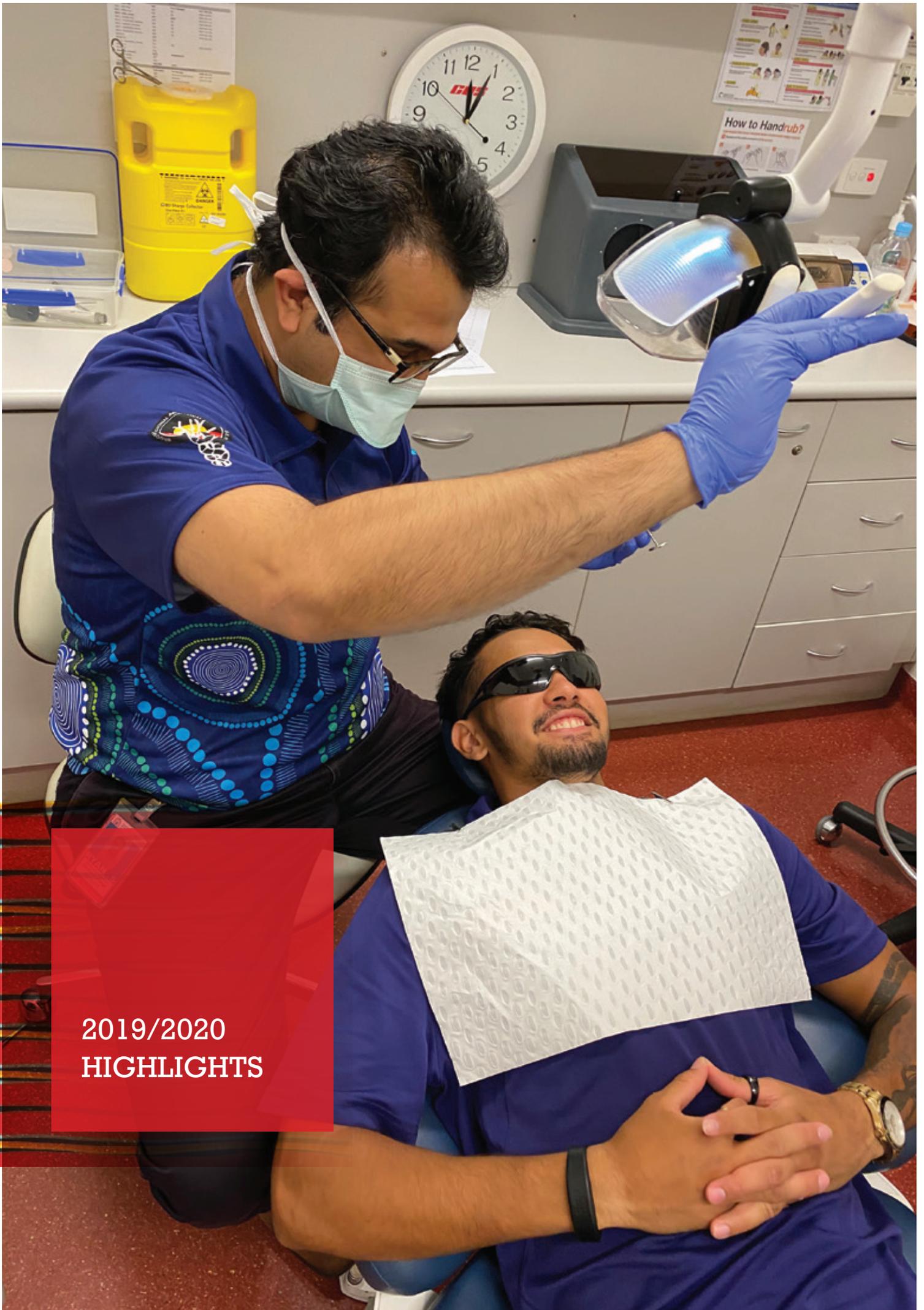
We also undertook a major organisational restructure, the purpose of which was to introduce a senior and middle management team and provide local people with opportunities to progress into management roles. Encouragingly, 7 of the 10 positions have been filled by local Aboriginal people. At the same time, we have developed and implemented a staff structure that is transparent and fair, and ensures employees receive annual salary increments.

We became a registered NDIS provider and quickly earned a reputation for excellence as the community's preferred provider. Thank you to Melanie Prewett and her team for their hard work and dedication in establishing this important new program.

More broadly, I want to place on the record again my thanks and appreciation to all BRAMS staff for their efforts during these past 12 months. That we were able to broaden and improve the quality of the services we provide to the Broome community, despite the ever-shifting circumstances brought on by the pandemic, is a credit to all.

On a more personal note, I would like to acknowledge the guidance and support that I have received from Vicki O'Donnell from KAMS since I started in my role.

**“Encouragingly,  
7 of the 10  
positions have  
been filled by  
local Aboriginal  
people.”**



2019/2020  
HIGHLIGHTS

# 2019/2020 HIGHLIGHTS

## JULY 2109



### New CEO

Cassie Atchison commenced as the new CEO on 1 July 2019.

### Staff Survey

BRAMS conducted its first all-staff survey in 2019. The survey enabled staff to provide constructive feedback about their work environment and suggest areas for improvement, and BRAMS has since introduced a number of new workplace initiatives, including:

- A Rewards and Recognition Policy;
- Establishing a Quality, Risk and Safety and Corporate Services Committee;
- Improving internal communication through regular staff meetings and newsletters; and
- Revising human resources policies and procedures.

## AUGUST 2019

### Clinical Governance Committee

BRAMS established an internal Clinical Governance Committee which defines how the organisation's staff share authority, autonomy, responsibility and accountability, for continuously improving the safety and quality of care, minimising risk, and engendering an environment of excellence for clients and the community. The KAMS Medical Director has also joined the committee and is actively supporting BRAMS to make improvements in the delivery of healthcare services to the community.

### Spotlight on Syphilis at Regional Sexual Health Meeting

Family Centre Coordinator Tamsen Prunster and Aboriginal Health Worker Renee McKenzie attended the Regional Sexual Health Team Meeting in Perth, which focused on a syphilis outbreak in the Kimberley at the time.

BRAMS worked with the Department of Health to deliver the Enhanced Syphilis Response program to address the issue, and was provided with PoCT Kits (Point-of-Care Test kits) and increased training for staff.

### Code of Conduct Workshop

BRAMS staff participated in a code of conduct workshop facilitated by Nick Thomas, where they discussed the key behaviours they expect from each other and aligned these behaviours to the organisation's values. Staff provided very positive feedback about the workshop.



# 2019/2020 HIGHLIGHTS

## SEPTEMBER 2019



### Silhouette Camera to Help with Treatment of Diabetic Foot Ulcers

BRAMS collaborated with KAMS, Diabetes WA and the region's Aboriginal Medical Services to develop a model of care for the improved treatment of diabetic foot ulcers in Aboriginal and Torres Strait Islander people with diabetes living in the Kimberley. The aim was to reduce the rates of amputation across the region.

KAMS successfully received funding from Diabetes WA for BRAMS to purchase and install a silhouette star camera in the clinic, which assists in the imaging and analysis of wounds.

BRAMS staff participated in Advanced Wound Care Technology - Silhouette Cameras Training in late September 2019, and familiarised themselves with the new technology, and the camera is now fully-operational and in use.

BRAMS would like to thank Dr Lorraine Anderson from KAMS for her hard work and dedication in obtaining the funding, and assisting with training for such an important tool. We would also like to thank Diabetes WA for funding the cameras



### National Disability Insurance Scheme (NDIS)

BRAMS begins its journey towards becoming an NDIS provider, and, working in partnership with KAMS, employs Melanie Prewett as an Evidence and Access Co-ordinator, assisting clients to complete their NDIS applications and advocating on their behalf.



### Suicide: Start the Talk, Take the Walk

With mental health being one of the major challenges facing our community - especially the stigma that continues to surround suicide - BRAMS staff participated in the "Start the Talk, Take the Walk against Suicide" event, organised by the Broome Prevention Trail.

BRAMS Corporate Services Manager Erina Tanaka said it was encouraging to see so many people come together and unite behind such an important issue.

# 2019/2020 HIGHLIGHTS

## Corporate Governance Charter

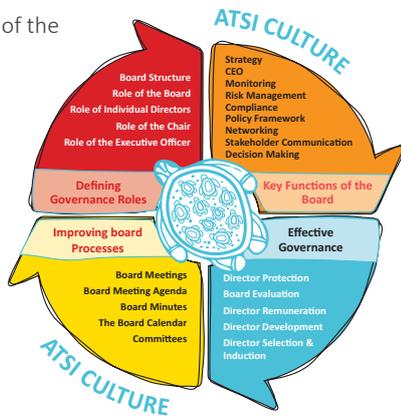
The CEO and Directors held a workshop to develop a Corporate Governance Charter and supporting governance policies, to help establish the guidelines for Directors to carry out their respective roles.



The Corporate Governance Charter will be reviewed and updated to reflect changes in the legal framework within which BRAMS operates, and amendments and developments in Board policies and procedures.

The Charter has five major sections:

- Aboriginal and Torres Strait Islander culture;
- Defining governance roles;
- Key functions of the Board;
- Effective governance; and
- Board processes.



## Aboriginal Health Worker Conference

Our Aboriginal Health Workers attended the KAMS Aboriginal Health Worker Conference in Broome in September 2019, which covered a diverse range of important topics, such as building confidence, Medicare claiming, RAAF Dental, and updates on the NDIS.

The conference enabled BRAMS staff to network with colleagues from across the region, and share stories, experiences and lessons. The group also participated in a training session to update their medication training modules.



## Air Force Dental Visit

As part of Exercise Kummundoo 19, the Air Force Dental Team visited BRAMS, bringing a Dentist, Dental Assistant and two Aboriginal Engagement Officers to the community.

Over the course of 20 days, the dental team provided services to 106 Aboriginal people during their visit. In addition to treating patients, the team also provided training to our primary health care team, assisted with community events, and worked with young Aboriginal people through PCYC and the local schools.



## Top Honour For Delia Lawford

BRAMS Clinic Coordinator Delia Lawford won the Most Outstanding Aboriginal Health Worker award at the Aboriginal Health Worker conference held by KAMS.

It was a fantastic achievement and due recognition for Delia's ongoing commitment and dedication to her work and BRAMS.





# 2019/2020 HIGHLIGHTS

## OCTOBER 2019



### NDIS Evidence and Access Program

BRAMS officially commenced its NDIS Evidence and Access Program, which saw Melanie Prewett working in partnership with Nirrumbuk Aboriginal Corporation to identify Aboriginal and Torres Strait Islander people who may be eligible for the NDIS program.



### Mental Health Week

BRAMS worked in partnership with a range of local community organisations such as KAMS, Anglicare, Centrecare Kimberley, Broome PCYC, Garnduwa and Headspace Broome to deliver a number of mental health education and awareness sessions throughout the week.

BRAMS also held a Promotional and Awareness morning at the Clinic to promote our Social and Emotional Wellbeing Program.





# 2019/2020 HIGHLIGHTS

## NOVEMBER 2019



### Aboriginal Health Worker Graduation

On 15 November, KAMS held the annual Aboriginal Health Worker Graduation, with BRAMS Aboriginal Health Workers Billy Martin and Jamilah Bin Swani among the graduates.

It was an extra special night for Billy, who also won the Most Outstanding Trainee of the Year Award. Well done!



## DECEMBER 2019



### Rule Book Workshop

Towards the end of December, the BRAMS Board facilitated the first workshop with Members to review the BRAMS Rule Book.



### NDIS Quality Assessment

BRAMS progresses efforts to become an NDIS provider, passing a Quality Assessment Process with an Independent Assessor and formally completing its registration application.

# 2019/2020 HIGHLIGHTS

## JANUARY 2020



### Radio Show

BRAMS hits the airwaves with its own radio show, a weekly segment on GGME Radio Goolarii 99.7 FM to discuss various health topics that are relevant to the local community, and to publicise health promotion events.

Tune in every Wednesday morning from 10.00am to 11.00am to get your fix. BRAMS also shares the link to the podcasts on our Facebook page.

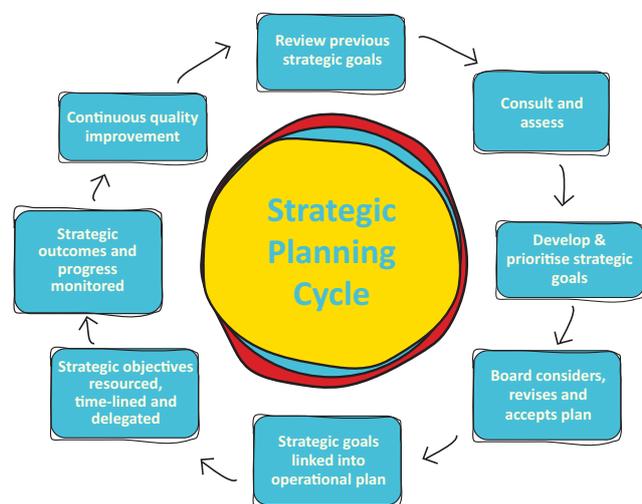
### Strategic Plan

The BRAMS Strategic Plan was endorsed by the Board of Directors on 14 January. The Plan provides an overarching framework of action to improve the health, wellbeing and safety of Aboriginal and Torres Strait Islander people in Broome, now and over the next 5 years.

It focuses on three priority domains:

- Our Consumers
- Our People
- Our Organisation

Overseen by the BRAMS Board of Directors, the CEO is responsible for implementation of the plan and works with senior managers to progress deliverables and drive improved performance throughout the organisation. A yearly performance report will be presented to BRAMS members at each concurrent Annual General Meeting.



# 2019/2020 HIGHLIGHTS

## FEBRUARY 2020

### Medical Receptionist Training

BRAMS' Medical Reception staff, together with colleagues from other Aboriginal Medical Services throughout the Kimberley, attended a week-long training program with the Australia Medical Association.

Upon completion of the course, each participant received four nationally accredited units:

- BSBMED301 - Interpret and apply medical terminology appropriately;
- BSBMED302 - Prepare and process medical accounts;
- BSBMED303 - Maintain patient records; and
- BSBMED305 - Apply the principles of confidentiality, privacy and security within the medical environment.

Staff praised the course and were enthusiastic about bringing their new skills to the workplace.



### Outreach To Milliya Rumurra

BRAMS partnered with Milliya Rumurra to deliver primary health care to Aboriginal and Torres Strait Islander people undertaking rehabilitation, with Dr Bek Ledingham, Registrar Dr Luke Davies, and Outreach Coordinator Mr David Cox providing these valuable services on a weekly basis.



# 2019/2020 HIGHLIGHTS



## Fremantle Dockers 715 Check

The BRAMS Tackling Indigenous Smoking Team partnered with the Fremantle Dockers AFL team to deliver an important health promotion campaign for the local community. Taking inspiration from the world of car-racing, BRAMS designed a pit-stop approach to having a health check completed, promoting the message that it doesn't take long to stay on top of your health.

There was a high level of engagement on the day, with 35 health checks completed and all participants receiving a bag with goodies. A great day was capped off with a BBQ lunch to celebrate a successful campaign, and BRAMS would again like to thank the Fremantle Dockers for their participation.





# 2019/2020 HIGHLIGHTS



## Early Childhood Program

BRAMS commenced its Early Childhood Program, with the aim of approaching, engaging and supporting children under 7 years with developmental delay or disability through timely access to early intervention supports. The program supports families to assist children to gain, use and develop functional skills to achieve their individual goals and participate meaningfully in community life. BRAMS employs two Family Support Workers who assist with the program in Broome.

---

## MARCH 2020



## International Women's Day

International Women's Day was celebrated on 8 March, with BRAMS re-enforcing the point that the IWD message goes beyond one day; that individually, we are all responsible for our thoughts and actions. All day, every day.



## New Senior Medical Officer

Dr Jonathan Blundell is appointed Senior Medical Officer.

# 2019/2020 HIGHLIGHTS

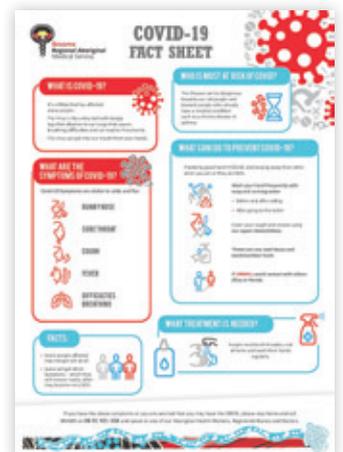
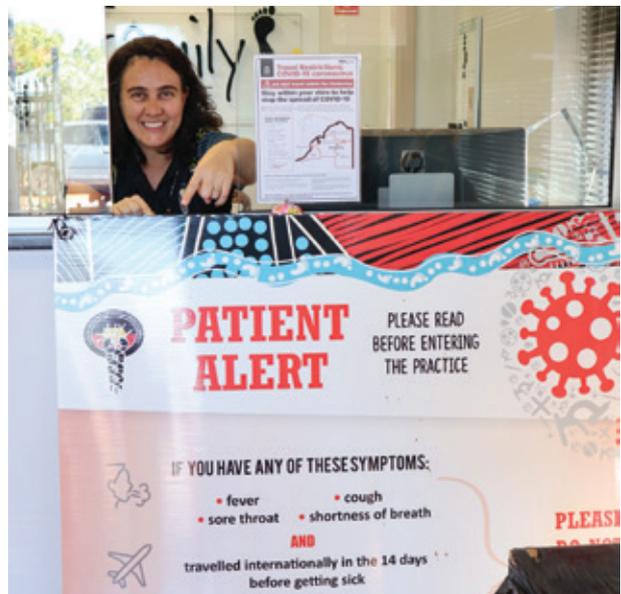
## COVID-19

The first cases of Coronavirus were recorded in the Kimberley in late March, and BRAMS begins implementing its COVID-19 Pandemic Plan, working in partnership with KAMS, the Aboriginal Health Council of Western Australia (AHCWA) and the Broome Hospital.

In an effort to slow the spread in Broome, support containment strategies for the Kimberley region, and protect patients and staff, BRAMS:

- Halts the walk-in clinic service;
- Introduces an appointment system;
- Requires all patients to go through a screening process at the Family Centre before entering the clinic;
- Changes the layout of the clinic to ensure social distancing measures are in place; and
- Provides a telehealth service where possible.

Despite these changes, BRAMS continues to deliver high-quality primary healthcare services to the local community.



# 2019/2020 HIGHLIGHTS

## APRIL 2020



### Diabetes Clinic

GP Register Dr Luke Davies and Aboriginal Health Practitioner Billy Martin establish a weekly diabetes clinic on Tuesdays, the aim of which is to provide education and empower individuals to better manage their diabetes.



### NDIS

BRAMS officially became a registered provider of NDIS services to Aboriginal and Torres Strait Islander people in Broome, with Melanie Prewett appointed as the NDIS Manager.

## MAY 2020



### Covid-19 Funding

BRAMS would like to thank the following organisations and agencies for providing COVID-19 relief funding:

- Lotterywest - Mobile phones, relief packages and transport costs;
- Minderoo - Perspex for our transport vehicles, iPads to facilitate telehealth consultations, and printing and installing signs for vulnerable patients' houses;
- BHP - Additional staff uniforms, iPads for directors to connect remotely to Board meetings, maternity packages, and funding to cover the salary of staff undertaking screening; and
- Department of Health - One-off funding to cover costs associated with managing the outbreak of COVID-19.



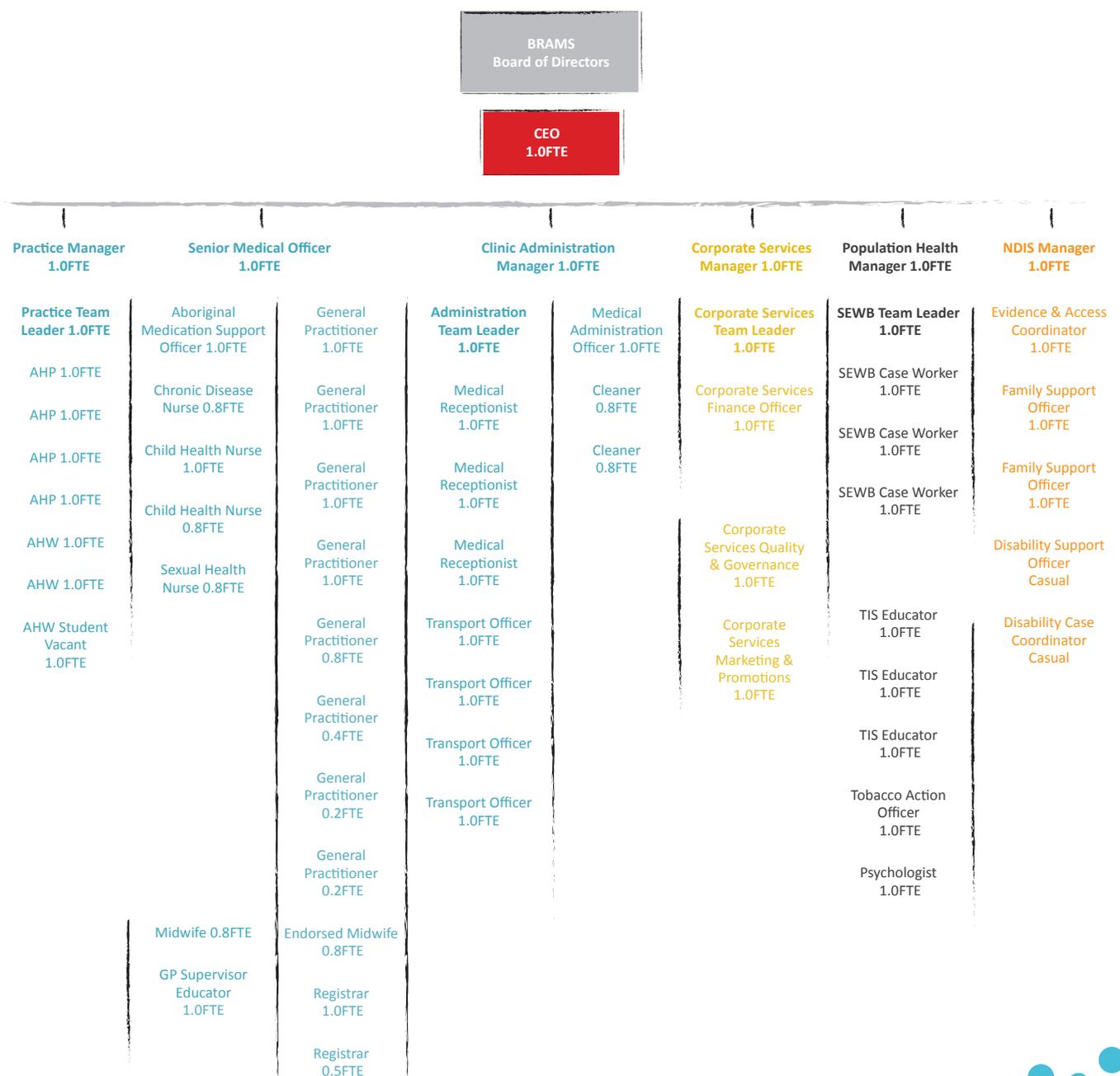
# 2019/2020 HIGHLIGHTS

## JUNE 2020

### Organisation Restructure

A new organisational structure endorsed by the Board took effect on 1 June.

A key driver behind the change was a desire on the part of the Board to identify and create more employment and management opportunities for Aboriginal and Torres Strait Islander people in the local community. It also better enables BRAMS to meet the goals set out in the organisation's Strategic Plan.



# 2019/2020 HIGHLIGHTS

## JUNE 2020



### Chronic Disease Management

Senior Medical Officer Dr Jonathan Blundell collaborated with the Flinders Program to implement new tools to enhance BRAMS' Chronic Disease Management program.

The Flinders Programs provides an assessment, planning and motivational process which has been applied to chronic medical conditions, and assists staff to support patients to effectively manage their symptoms over the long-term.



### Aboriginal Health Worker Student Placement

Two trainee Aboriginal Health Workers, Juma Bin Swani and Marietta Walker Bier, spent the month at BRAMS as part of a student placement program facilitated in partnership with KAMS. The placements are a fantastic way for students to get hands-on work experience, and BRAMS hopes they will come back and work with us when they finish their studies.



### Mums and Bubs Pack

BHP kindly provided BRAMS with funding to provide mothers in their third trimester with essential items for mother and baby, which our mums-to-be found to be extremely helpful. Thanks again to BHP.



### No to Violence

June Stanley Francis (Tackling Indigenous Smoking Officer) and Cassandra Matsumoto (Population Health Manager) completed a course in Working with Men Who Use Family Violence in First Nation Communities.

This training is critical in identifying family violence when facilitating Tackling Indigenous Smoking programs.

### Primary Health Care Funding

BRAMS successfully entered into a three-year contract with the Department of Health for core primary health care funding.



**GOVERNANCE**

# GOVERNANCE



## Corporate Governance

The BRAMS Board is committed to transparent and accountable governance. During the 2019/2020 period, the Directors have developed the following Corporate Governance processes:

- Corporate Governance Charter;
- Delegation of Authority Policy;
- Dispute Resolution Policy;
- Strategic Planning Policy;
- Directors Election Policy;
- Director and Member Code of Conduct;
- Director Remuneration Policy;
- Circular Resolutions Policy; and
- Director and Chairperson Position Description.

## Strategic Plan

The BRAMS Strategic Plan was endorsed by the Board of Directors on 14 January. The Plan provides an overarching framework of action to improve the health, wellbeing and safety of Aboriginal and Torres Strait Islander people in Broome, now and over the next 5 years.

It focuses on three priority domains:

- Our Consumers
- Our People
- Our Organisation



## Revision Of Rule Book

BRAMS held two workshops with Members to revise the current Rule Book in the lead-up to the Special General Meeting held on 30 September, which was attended by many. The Members worked their way through the proposed resolutions together, and the agreed changes have now been sent to ORIC for approval.

**Rule Book of  
Broome Regional  
Aboriginal Medical  
Service  
(Aboriginal  
Corporation)  
(ICN 12)**

## Risk Register

In 2019, a Risk Management Framework was developed and endorsed, and in January 2020, the Risk Register was revised and adopted by the Board. The Directors review the Risk Register annually.

# GOVERNANCE

## Corporate Services Committee

The Corporate Services Committee comprises:

- Cassie Atchison – CEO
- Erina Tanaka – Corporate Services Manager
- Diandra Cox – Corporate Services Team Leader
- Rashidah Bin Rashid – Quality and Governance Officer
- Allaneh Matsumoto – Corporate Services Finance Officer
- Keilani Bin Hitam – Events and Marketing Officer
- Janine Roe – Clinical Administration Manager

The Corporate Services Committee is responsible for the oversight of Finance Services, Human Resources, Asset Management, Information Technology and Property Management. The Committee has worked extremely hard over the past 12 months to implement a range of policies and systems to improve BRAMS' corporate functions.

The key successes of the committee include:

- Implementing more than 70 improvements in the Corporate Services Division;
- Revising and establishing a new suite of human resource management policies that better support the employee lifecycle;
- Introducing a seamless recruitment process;
- Developing a full suite of financial management policies, including a fraud and corruption framework;
- Upgrading BRAMS' fleet of vehicles and transitioning to a fleet leasing model;
- Implementing an online learning management system, AMSSED;
- Revising all position descriptions, and implementing a salary structure that is better aligned with relevant workplace awards, and which enables employees to receive annual salary increments;
- Enhancing BRAMS' marketing and communications footprint through the establishment of social media accounts, a website, weekly adverts in the paper and advertising on local radio.



# GOVERNANCE



## Quality, Risk And Safety Committee

The Quality, Risk and Safety Committee comprises:

- Cassie Atchison – CEO
- Rashidah Bin Rashid – Quality and Governance Officer
- Kristine Chadwick – Disability Support Coordinator
- Peter Clifton – Cleaner
- Telithia Matthews – Practice Team Leader
- Brad Close – Transport Officer
- Cassandra Matsumoto – Population Health Manager
- Tilly Roe – Medical Receptionist
- Ben Phillips – Tobacco Action Officer

BRAMS assures quality and safety through the alignment and integration of its strategic and operational planning with its evaluation, accreditation and review processes.

The Quality, Risk and Safety Committee provides structural management and support for quality issues and organisational systems, and is designed to assist BRAMS in its organisational drive towards sustainability.

The key successes of the committee include:

- Implementing more than 240 organisational improvements;
- Managing 66 incidents;
- Responding to 39 instances of patient feedback;
- Developing more than 120 new policies; and
- Identifying and managing 42 organisation risks.

The QRS Committee has also been busy working to ensure BRAMS achieves its Quality Accreditation. The following key processes have been developed:

- Quality Policy;
- Quality Manual;
- Work Health and Safety Framework;
- Incident Management Policy;
- Feedback Policy;
- Policy Development Policy; and
- Privacy Policy.



# GOVERNANCE



## Clinical Governance Committee

The Clinical Governance Committee comprises:

- Dr Jonathan Blundell – Senior Medical Officer
- Delia Lawford – Practice Manager
- Erina Tanaka – Corporate Services Manager
- Dr Lorraine Anderson – KAMS Medical Director
- Hannah Mann – KPS Pharmacist
- Billy Martin – Aboriginal Health Practitioner
- Katy Crawford – Chronic Disease Nurse

The Clinical Governance Committee is responsible for the oversight of integrated systems, process, leadership and culture that are at the core of providing safe, effective, accountable and patient-centered primary health care services.

It was a challenging year for the Committee as they had primary responsibility for responding to the COVID-19 outbreak.

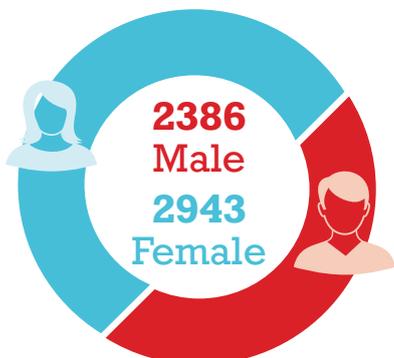
The key successes of the committee have been:

- Implementing 67 improvements relating to primary health care;
- Creating a Clinical Governance Framework;
- Developing the COVID-19 Pandemic Response Plan;
- Modifying service delivery to provide telehealth services and managed appointments;
- Revising and implementing a range of policies and procedures to enhance pharmaceutical services; and
- Developing a Health Promotion Framework to improve our management of Health Promotion activities.

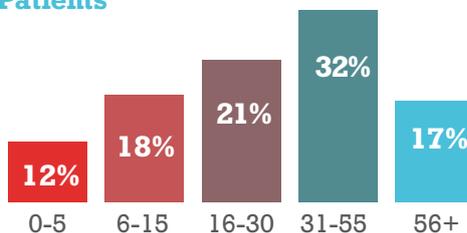


# OUR PROGRESS DATA

We have seen 5,329 individual clients in the 12-month period.



## AGE PROFILE of Patients



## Primary Health Care Client Contacts

Aboriginal Health Practitioner  
**17,393**

General Practitioner  
**30,651**

Registered Nurse  
**6,984**

Midwife  
**3,244**

Dentist  
**1,794**

Social and Emotional Wellbeing  
**609**

Transport  
**1,268**

Medical Specialists  
**2,489**

Allied Health  
**1,572**

There were 92 babies born in the last 12 months, 88 percent of whom were categorised as in the normal weight range.

We provided 37,937 episodes of care.



14,610 were male



23,327 were female

## COVID-19 Screening

We screened 8413 patients; 134 patients were referred for COVID-19 testing at the Hospital. 1250 telephone consults were undertaken during COVID-19.

## Tackling Indigenous Smoking

Facilitated 21 community events

Delivered 27 sessions of smoking cessation training to a wide range of services.

## STI Screening

13% of clients were tested for chlamydia

13% were tested for gonorrhoea

9% were tested for trichomonas

12% were tested for syphilis

12% were tested for HIV

## Disability Services

32 people were assisted to apply for a NDIS package;

26 people were successful in gaining an NDIS plan;

12 participations were provided with support coordination services; and

20 families were supported through the Early Childhood Program.



STAFF &  
PATIENT  
PROFILES

## STAFF PROFILES



*Candice Purdie*  
Family Support Worker

### **What is your background?**

I am a young Aboriginal woman from the East Kimberley. I have recently moved to Broome with my family for better opportunities. I have done administration work in my previous jobs and look forward to expanding my skills.

### **What do you do at BRAMS?**

I am a Family Support Worker at BRAMS and also work closely with the Early Childhood Supports team at KAMS.

### **Why do you like working at BRAMS?**

I am passionate about working with families and their children to provide much needed supports. I see the need in my own community and am happy to be a part of supporting our local families in Broome and the surrounding communities.

### **What are your career aspirations?**

To continue to develop my skills and knowledge about my role to better assist families and their children to achieve greater outcomes.



*Stanley Francis*  
Tackling Indigenous  
Smoking Officer

### **What is your background?**

Stanley Francis, Broome local, primary school at St. Mary's, and high school away down south at Aranmore Catholic College. After graduation I moved back and worked in Broome, starting out at Kullarri Patrol doing shift work, and then moved around working in various places before ending up at BRAMS.

### **What do you do at BRAMS?**

Tackling Indigenous Smoking Team as an educator.

### **Why do you like working at BRAMS?**

I like working at BRAMS because the team I work with are all great people and great colleagues.

### **What are your career aspirations?**

I am hoping to do further health-related studies, to expand on my knowledge and see how it differs from my Army and St Johns training.

## PATIENT PROFILES



*Karmelliah McKensie*

**How long have you been a patient at BRAMS?**

Since before I can remember!

**What do you like about BRAMS?**

I like that BRAMS has a lot of Indigenous staff that us patients deal with, making it easier to explain our situations and understand our healthcare needs.

**What would you like to see in the future at BRAMS?**

More community events and activities for both elders and young people, that help raise awareness of both minor and major health problems within our community, and self-care.



*Thomas McKensie*

**How long have you been a patient at BRAMS?**

24 years

**What do you like about BRAMS?**

As an ex-employee since 2010, I enjoyed working with the community. BRAMS has provided a lot of home care during my time. Friendly, daily service within the organisation.

**What would you like to see in the future at BRAMS?**

More home visits for the elders in the community, and more social activities involving our young children.



*Cheryl Parriman*

**How Long have you been a patient at BRAMS?**

Since I was 6 years old - I used to attend when it was located at the old Convent.

**What do you like about BRAMS?**

That we receive care from our Indigenous people, from reception all the way to the doctors.

**What would you like to see in the future for BRAMS?**

I would like to see BRAMS support the Aboriginal Health Workers progress further to become our future doctors.



*Nathan Hunter*

**How long have been a patient at BRAMS?:**

I've been coming into BRAMS for more than 20 years. I've been coming to the chronic disease clinic after my heart attack in May 2012.

**What do you like about the chronic disease clinic?**

The staff are very helpful and caring. It helps to have a regular appointment to review everything, to make sure that I'm keeping as healthy as I can. I rely on the expertise of the team at BRAMS to work with me to make sure things like my medications and treatments are working well for me. I want to make sure my health is the best it can possibly be and that's why coming to the clinic is so important.

# OUR PARTNERS & SUPPORTERS

BRAMS is grateful for the ongoing support of our partners, supporters and peak bodies.

## FUNDING BODIES

National Indigenous Australians Agency

Kimberley Aboriginal Medical Services

Australian Government Department of Health

Western Australian Primary Health Alliance

Western Australian Country Health Service

Lottery West

BHP

Minderoo

## BRAMS WORKS IN PARTNERSHIP WITH:

Boab Health Services  
Western Australian Country Health Service  
Kimberley Aboriginal Medical Services  
Broome Girls Academy  
Broome Academy/Clontarf  
Kimberley Stolen Generation Aboriginal Corporation  
Millya Rumurra Drug and Alcohol Service  
Germanus Kent House  
Men's Outreach Service  
Nirrumbuk Aboriginal Organisation  
National Disability Insurance Agency  
Western Australian Dental Service  
Kimberley Mental Health Service  
RFDS Dental Service  
Air Force Dental Team

## WE HAVE MEMBERSHIPS WITH:

Kimberley Aboriginal Medical Service  
Kimberley Aboriginal Health Planning Forum  
Aboriginal Health Council of Western Australia



**Broome**  
Regional Aboriginal  
Medical Service

**08 9194 4800**

PO Box 1879,  
Broome WA 6725

[www.brams.org.au](http://www.brams.org.au)

