ANNUAL REPORT 2024-25





Acknowledgement

Western Queensland Primary Health Network (WQPHN) acknowledges the Aboriginal and Torres Strait Islander traditional custodians on whose land we walk work and live

We acknowledge the stories, traditions and living culture and their continuing connection to the land and waters of our catchment.

We pay respect to Elders past and present and commit to building respectful and inclusive partnerships with Aboriginal and Torres Strait Islander peoples to improve health outcomes in our region.

Cover image: **The Granites**Photographed by Mac Chambers,
North West Queensland

Featured as one of the winning entries in our 2024-25 photography competition, The Granites captures the striking beauty and quiet strength of our region, an enduring symbol of connection to Country and computity

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Working together for wellbeing.



This year, we've deepened partnerships, strengthened pathways and laid foundations that support sustainable wellbeing across our region.

Our 2024–25 annual report tells a story of shared commitment and local innovation, where real change is created together, and real impact is felt where it matters most.

Real change. Real impact.

Chair message

When we invest in local capacity and connection, we foster lasting change.



Across Western Queensland, we honour the Traditional Owners of Country and pay our respects to Elders past and present. Their wisdom continues to guide our partnerships with Aboriginal and Torres Strait Islander peoples, organisations and the Nukal Murra Alliance, at the heart of our commitment to health equity and inclusion.

This year's annual report centres on a shared theme: Working together for wellbeing—real change, real impact. It speaks to the strength of our partnerships in shaping outcomes that matter. As a commissioning body, we've listened closely, reviewed programs for impact and invested in collaboration for lasting change.

This commitment came to life through our leadership in delivering one of Australia's first Joint Regional Health Needs Assessments (JRHNA), co-designed with stakeholders. This shared approach has aligned priorities and strengthened advocacy for smarter investment and greater community benefit.

Our work is increasingly shaped by Value-Based Health Care (VBHC), focusing on outcomes and experiences that matter most to people. Initiatives like Healthy Outback Communities (HOC) show what's possible when we build local capacity and prioritise wellbeing across every life stage.

As we enter the final year of our strategic plan and await the outcomes of the Australian Government's PHN Program review, the Board remains focused on future readiness and alignment with evolving regional needs. We're also preparing to celebrate WQPHN's ten-year anniversary, a milestone to honour the partnerships, people and progress that continue to shape our shared journey.

This year we welcomed two new Directors:
Rod Margetts, a seasoned leader in financial
management and health sector reform,
and Catrina Felton-Busch, a respected
Aboriginal leader from Mornington Island.
Her deep knowledge strengthens our
commitment to inclusive commissioning and
culturally responsive governance.

We farewelled long-serving Directors: Dallas Leon, a proud Kalkadoon and Waanyi man, whose leadership (including a term as Chairperson) strengthened primary health services across the region, and Jason Warnock, an inaugural Board member since 2018, whose vision helped shape WQPHN's impact.

I extend my sincere thanks to our CEO Sandy Gillies and her team for their passion and dedication. To our partners and communities, thank you for walking alongside us in pursuit of real change and a healthier, more connected Western Queensland.

Liz/

Elizabeth (Liz) Fraser Chair

CEO message

This year has reaffirmed the strength and spirit of Western Queensland.



From devastating floods to major milestones in commissioning and care, we've stayed focused on what matters most to our communities.

The floods in early 2025 were the worst our region has seen in 50 years. In times like these, WQPHN stands alongside local government, acute services and community partners to support recovery and resilience. These moments serve as powerful reminders of the strength of our partnerships, the unwavering dedication of our first responders, and the importance of long-term wellbeing planning.

Our work continues to be guided by our Paving our Way to 2026 Strategic Plan, shaping how we commission, collaborate and deliver care in our vast and under-resourced region. From early childhood to aged care, every initiative centres on outcomes that matter and locally-led solutions.

Empowering communities led the way as HOC expanded into Boulia this year. Healthy Outback Kids continues to support Aboriginal and Torres Strait Islander families through the first 3,000 days of life, shifting the focus from illness to wellness.

Backing our workforce, we launched the Western Queensland Nursing Futures Program™, enabling Aboriginal and Torres Strait Islander trainee nurses to earn a salary while completing a fully funded Diploma of Nursing in their own community. It's a practical, place-based solution that builds capability and keeps care close to home.

We also introduced the Ageing in the Outback Strategy, ensuring older people have equitable access to evidence-based care. The inaugural Central West Queensland Care Expo brought community and provider together to improve service awareness and connections.

Delivering quality outcomes, we continued our VBHC journey, embedding VBHC principles into commissioning and preparing for VBHC-aligned provider contracts in 2025–26. We also submitted the final progress report on the Joint Regional Five-Year Mental Health, Suicide Prevention and Alcohol and Other Drugs Plan, a milestone shaped by collaboration and consultation.

Making care *more affordable* remained a priority. We've worked hard to reduce cost pressures for patients and families—whether through subsidised mental health supports, integrated care pathways, or commissioning models that make services easier to access, no matter your postcode or income.

A personal highlight this year was representing Western Queensland on the world stage at the International Consortium for Health Outcomes Measurement (ICHOM) 2024 Conference in Amsterdam. Sharing our HOC model under the theme "People as Partners" was a proud moment that showcased the power of community-led solutions and place-based commissioning.

Thank you to our Chair Liz Fraser and the Board for your guidance and counsel. And to my team, thank you for your tireless dedication to Western Queensland. It's your passion, care and commitment that makes this work possible.

As we approach our 10-year anniversary milestone, our commitment to collaboration remains stronger than ever.

Sandy

Sandy Gillies CEO



Who we are

We're one of seven PHNs in Queensland and 31 nationally, funded by the Australian Government to strengthen primary health care. As an independent, not-for-profit organisation, we partner with local providers, communities and stakeholders to deliver the right care, in the right place, at the right time.



Our vision

Healthier Western Queensland Communities

Our mission

Paving our way towards improved health outcomes for all Western Queenslanders through a comprehensive, integrated primary health care system in collaboration with our stakeholders, partners and communities

Our values

These are the guiding actions that power us:



TRANSPARENT



PURPOSEFUL



RESPONSIVE



AUTHENTIC



RESPECTFUL



IMPACTFUL

Ourregion and communities

We're proud to live and work across the vast and vibrant communities of Western Queensland. Supporting one of Australia's most remote regions, our PHN spans 954,340 square kilometres, covering over half of Queensland, and shares the borders of New South Wales, South Australia and the Northern

More than 64,000 residents call our region home, across 20 Local Government Areas (LGAs) each with their own unique strengths, challenges and priorities.

Our region is supported by a network of health professionals, service providers and community leaders who work together to deliver care that's shaped by the voices of those who live here. We walk alongside communities to co-design

solutions that reflect local knowledge, cultural context and lived experience.

COMMISSIONING LOCALITIES

HOSPITAL AND HEALTH SERVICES

PRIMARY HEALTH CLINICS

PRIVATE PRACTICES

ABORIGINAL COMMUNITY CONTROLLED HEALTH ORGANISATIONS (ACCHOs)

ROYAL FLYING DOCTOR SERVICE (RFDS) BASES SERVICING 17 SITES



Health profile



PEOPLE ARE ABORIGINAL AND TORRES STRAIT ISLANDER (6 TIMES THE NATIONAL AVERAGE)

RESIDENTS ARE AGED 65 OR OVER, WITH THE OLDER POPULATION GROWING BY NEARLY 24% SINCE 2016

15%

OF ADULTS SMOKE DAILY
(59% HIGHER THAN QLD AVERAGE)



38%
OF ADULTS ARE OBESE
(36% HIGHER THAN QLD AVERAGE)

43%

OF ADULTS CONSUME ALCOHOL AT RISKY LEVELS (18% HIGHER THAN QLD AVERAGE)

972

BABIES BORN IN THE PHN 324 TO FIRST NATIONS MOTHERS



DEATHS PER 100,000 (2020-2022) (30% HIGHER THAN QLD AVERAGE)

AVOIDABLE DEATHS
PER 100,000
(65% HIGHER THAN QLD AVERAGE)

Source:

'Estimated Residential Population 2024', Queensland Government Statistician's Office, accessed 20 October 2025.

'Queensland Health Population Health Status Profile for Western Queensland PHN', Queensland Government, accessed on 20 October 2025.

Our directions for change

Our strategic direction is built on three foundations: the Department of Health, Disability and Ageing (DoHDA) national PHN strategy, our Paving our Way to 2026 Strategic Plan and the JRHNA. Each shapes how we listen, plan and deliver care across Western Queensland.

Our strategic plan sets our five directions for change:



Empowered communities leading the way



Supported workforce built for the bush



Equitable access closer to home



Affordable services for everyone



Quality outcomes for patients and families



Paving the way, together.

FOR OUR FULL STRATEGIC PLAN AND MORE ABOUT OUR PRIORITIES, SCAN THE QR CODE OR VISIT WWW.WQPHN.COM.AU/OUR-PHN/PUBLICATIONS-AND-REPORTS

Regional health priorities

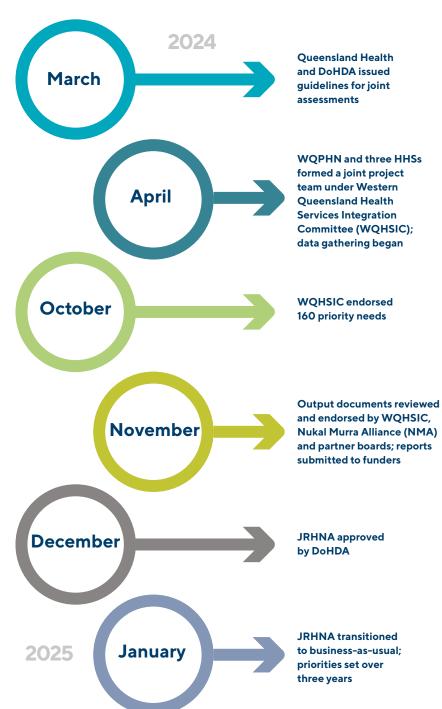
Initiated in March 2024, the JRHNA is a landmark collaboration between WQPHN and the North West, Central West and South West Hospital and Health Services (NWHHS, CWHHS, SWHHS).

The initiative brought together health planners, data analysts and community experts to produce a single, comprehensive assessment of Western Queensland's health needs.

Over eight months, the joint team applied rigorous data analysis and deep community engagement to identify 160 priority health and service needs, enabling more aligned, evidence-driven service planning across the region.

The stories in this report illustrate how we are addressing JRHNA-identified priorities—through local partnerships, targeted programs and place-based innovation.

Our work reflects a shared commitment to improving health outcomes through integrated planning, flexible service design and place-based insight.







Commission

Investing in services that communities need. We commission care with purpose. Every service we back is informed by local voices and community priorities. This year, we continued to close gaps through targeted programs, strong partnerships and co-designed models that reflect the lived experience of Western Queenslanders.

Healthy Outback Kids expands across Western Queensland

Growing strong



Our Healthy Outback Kids program continued to grow, strengthening early childhood health and development for families across Western Queensland.

Guided by the Child and Family Health Framework, the program supports children through their first 3,000 days with culturally-safe, coordinated care shaped by local voices and clinical expertise.

HIGHLIGHTS

- · Launched new service site in Boulia
- Welcomed community paediatricians to strengthen local care and advance HealthPathways for children
- Established Advisory Groups in Boulia and Cunnamulla to strengthen local decision-making
- Progressed the Thuaaka Mornington Child and Family Health Framework

JRHNA INSIGHT: CHILD AND MATERNAL HEALTH

Families across Western Queensland face limited access to culturally appropriate child development and maternal health services.

The JRHNA identifies this as a toptier priority, with urgent need for early screening, coordinated care and community-led service design.

Healthy Outback Kids directly responds to this need, supporting children through their first 3,000 days with care that's locally shaped, culturally safe and clinically informed.

TIER 1 REGIONAL PRIORITY



Read more

EXPLORE HOW HEALTHY OUTBACK KIDS IS GROWING BRIGHTER BEGINNINGS ACROSS WESTERN QUEENSLAND.

Universal Aftercare Service supports South West communities

Rebuilding lives

The Universal Aftercare Service (UAS) provides tailored support to people experiencing suicidal distress across six local government areas in South West Queensland.

The team takes a strengths-based approach, recognising and building on the resilience of individuals and communities living in remote and very remote areas.

Through face-to-face networking, local events and deep relationship-building, they foster the trust and awareness needed for long-term impact.



Communities across Western Queensland experience elevated rates of mental health presentations, admissions and psychological distress. The JRHNA identifies mental health and suicide prevention as a top-tier priority, with urgent need for culturally-safe, community-based support and early intervention

The UAS responds directly to this need, offering wraparound care that blends clinical and psychosocial support, shaped by local partnerships and Aboriginal and Torres Strait Islander leadership.

TIER 1 REGIONAL PRIORITY



WORKING TOGETHER FOR WELLBEING

By working closely with the SWHHS and other community organisations, UAS ensures individuals receive personalised, responsive support during times of crisis.

Across South West Queensland, Stride Mental Health, SWHHS and WQPHN met regularly to shape a service that blends clinical care with psychosocial support.

Partnerships with ACCHOs, including Goondir Health Services in St George, ensure aftercare is culturally safe, inclusive and responsive to community needs.

REAL IMPACT

Recovery and renewal

After a relationship breakdown, one client arrived at UAS in distress, struggling with self-doubt and the demands of single parenting.

With practical support to build daily routines, plan meals and navigate emotional challenges, they gradually regained confidence.

Today, they are thriving, managing parenting challenges, prioritising self-care, improving personal relationships, and celebrating a promotion after successfully submitting a proposal with UAS quidance.

This story reflects the program's ability to provide wraparound, transformative support.



Read more

EXPLORE HOW UNIVERSAL AFTERCARE IS SUPPORTING RECOVERY AND CONNECTION IN REMOTE COMMUNITIES.

Using PREMs and PROMs to shape better care

Feedback in focus

This year we designed our approach to collecting and reporting Patient Reported Experience Measures (PREMs) and Patient Reported Outcome Measures (PROMs).

Through this work, we strengthened the evidence base for service quality, ensuring that consumer perspectives directly inform the design and delivery of commissioned services.

By refining the PREM tool, engaging with commissioned service providers (CSPs) and aligning with the national Monitoring and Evaluation Framework for PHNs, we created a more consistent, secure and meaningful feedback process.

WORKING TOGETHER FOR WELLBEING

This work was shaped by strong collaboration across WQPHN, drawing on internal expertise in business intelligence, coordination and performance, and working closely with our CSPs and refeRHEALTH.

HIGHLIGHTS

- Redesigned the PREMs tool to improve clarity, accessibility and inclusivity
- Developed Power BI dashboards to visualise trends and regional insights, supporting consistent monitoring and evaluation across commissioned support, navigation, and health and wellbeing services
- Established clear guidance for service delivery CSPs to actively support the collection of PREMs. Of the responses received:



98.2% would recommend the service to friends and family



97% felt the service was worthwhile



97.6% felt more positive about their health and wellbeing



60% of closed mental health referrals reported improved outcomes



Improvements in Maranoa (+10%) and Mount Isa (+2.2%)



Community grants make local impact

Across Western Queensland, small grants are making a big difference. In 2024-25, WQPHN awarded mental health community grants to eight local organisations to lead their own wellbeing initiatives.

Grant recipients included:

Windorah (Barcoo SC)
Bedourie
Birdsville
Jundah
Noorama
Thallon/Daymar
Roma
Region-wide

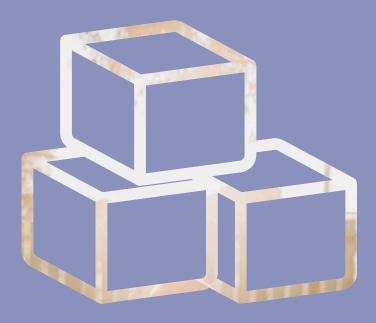
THALLON COMMUNITY CHRISTMAS LUNCHEON

QCWA Thallon/Daymar used their grant to host a Christmas Luncheon that honoured the resilience of a community that has weathered droughts, floods and isolation.

Locals came together in connection, not crisis, reminding us that mental health is supported through relationships as much







Capacity-build

Strengthening people, systems and the future of care. Quality care needs strong foundations. This year we've continued to build local workforce capability, digital infrastructure and practice resilience. It's not just about keeping services running, it's about laying the groundwork for the future.

A place-based pathway for First Nations future nurses

Careers on Country

The Western Queensland Nursing Futures Program $^{\text{TM}}$ is creating real change, supporting Aboriginal and Torres Strait Islander trainee nurses to grow careers in their own communities.

By removing relocation barriers and embedding cultural and professional support, the program is transforming the health workforce from within.

Growing a workforce built for the bush

The program marks a decisive step toward building a sustainable First Nations workforce across Western Queensland. Launch events in Mount Isa and Charleville celebrated cultural pride, community leadership and future workforce strength

By removing the need to relocate, Nursing Futures breaks down barriers to employment and creates real pathways for First Nations people to give back to their communities.

At the launch, WQPHN CEO Sandy Gillies shared that her own career began in a similar hospital-based program 34 years ago, a testament to the lasting impact of community-led workforce solutions.

JRHNA INSIGHT: WORKFORCE

The JRHNA identifies workforce sustainability and First Nations representation as top-tier priorities in all three HHS regions.

The Western Queensland Nursing Futures Program™ responds directly to this need, offering a culturally safe, place-based pathway that builds capability from within and strengthens care where it's needed most.

TIER 1 REGIONAL PRIORITY



WORKING TOGETHER FOR WELLBEING

This program is a collaboration between WQPHN, SWHHS, NWHHS, TAFE Queensland and Gidgee Healing. Funding is provided through the First Nations Training Strategy, powered by the Queensland Workforce Strategy 2022–2032, with additional support from the First Nations Health Office, Queensland Health.



"Seeing one of my Elders' face light up when I visited the ward showed me the value of having local faces in our hospitals."

Dorsey Bell-Hill, trainee nurse, Mount Isa



12 successful applicants

from over 50 expressions of interest

5 students training in the North West

7 students training in the South West

New advisory and mentoring supports embedded

Local voices and lived experience shaping program design and delivery

REAL IMPACT

Growing local futures

Sammy-Jo is a proud Kalkadoon woman and a nurse who understands the barriers Aboriginal and Torres Strait Islander people face when pursuing health careers in rural and remote communities. These include the cost of relocation and the social disconnection that comes with leaving Country.

She's passionate about the Western Queensland Nursing Futures Program™.

"We're delivering knowledge and culturally safe care where it's needed most."



Watch: Nursing Futures launch in Charleville

EXPLORE HOW NURSING FUTURES IS GROWING FIRST NATIONS CAREERS AND COMMUNITY-LED CARE ACROSS WESTERN OUEENSLAND. VISIT WWW. VIMEO.COM/1095495655

Care and connection closer to home

Living and ageing well in the outback



In Western Queensland, older people experience higher levels of social isolation, limited access to aged care services and increased risk of poor health outcomes. We're working to change that.

This year, we launched Ageing in the Outback™: A strategy for Western Queensland 2024–2026.

The strategy and implementation plan is a region-wide commitment to ensure older people have access to evidence-based healthcare that supports informed decision making and promotes wellbeing.

HIGHLIGHTS

- Commissioned priority services
- Delivered aged care, disability and palliative care workshops region-wide
- Prioritised health equity and access for vulnerable and priority population groups
- Engaged consumers and providers to ground the strategy in local needs
- Contributed to forums including the Australian Association of Gerontology, Council on the Ageing Queensland and the Gerontological Alliance of Nurses Australia



WORKING TOGETHER FOR WELLBEING

This strategy reflects the strength of our partnerships with councils, aged care providers, community organisations and advocacy groups including:

- · Celebrate Ageing
- · Health Consumers Queensland
- My Dementia Companion
- Australian Frailty Network
- The University of Queensland
- Sunshine Coast University

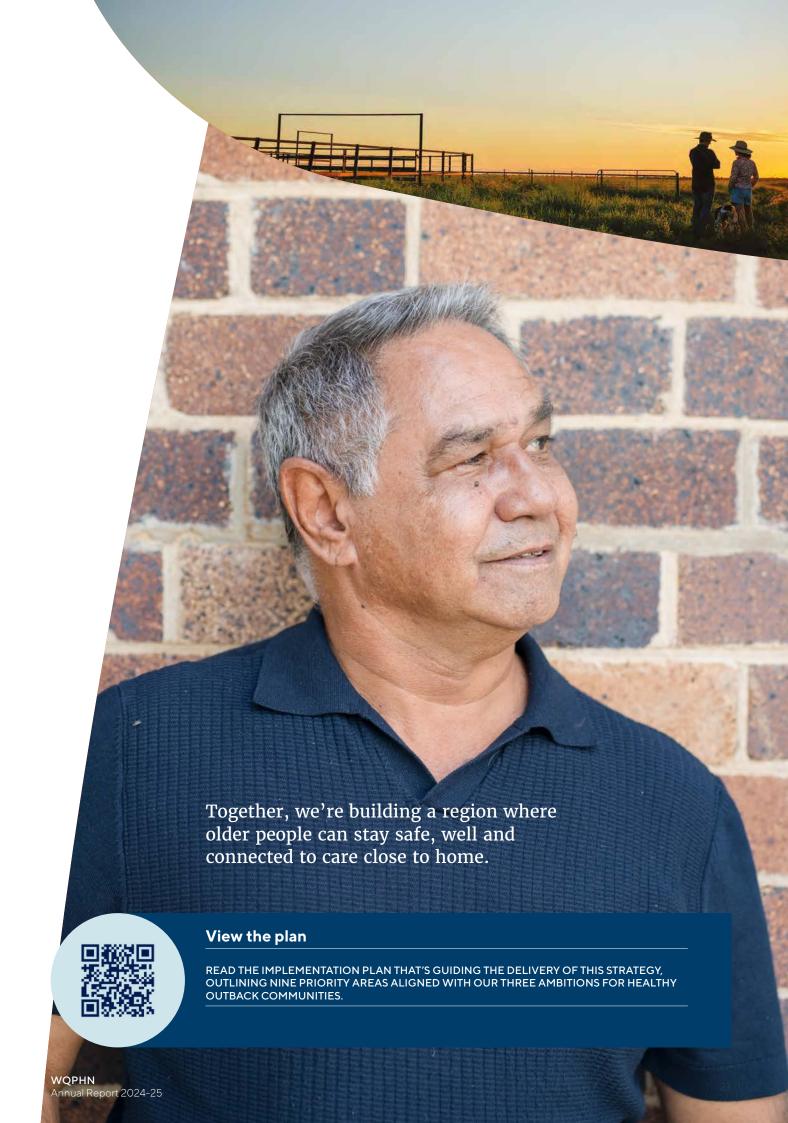
JRHNA INSIGHT: AGED CARE

The JRHNA identifies ageing in place and aged care access as top-tier priorities across all three HHS regions.

Our strategy responds directly to this need, supporting local care pathways, strengthening community connection and upholding dignity in ageing, close to home.

TOP TIER PRIORITY





Embedding outcomes that matter

Value-based health care

We proudly advanced our Value-Based Health Care (VBHC) journey in 2024-5, through a continued partnership with the Australian Healthcare and Hospitals Association (AHHA).

Efforts focused on embedding VBHC principles into commissioning across the Western Corridor (HOC region).

Four joint workshops helped build capability, explore delivery models and identify system changes needed to enable value-driven care.

HIGHLIGHTS

- Delivered VBHC micro-credential training for commissioned providers
- Explored how VBHC can be delivered through existing structures
- Identified system enablers for value-based care
- Informed development of the WQPHN Commissioning Outcomes in the Outback Framework
- Introduced VBHC-aligned requirements for inclusion in CSP contracts

WHAT IS VBHC?

Value-based health care focuses on improving people's health outcomes and experiences relative to the cost of delivering care.

It shifts the focus from the volume of services provided to the value they create for individuals and communities, taking a system-wide view of a person's health journey.

Watch

EXPLORE WESTERN QUEENSLAND'S VBHC JOURNEY AND OUR WEBINAR SERIES FOR MORE INFORMATION

SESSION 2: VISIT WWW.VIMEO. COM/1024576129 SESSION 3: VISIT WWW.VIMEO.COM/1071239899

JRNHA INSIGHT

The VBHC approach strengthens our ability to respond to regional priorities identified in the JRHNA.

By embedding outcomes that matter into commissioning, we're building a system that delivers care where it counts, for individuals, families and communities across Western Queensland.

TIER 1 REGIONAL PRIORITY







GP support and connection

Supporting GPs in the West



These efforts reflect our commitment to supporting every practice, no matter how remote, with the tools, data and support to thrive.

Learn more

EXPLORE HOW PRACTICE SUPPORT IS SHAPING CARE ACROSS WESTERN QUEENSLAND.

VISIT WWW.WQPHN.COM.AU/PROVIDER-RESOURCES/GENERAL-PRACTICE-SUPPORT/ PRIMARY-HEALTHCARE-SUPPORT General practices and Aboriginal Community Controlled Health Organisations (ACCHOs) play a critical role delivering accessible, high-quality care across our region.

Our Primary Care & Chronic Disease team continued to deliver targeted support throughout the year, working closely with practices and ACCHOs to build capability, improve data quality and strengthen engagement with priority programs including mental health, chronic disease and aged care.

Tailored to local needs, our support focused on workforce sustainability, digital enablement and quality improvement.

Through regular practice visits, virtual check-ins and collaborative planning, our team helped practices navigate system changes, meet accreditation requirements and embed continuous improvement processes.

We also supported practices and ACCHOs to participate in national initiatives such as MyMedicare and the Practice Incentives Program (PIP), while promoting the use of clinical tools like HealthPathways and refeRHEALTH.

WORKING TOGETHER FOR WELLBEING

This work was made possible through close collaboration between WQPHN's Primary Care & Chronic Disease team, general practices, ACCHOs, primary health care nurses and regional service partners.

Together, we're building stronger foundations for primary care across Western Queensland.



Practice support at a glance

SUPPORT SESSIONS

1,441

TOTAL SESSIONS (EMAIL, WEBINARS, PHONE, VIRTUAL, FACE-TO-FACE)

271

FOCUSED ON QUALITY IMPROVEMENT

TELEHEALTH AND WORKFORCE

716

TELEHEALTH SERVICES VIA GP VIRTUAL INTEGRATED PRACTICE (VIP) PROGRAM

94

WORKFORCE SUPPORT INTERACTIONS (INCLUDING GPT NATIONAL ASSESSMENT TOOL ROLLOUT)

CAMPAIGNS AND OUTREACH

CO-BRANDED

cancer screening

CAMPAIGN WITH OUEENSLAND HEALTH

COVID OUTREACH IN 5 REMOTE COMMUNITIES, DELIVERED

135 vaccinations

DIGITAL TOOLS AND TEMPLATES

COMMENCED

Primary Sense integration

CO-DEVELOPED

chronic condition

TEMPLATES WITH RFDS AND CLINICAL EXCELLENCE QUEENSLAND

Quality improvement highlights

Data cleansing for better records

- Reduced patient list from ~680 to 500
- Embedded monthly data cleansing
- Stronger collaboration between clinical and admin teams

Opportunistic cancer screening

- Integrated National Cancer Screening Register with Clinical Software
- $\bullet \ Improved \ real-time \ eligibility \ and \ results$
- Boosted screening conversations during routine consults





Coordinate

Bringing systems together for smoother, more connected care.

By connecting primary care with mental health, aged care, hospitals and social supports, we've strengthened care pathways right across Western Queensland. In 2024-25, this meant better connections, smoother referrals and more integrated care, so people get the support they need, closer to home.

wellCONNECT: Shaping mental health, together

This year, we reached a key milestone in our shared journey through the Mental Health, Suicide Prevention and Alcohol and Other Drugs (MHSPAOD) Joint Regional Plan.

Led by WQPHN and shaped by the voices of HHSs, partner organisations, community leaders, carers and people with lived experience, the completed progress report captures achievements to date across nine focus areas and 65 priority actions.

At the wellCONNECT checkpoint roundtable, the Consortia came together to reflect on progress and co-design the path ahead, laying the groundwork for future plans.

WORKING TOGETHER FOR WELLBEING

The Plan was co-designed by WQPHN, HHSs and a diverse network of stakeholders. It reflects our region's lived experience, local knowledge and shared commitment to mental health and wellbeing.

wellCONNECT

Together for wellbeing



HIGHLIGHTS

80+ voices across11 communities informed progress

Five-year progress report submitted to DoHDA

Insights will guide future planning and investment



Watch

HEAR FROM CONSORTIA MEMBERS AS THEY REFLECT ON FIVE YEARS OF PROGRESS AND SHAPE WHAT'S NEXT FOR MENTAL HEALTH ACROSS WESTERN QUEENSLAND.

VISIT WWW.VIMEO.COM/1094260487



Healthy Outback Communities expands expands into Boulia

Connecting care across the outback



Community-led solutions are the only way to go. Outback communities are resilient, caring for each other and coming together. An approach that focuses on wellness is truly important.

Keith Tracey-Patte
CEO, Health Consumers Queensland

In remote regions like Boulia, isolation and limited access to services can make it harder for people and families to stay well and connected. Healthy Outback Communities (HOC) is changing that by embedding support where it's needed most.

In November 2024, the Boulia community came together to celebrate HOC's expansion with a vibrant Family Fun Day. The program continues to shift the focus from illness to wellness, empowering remote Western Queensland communities to live well and stay connected to care.

WORKING TOGETHER FOR WELLBEING

HOC is built on strong local partnerships with councils, community organisations, health providers and outreach teams who understand the region's unique needs.

In Boulia, collaboration with BUSHkids and the Boulia Community Support Service helped deliver a day of connection and care with lasting impact. We were also pleased to connect with the Director-General of Queensland Health in October 2024 to discuss the HOC program and its role in strengthening rural health outcomes.



HIGHLIGHTS

Free health checks and personal wellbeing plans

Kids activities, local service stalls and cardiopulmonary resuscitation (CPR) education

Mental health, nutrition and mobility **programs** across the region

Stronger care pathways through outreach, transport and telehealth

JRHNA INSIGHT: SYSTEM TRANSFORMATION

HOC is a practical example of system transformation, shifting from reactive care to proactive wellbeing. By embedding services in community settings and responding to local priorities, HOC strengthens continuity of care and builds resilience across Western Queensland.

TIER 1 REGIONAL PRIORITY





REAL IMPACT

Kicking goals for outback health

Mental health ambassador and National Rugby League legend Darius Boyd set the tone for the Boulia launch, sharing a powerful message of resilience and wellbeing.

His story reinforced HOC's commitment to supporting healthier, more connected outback communities.

Darius brought energy and inspiration to the Family Fun Day, reminding families that mental health matters, and that help should be close to home, not far away.



Watch the highlights

SEE COMMUNITY CONNECTION, PRACTICAL HEALTH SUPPORT AND THE ENERGY OF HOC IN ACTION.

VISIT WWW.VIMEO.COM/1034855240

Nukal Murra Alliance drives community-led reform

Leading with culture





The Nukal Murra Alliance (NMA) continues to grow as a powerful force for First Nationsled health reform in Western Queensland. Bringing together Aboriginal Community Controlled Health Organisations (ACCHOs) and sector leaders, NMA drives place-based solutions, elevates community voice and embeds cultural safety across systems.

This year, NMA deepened its strategic agenda, focusing on workforce, commissioning and shared advocacy to improve outcomes for Aboriginal and Torres Strait Islander people across the region.

WORKING TOGETHER FOR WELLBEING

Throughout the year, NMA deepened its engagement with key stakeholders and service partners to strengthen formal planning frameworks and deliver communityinformed services that reflect the aspirations of First Nations people.

Member organisations convened quarterly to assess the effectiveness of NMA's structural and funding model, identify common challenges, and collaboratively design solutions aimed at improving service delivery and advancing health equity.

HIGHLIGHTS

- Reshaped the Integrated Team Care (ITC) program to align with revised funding structures and support sustainability
- Formalised NMA governance and shared strategic priorities
- Delivered joint submissions and advocacy to influence regional reform
- Advanced workforce planning and shared recruitment strategies











Digital connection and inclusion

Digital health literacy empowers people with complex and chronic conditions to take charge of their wellbeing, from accessing online interventions to finding timely support when it's needed most.

This year, we deepened our commitment to digital inclusion by strengthening capability across the rural and remote healthcare workforce

We also worked closely with the Australian Digital Health Agency on national priorities including My Health Record, Provider Connect Australia and electronic prescribing.

These initiatives are improving continuity of care, increasing efficiency and enhancing medication safety, helping reduce preventable hospitalisations across the region.

We're integrating digital skills and tools into everyday care, so everyone can be confident to use technology to improve their health and wellbeing.

HIGHLIGHTS

- 60 trained mentors now supporting digital literacy across Western Queensland
- Teachable moments help patients use tools like the my health app and telehealth detox services
- Digital tools embedded into everyday practice for lasting impact

Expanding clinical pathways

LOCALISED GUIDANCE FOR CONSISTENT, COORDINATED CARE

As digital confidence grows across Western Queensland, so too does the strength of the systems supporting clinicians behind the scenes.

WQ HealthPathways is a secure web portal that connects healthcare providers to localised clinical guidance and referral options.

This year, WQ HealthPathways expanded its reach and relevance strengthening primary care pathways and supporting more timely, consistent and coordinated care across rural and remote Western Queensland.

KEY FOCUS AREAS

- Child and youth health
- · Aged care and dementia
- Women's health
- · Mental health
- Cancer screening

WORKING TOGETHER FOR WELLBEING

Pathways were co-designed with subject matter experts from:

- · Queensland Dementia, Ageing and Frailty
- · Dementia Australia
- Bleed Better
- Royal Flying Doctor Service (Queensland Section)
- Mindframe
- Vital Health
- Better Health NQ
- Department of Health, Disability and Ageing

We also partnered with our three HHSs to ensure pathways reflect local priorities and ensure training and promotion reached 158 healthcare providers across the region.



TOP 5 MOST VIEWED PATHWAYS

- · Chronic Obstruction Pulmonary Disease (COPD)
- Cognitive impairment and dementia
- · Heavy menstrual bleeding
- · Bowel cancer screening
- Eating disorders in adults

WQ HealthPathways is making it easier to deliver consistent, coordinated care tailored to our communities.



HIGHLIGHTS

223

223 NEW LOCALISED PAGES

712

2,790
SESSIONS OF USE

10,949
PAGE VIEWS

174

NEW CLINICAL PATHWAYS

NEW RESOURCE AND REFERRAL PAGES

NEW PAGES AND PATHWAYS INFORMED BY LOCAL HEALTH PROFESSIONAL FEEDBACK, HEALTH NEEDS ASSESSMENTS, CHRONIC DISEASE DATA AND CLINICAL **EXCELLENCE QUEENSLAND.**



Care Expo brings services and community together

Connecting community to support



In March 2025, the inaugural Central West Queensland (CWQ) Care Expo brought together 48 service providers and 125 community members from Longreach, Barcaldine and Winton at the Longreach Civic and Cultural Centre.

The event provided a welcoming space for residents to connect with local aged care, disability, veteran and palliative services.

In a region where distance and limited resourcing often make care difficult to navigate, the Expo helped break down barriers to service awareness and access.

Community members gained practical information to support loved ones, discovered services they hadn't known were available, and explored assistive technologies to make informed care decisions.

HIGHLIGHTS

- Strengthened cross-sector connections
- Built community resilience
- Identified new partnerships and potential service expansions
- Laid the groundwork for more integrated, coordinated care



WORKING TOGETHER FOR WELLBEING

The CWQ Care Expo 2025 was funded by the Australian Government under the Integrated Care and Commissioning (ICC) Initiative, with contributions from:

- Department of Regional and Rural Development
- Queensland Department of Child Safety, Seniors and Disability Services.

Further support was provided by:

- Tackling Regional Adversity through Connected Communities
- Royal Flying Doctor Service (Queensland Section)
- WQPHN
- · Longreach Regional Council
- Lives Lived Well
- · 4LG
- West FM

Momentum continues through monthly CWQ Interagency Network meetings and the ongoing work of the ICC Local Stakeholder Advisory Group.

MEANINGFUL CONNECTIONS

Jo Winkleman

Care Finder & Aged Care Advocate, Aged and Disability Advocacy (ADA) Australia

Jo has played a valuable role in supporting the CWQ ICC project by consistently highlighting local issues, fostering service connections and helping to improve access, choice and control for people navigating aged care and related supports.

Her work reflects a deep commitment to collaboration and community-driven care across CWQ.



Watch

HEAR FROM PROVIDERS AND THE COMMUNITY ABOUT THE DAY.
VISIT WWW.VIMEO.COM/1080045632

Welcome to new Directors Rod Margetts and Catrina Felton-Busch

Board and governance

Our Board of Directors



Elizabeth Fraser CHAIR8 meetings attended



Jason Warnock
DIRECTOR
3 meetings attended
Retired 3 December 2024



Professor Sabina Knight AM
DIRECTOR
8 meetings attended



Rod Margetts

DIRECTOR AND CHAIR,
FINANCE, AUDIT AND RISK
MANAGEMENT COMMITTEE
4 meetings attended
Appointed 14 October 2024



Sheryl Lawton
DIRECTOR
6 meetings attended



Dallas Leon
DIRECTOR
2 meetings attended
Resigned 29 August 2024



Karen Riethmuller Tully
DIRECTOR AND CHAIR,
PEOPLE, ENGAGEMENT AND
CULTURE COMMITTEE
7 meetings attended



Catrina Felton-Busch
DIRECTOR
4 meetings attended
Appointed 3 December 2024



Dr Clare Walker
DIRECTOR
5 meetings attended



Rachel Portelli
COMPANY SECRETARY



Board changes 2024–25

At the November 2024 Annual General Meeting (AGM), Rod Margetts and Catrina Felton-Busch joined the WQPHN Board.

Rod brings extensive expertise in financial management, strategic planning and health sector reform.

Catrina, an Aboriginal leader from Mornington Island, offers deep cultural knowledge and a strong commitment to improving Indigenous health outcomes.

We farewelled long-serving Directors Dallas Leon and Jason Warnock.

Dallas, a proud Kalkadoon and Waanyi man, contributed nearly five years to WQPHN, including a term as Chairperson, providing invaluable leadership in strengthening primary health services across the region.

Jason, an inaugural Board member since 2018, played a pivotal role in shaping WQPHN's vision and direction. Both leave a lasting legacy of dedication to better health outcomes for Western Queensland communities

Our Board Committees

The Board currently operates three Committees:

- Finance, Audit and Risk Management (FARM) Committee
- People, Engagement and Culture (PEC) Committee
- · Care Governance Committee

FARM COMMITTEE

Supports the Board to meet its corporate governance obligations, specifically with respect to financial oversight and strategic risk management.

Responsibilities

- Overseeing the integrity of statutory financial reports and statements
- Monitoring the effectiveness of risk identification and management frameworks
- Ensuring compliance with regulatory, prudential, legal and ethical standards
- Reviewing adherence to internal guidelines, policies and procedures
- Undertaking any other tasks referred by the

Members

- · Rod Margetts (Chair)
- Catrina Felton-Busch (from 3 December 2024)
- Elizabeth Fraser (from 27 February 2025)
- Karen Riethmuller Tully (until 3 December 2024)
- · Jason Warnock (until 3 December 2024)

PEC COMMITTEE

Assists the Board in relation to matters involving engagement with all WQPHN Members and key stakeholders, and the people, remuneration and culture of WQPHN.

Members

- Karen Riethmuller Tully (Chair)
- Sabina Knight (from 3 December 2024)
- · Sheryl Lawton
- · Dallas Leon (until 29 August 2024)
- Jason Warnock (until 3 December 2024)

CARE GOVERNANCE COMMITTEE

Supports the Board in ensuring WQPHN services are safe, effective and person-centred, while also meeting the DoHDA requirement for a Clinical Council, however named.

Responsibilities

Supports WQPHN to deliver effective, person-centred primary health care that improves overall population health and reduces avoidable hospital presentations, aligned to the WQPHN Services Governance Domains:

- Safe: Eliminating avoidable harm during the delivery of care and support services.
- Effective: Delivering appropriate, integrated care in the right way, at the right time, with the right outcomes.
- Person-centred: Ensuring care and planning are guided by people's values, beliefs and individual contexts.

In 2025, WQPHN initiated an expression of interest process to renew Committee membership, acknowledging the tenure and contributions of the group established in 2022

As the financial year closed, shortlisting was underway with a focus on strengthening engagement, broadening clinical expertise and improving regional representation.

The process also aimed to support gender balance, diverse clinical backgrounds and inclusive representation across the region.

Members

- Dr Ross Hetherington (Chair)
- Ms Jean Benham
- · Ms Wanita Gorringe
- Mr Andrew Quabba
- Dr Clare Walker
- Ms Sharon Young
- Ms Joni Barrie
- · Dr Anna Bowen
- Dr Don Bowley
- Ms Pia Clinton-Tarestad
- Ms Elise Gorman
- Ms Peta Hart
- Ms Miranda Lewis
- Ms Kym Mander
- Ms Nicky Wildermuth



CONSUMER ADVISORY COMMITTEE

The WQPHN Consumer Advisory Committee (CAC) plays a key role in our commitment to inclusive, communityled health care. Passionate community members bring lived experience and insight to the WQPHN Board.

Members help ensure services are planned and delivered around local needs and values.

Key functions include:

- Advising the Board and CGC on service planning and priorities
- Supporting culturally appropriate, accessible service delivery
- Contributing to monitoring and evaluation
- Embedding consumer voices in co-design and co-delivery

Reinvigorated in 2024 via an EOI process, the CAC appointed Ethan Capewell as Chair. Supported by the CEO and a PECC representative, the committee brings together diverse voices from across WQPHN's commissioning localities.

The committee aims to include two members per locality, providing local insights and lived experience, plus three Consumer Advisory Network (CAN) Chairs from the region's HHSs to ensure broader system perspectives.

This structure ensures strong community representation and supports inclusive, locally informed primary healthcare strategies.

By working closely with WQPHN staff and the CGC, the CAC helps shape services that reflect community priorities and improve health outcomes across our region.

OUR MEMBERS

Thank you to our 15 members, including our three founding HHS members, who join us in partnership to improve health outcomes throughout Western Queensland.































WESTERN QUEENSLAND HEALTH SERVICES INTEGRATION COMMITTEE (WQHSIC)

Established in 2016, WQHSIC brings together executive leaders from our region's three HHSs and ACCHOs. Operating under the Maranoa Health Accord, the committee formalises a shared commitment to co-design, collaboration and systemwide improvement across Western Oueensland.

A key focus and priority for the committee in 2024-25 was the development of the region's first JRHNA. This significant collaboration-in-action will continue to inform future commissioning, equity planning, and digital health enablement to ensure services are aligned with community priorities and regional realities.

Member organisations

- Central West Hospital and Health Service
- North West Hospital and Health Service
- South West Hospital and Health Service
- Western Queensland Primary Health Network
- Nukal Murra Alliance Partners

NUKAL MURRA ALLIANCE

Established in 2016, the Nukal Murra Alliance (NMA) is a strategic partnership between WQPHN and four ACCHOs:











Together, NMA commissions culturally-safe services across Western Queensland, with a focus on chronic disease and mental health.

Key programs include Integrated Team Care (ITC), supporting individuals with complex conditions, and Social and Emotional Wellbeing (SEWB), delivering localised psychological and wellbeing support.

In 2024–25, NMA continued to strengthen community-led care, ensuring services remain responsive, connected and grounded in cultural knowledge.

Executive Team



Sandy Gillies
CHIEF EXECUTIVE
OFFICER



Leisa Fraser

ACTING EXECUTIVE
HEAD OF STRATEGY,
PLANNING &
PERFORMANCE



Deb Spanner

ACTING HEAD OF
PRIMARY HEALTH
AND COMMISSIONED
SERVICES

A proud Gunggari woman from Winton, Sandy Gillies is an internationally-respected leader in rural and remote health, with a career dedicated to improving health access, equity and outcomes across some of Australia's most underserved regions.

Beginning her journey as an Aboriginal Health Worker and Enrolled Nurse, Sandy has long championed health equity, particularly for Aboriginal and Torres Strait Islander communities. Her career has spanned senior roles at the Queensland Mental Health Commission and the Queensland Aboriginal and Islander Health Council, where she advanced culturally responsive care and system reform.

In 2017, Sandy joined WQPHN as Executive Manager, leading commissioning efforts for mental health and healthy ageing services across nearly one million square kilometres. In 2021, she became the first Indigenous CEO among Australia's 31 Primary Health Networks.

Her leadership has been recognised through appointments as Adjunct Professor at James Cook University (2020), member of the National Women's Health Advisory Council (2023), RFDS Ambassador and member of the Australian Centre for Value-Based Health Care Advisory Board.

Under Sandy's leadership, WQPHN has become a national exemplar, with its Healthy Outback Communities model winning the 2023 Health Care Equity Award and being showcased globally at the ICHOM 2024 Value-Based Health Care Conference in Amsterdam.

A respected Winton local, Leisa Fraser joined WQPHN in 2020, bringing more than two decades of experience in Aboriginal and Torres Strait Islander health, aged care services, finance, human resource management, workplace health and safety, and quality improvement.

Leisa is a passionate advocate for equitable healthcare in rural and remote communities, grounded in strong local connections and a deep belief in community-led solutions.

She is President of Winton Community and Aged Care Services, a Director on the CWHHS Board and a member of the Australian Institute of Company Directors.

Her experience in Aboriginal and Torres
Strait Islander health spans over ten years,
through senior roles at Nhulumdu Wooribah
Indigenous Health Organisation and
Goolburri Health Advancement Company
Ltd. Earlier leadership roles at Pittsworth
Friendly Society Hospital and Winton Shire
Council further demonstrate her capacity to
drive innovation and lead positive change in
regional healthcare delivery.

Deb Spanner joined WQPHN in January 2022 to lead the organisation's mental health portfolio. In 2025 she was appointed Acting Head of Primary Health and Commissioned Services, bringing over two decades of experience in social work, leadership and primary healthcare across hospital and community-based settings in Queensland's North West, Central West and South West.

Prior to joining WQPHN, Deb held senior roles as CEO of a domestic and family violence and homelessness service, Director of an Aboriginal Community Controlled Health Organisation, and Business Development Manager in youth and homelessness services. She is a passionate advocate for gender-based violence prevention, mental health reform and strengths-based care systems.

Originally from Blackall, Deb has deep personal and professional ties to Western Queensland. She holds a Bachelor of Social Work (Hons) from the University of Queensland and a Master of Business from Queensland University of Technology. She is currently undertaking a PhD exploring decolonised, participatory consultation with Aboriginal and Torres Strait Islander peoples. Deb is also an Accredited Mental Health Social Worker.

Thank you to our Commissioned Service Providers

Together for wellbeing

Our commissioned providers play a vital role in improving health and wellbeing across our region.

A Gadoury & K.J Williams (VetHerd) **Acacia Country Health Pty Ltd**

Aged & Disability Advocacy (ADA) Australia

Anglicare Central Queensland

Barcoo Retirement Village

Barcoo Shire Council

Blackall Tambo Regional Council

Bulloo Shire Council

BUSHkids

CACH - Cunnamulla Aboriginal Corporation

CatholicCare Social Services Southern Queensland

CCNB Limited

Central West Hospital and Health Service

Clean Slate Clinic

Clements Medical Cloncurry Pty Ltd

CWAATSICH - Charleville and Western Area

Aboriginal and Torres Strait Islander Community Health

Diabetes Australia

Dr Erica West

Dr Tiffany Cover

Drug ARM

Dvconnect Limited

EC FiT - Ethan Capewell

Family Planning Queensland

Frith, Katie Renee

Geriatric Care Australia Pty Ltd

Gidgee Healing

Good Shepherd Parish

Goondir Aboriginal & Torres Strait Islander Corporation for Health Services

Health First Group

Health Workforce Queensland Ltd

Indigicare Connect Pty Ltd

Injilinji Aboriginal and Torres Strait Islanders

Corporation for Children and Youth Services

Leichhardt Medical Centre

Lifeline Darling Downs and South West Old Ltd

Lives Lived Well

Longreach Home & Community Care Inc

Longreach Regional Council

Maranoa Medical Centre Pty Ltd

Maranoa Regional Council

Mater Health Services Executive

Matthew Edwards Podiatry

McKinlay Shire Council

Mornington Island Aboriginal Corporation for Health

Mornington Shire Council

Mount Isa City Council

Mount Isa Community Development Association Inc

Mount Isa Medical Centre

Murweh Shire Council

North and West Remote Health

North West Queensland Indigenous Community Social Services Ltd

Paediatric Outreach Services

Palliative Care Queensland

Queensland Alliance for Mental Health Ltd

Quilpie Shire Council

Ramsay St General Practice

RFDS - Royal Flying Doctor Service

RHealth Ltd

Roma Clinic

Rural Doctors Foundation Ltd

Selectability Ltd

South West Hospital & Health Service

St George Medical Centre (QLD) Pty Ltd

Stride Mental Health

University of Queensland

Vital Health Old

Vogelpoel Medical Pty Ltd

Western Queensland Physiotherapy Qld Pty Ltd

Winton Shire Council

World Wellness Group Limited



View our interactive map

TO FIND COMMISSIONED SERVICES IN YOUR COMMUNITY

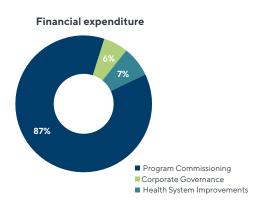
VISIT WWW.WQPHN.COM.AU

Commissioning and contracts overview

In 2024–25, we strengthened our commissioning footprint, growing both the number of Commissioned Service Providers (CSPs) and active contracts.

This reflects our commitment to improving access across Western Queensland, where commissioning is vital in thin service markets.

We also strengthened our long-term commissioning strategy by increasing multi-year agreements from 7 to 16 reducing administrative burden, improving funding certainty and supporting continuity of care.



Priority initiatives enabled by new grant opportunities and funding

Ankle Brachial Index Device

Grow Your Own Workforce program Cancer Screening
Quality
Improvement
activity

Community
Disaster Recovery
initiative

Outreach
Healthcare for
Victim-Survivors
of Family,
Domestic and
Sexual Violence
(FDSV) pilot





DIRECTORS' REPORT FOR THE YEAR ENDED 30 JUNE 2025

Your directors present this report together with the financial report on Western Queensland Primary Care Collaborative Ltd ("WQPHN" or "the Company") for the financial year ended 30 June 2025.

Directors

The names of each person who has been a director during the year and to the date of this report are:

- Ms Elizabeth Fraser
- Ms Catrina Felton-Busch (appointed 3 December 2024)
- Professor Sabina Knight
- Ms Sheryl Lawton
- Mr Dallas Leon (until 29 August 2024)
- Mr Rodney Margetts (appointed 14 October 2024)
- Ms Karen Reithmuller Tully
- Dr Clare Walker
- Mr Jason Warnock (until 3 December 2024)

Directors have held office during the entire reporting period unless otherwise stated above.

Company Secretary

- Ms Rachel Portelli

Principal Activities

The principal activities of the Company during the financial year included:

- Implementing and continuous development of a best practice commissioning framework;
- Providing professional and practice support to existing General Practices through information targeted resources and practice support staff;
- Working in partnership with local Hospital and Health Services and Aboriginal Community Controlled Health Organisations to progress joint service planning, clinical re-design, commissioning and delivery of integrated care and e-health;
- Planning and facilitating population based primary health care including the development of strategies to improve the health of communities in Western Queensland; and
- Providing support and contracted training services to Commissioned Service Providers.

Operating Results

The entity recorded a Surplus of \$43,449 (2024: Surplus of \$0).

DIRECTORS' REPORT FOR THE YEAR ENDED 30 JUNE 2025

Short-term and Long-term Objectives

WQPHN's long term vision is focused on implementing and evaluating the introduction of Healthy Outback Communities (HOC), a new approach to health and wellbeing for Western Queensland's channel country. HOC aims to ensure residents have greater access to preventative health and wellness services and will complement existing local clinics, Royal Flying Doctor Service (RFDS) doctor days, and visiting allied health services.

By paving the way towards improved health outcomes, our mission is to lead better system integration and co-ordination, strengthening equity and empowerment for Western Queensland communities and the people who care for them, undertaken in collaboration with our partners and stakeholders. This mission is underpinned by our guiding actions: transparent, purposeful, responsive, authentic, respectful and impactful.

To achieve this, WQPHN will:

- Commission health and community services to address the prioritised needs of Western Queensland communities;
- Support health care providers and partners through collective leadership and co-design to strengthen accessible, quality and whole-of-person centred care to Western Queenslanders;
- Deliver integrated health services close to home so Western Queenslanders have access to planned and coordinated care that support individuals' health care goals; and
- Foster community care and wellbeing services to support Western Queenslanders to live healthier, happier lives.

Strategy for Achieving Objectives

- Empowered communities: Bring communities together to actively inform and address local community health and wellbeing needs. Shift the focus from illness to wellness through community-led decision making.
- Grow and support our health and wellbeing providers. Embrace new ways of working and embed local knowledge and skills in our communities. Improve engagement, satisfaction, inclusivity and the delivery of care.
- Equitable access: Increase equal access to quality health and wellbeing services and the best possible outcomes. Focus on education and awareness, proactive prevention and early detection, and social prescribing.
- Affordable services: Improve efficiency, sustainability and affordability by aligning investment and resources to prioritised community needs. Create a coordinated, connected system through pooled funding and co-commissioning.
- Quality outcomes: Bring health and wellbeing reform to whole communities. Deliver high quality outcomes, positive experiences and person-centred care informed by community-driven priorities and insights.

Key Performance Measures

WQPHN evaluates its performance based on employing a commissioning approach, monitoring performance, meeting and exceeding contractual deliverables, achieving targeted system change, and improving measures of stakeholder satisfaction and health outcomes that correspond with the Commonwealth's national performance measures and Quintuple Aim outcomes.

Information on Officers

NamePositionMs Elizabeth FraserBoard Chair

Elizabeth (Liz) has worked as a Social Worker in Health, Rehabilitation and Family and Community Services. She has held responsibility for commissioning and oversighting service outcomes to remote and regional communities, at both the State and Federal levels. Liz was the Queensland Commissioner for Children and Young People and Child Guardian and has held various senior executive government roles in the delivery of human and educational services. She has lived and worked in a diversity of communities in Australia and overseas and is a passionate advocate for the rights, safety, and wellbeing of all people. This includes shaping and assessing the benefits of government programs and leading organisational change. Liz is a current Board Member of the Central West Hospital and Health Service and Chairs the Board's Safety and Quality Committee.

DIRECTORS' REPORT FOR THE YEAR ENDED 30 JUNE 2025

Ms Catrina Felton-Busch Director (appointed 3 December 2024)

Catrina, an Aboriginal woman from Mornington Island with family ties to the Yankaal and Gangalida people, joins the Board with a deep commitment to improving the lives of Indigenous communities. As Director of the Murtupuni Centre for Rural & Remote Health, her extensive career includes roles in Indigenous health education and research. Catrina has been a driving force in cultural awareness training, Indigenous health policy implementation, and community engagement projects in North West Queensland. With academic credentials including a Master of Public Health and ongoing PhD studies, Catrina's expertise and cultural knowledge bring a vital perspective to WQPHN's mission of delivering equitable health outcomes across Western Queensland.

Professor Sabina Knight AM Director

Sabina is the Director of the James Cook University Central Queensland Centre for Rural and Remote Health. She is an experienced remote area nurse with lifetime roots in outback rural and remote areas. A veteran of remote health in NSW, Central Australia and the Northern Territory, Sabina has developed expertise in clinical practice, primary health care, public health, research and education. She has been a key figure in the development of rural and remote health workforce policy and health reform and has served on a wide range of Ministerial advisory bodies and was a Commissioner on the National Health and Hospital Reform Commission. In 2021, Sabina was awarded a Member of the Order of Australia for for her work in regional and remote healthcare, education and nursing.

Ms Sheryl Lawton Director

Sheryl has been the CEO of Charleville Western Areas Aboriginal Torres Strait Islander Health Services (CWAATSICH) for the past 20 years. Previous to her becoming CEO, she was employed in many positions of influence within Aboriginal affairs and Aboriginal Community Controlled Services, spanning Legal Services, Social Housing, Land Council and Childcare. Sheryl has been an avid representative of Aboriginal Affairs at Regional, State and National levels and through her ongoing dedication, commitment and hard work has seen CWAATSICH expand service delivery and become the lead service provider of comprehensive primary health care within the Far South West region.

Mr Dallas Leon Director (until 29 August 2024)

Dallas is a Kalkadoon and Waanyi man that has worked in the Aboriginal and Torres Strait Islander field for over 20 years. Dallas has held a number of roles across Government and non-Government, including working as an Aboriginal Health Worker, a senior health manager and working on various state based and national projects. Dallas previously held the role of CEO Gidgee Healing, the Aboriginal Community Controlled Health Service in Mount Isa, where he was instrumental in leading the reform of primary health care services for Aboriginal and Torres Strait Islander people across North West Queensland and the Lower Gulf. He is currently the Director of Commercial Operations at the Institute of Urban Indigenous Health (IUIH). In addition to his employed roles, Dallas has held a number of directorships and been an active member of relevant national committees.

Mr Rodney Margetts Director (appointed 14 October 2024)

Rod brings a wealth of experience as the Principal Consultant and co-founder of Oxford Associates. With an extensive background in financial management, business strategy, economic modelling and risk management, Rod has successfully completed over 60 assignments across health sectors in Queensland, New South Wales, Victoria, and New Zealand. Prior to forming Oxford Associates in 2015, Rod held executive level roles as Chief Financial Officer of the Sunshine Coast Hospital and Health Service, Chief Operating Officer with SkillsTech Australia, Executive Director Business Analysis at the Department of Employment and Training, and Director Business Improvement Department of Health. A Chartered Accountant, Rod's leadership and expertise in delivering strong financial outcomes and innovative solutions will be a significant asset to WQPHN. Rod is also a director of three other companies including an apprenticeship company and a registered training organisation.

DIRECTORS' REPORT FOR THE YEAR ENDED 30 JUNE 2025

Ms Karen Reithmuller Tully Director and Chair, People, Engagement and Culture Committee

Karen is a self employed advocacy, facilitation, leadership and governance expert. A long time resident of Charleville in South

West Queensland and has lived experience in understanding the wonderful liveability and unique lifestyle which rural

communities offer. She currently serves as Board Chair of the South West Hospital and Health Service and is Chair of the Rural

Financial Counselling Service Southern Queensland. She is also a Director with Southern Queensland landscapes as well as

serving as an Ambassador for the Queensland Plan Ambassador Council. Karen is also a member of Breast Cancer Association of

Queensland and the Queensland Rural, Remote and Regional Women's Network.

Dr Clare Walker Director

Clare is a medical practitioner practicing in Longreach providing a combination of private General Practice and Senior Medical Officer work at the local hospital. Having lived, raised a family and practiced in the Central West Region for over ten years, Clare has developed an in depth understanding of the community needs of rural and remote Queenslanders. Clare has a dual Fellowship in General Practice with both the Australian College of Rural and remote Medicine (FACCRM 2009) and the Royal Australian College of General Practitioners (FRACGP 2009) plus an Advanced Diploma of Obstetrics and qualifications in Anaesthesia through the Joint Consultative Committee. She is also a committee member of the Rural Doctors Association of Queensland.

Mr Jason Warnock Director (until 3 December 2024)

For more than 30 years, Jason worked in his private podiatry practice in Townsville which included regular visits to rural townships. He was the first podiatrist to deliver services to the Gulf of Carpentaria communities and for 20 years attended a monthly clinic on Palm Island. During 2003-2005 he developed the Indigenous Diabetic Foot Program, with resources from the Program still utilised to this day. Jason was the inaugural chair of the Podiatry Board of Australia from 2009-2012 and was awarded a Churchill fellowship in 2008 to investigate diabetic foot care services in the Indigenous communities of USA and Canada. In 2015, he moved to Brisbane to take on the role of Director of Podiatry at Metro North Hospital and Health Service. He is currently the Allied Health Educator for Community and Oral Health Services, Metro North Health.

Ms Rachel Portelli Company Secretary

Rachel is a graduate and Fellow of the Governance Institute of Australia and Fellow of the UK Institute of Chartered Secretaries and Administrators and a Graduate of the Australian Institute of Company Directors. For over 15 years she has specialised in providing corporate governance advice to not for profit entities.

Meetings

•	Directors' Board Meetings		Finance Audit & Risk Management Committee		People, Engagement and Culture Committee	
Director	Number eligible to attend	Number attended	Number eligible to attend	Number attended	Number eligible to attend	Number attended
Ms Elizabeth Fraser	8	8	1	1	N/A	N/A
Ms Catrina Felton-Busch	4	4	2	2	N/A	N/A
Professor Sabina Knight	8	8	N/A	N/A	2	2
Ms Sheryl Lawton	8	6	N/A	N/A	3	2
Mr Dallas Leon	2	2	N/A	N/A	0	0
Mr Rodney Margetts	5	4	5	5	N/A	N/A
Ms Karen Riethmuller Tully	8	7	3	2	3	3
Dr Clare Walker	8	5	N/A	N/A	N/A	N/A
Mr Jason Warnock	4	3	3	3	1	1

DIRECTORS' REPORT FOR THE YEAR ENDED 30 JUNE 2025

Member Contribution on Windup

The amount that each Member or past Member is liable to contribute on winding up is limited to \$10.

Total Contribution on Windup

The total amount that members of the Company are liable to contribute if the Company wound up is \$150 (2024: \$150).

Signed in accordance with a re	esolution of the Board of Directors.			
_	Signed by:		Signed by	
	Elizabeth Fraser		Rod Margetts	
Director	C93A99D23A01E3D3	Director	C43D4FCC173F8FD8	

Dated this 30th day of September 2025

STATEMENT OF COMPREHENSIVE INCOME FOR THE YEAR ENDED 30 JUNE 2025

	<u>Notes</u>	<u>2025</u>	<u>2024</u>
		\$	\$
Revenue and Other Income			
Contract revenue	2	35,490,348	30,464,540
Other income	2	660,566	492,611
Total Revenue and Other Income		36,150,914	30,957,151
Expenditure			
Employee benefits expense	3	(5,875,864)	(4,984,819)
Clinical service subcontractors	1(k)	(26,206,899)	(21,962,255)
Consulting expenses		(1,290,231)	(1,974,623)
Contractors		(72,067)	(26,275)
Lease expense	11	(247,333)	(247,444)
Finance Costs	11	(9,236)	(7,543)
Repairs, maintenance & vehicle running expenses		(13,054)	(16,569)
Electricity		(7,637)	(14,357)
Legal fees		(18,995)	(56,323)
Audit fees - audit services		(44,840)	(42,703)
Travel expenses		(560,950)	(365,854)
Other expenses	_	(1,760,359)	(1,258,386)
Total Expenditure	_	(36,107,465)	(30,957,151)
Net Surplus	-	43,449	-
Other Comprehensive Income		-	-
Total Comprehensive Income	=	43,449	<u>-</u>

STATEMENT OF FINANCIAL POSITION AS AT 30 JUNE 2025

	<u>Notes</u>	<u>2025</u>	<u>2024</u>
		\$	\$
CURRENT ASSETS			
Cash and Cash Equivalents	4	10,406,590	8,965,245
Trade and Other Receivables	5	126,023	35,295
Other Assets	6	771,079	410,853
TOTAL CURRENT ASSETS		11,303,692	9,411,393
NON-CURRENT ASSETS			
Right of Use Assets	11	251,637	227,533
TOTAL NON-CURRENT ASSETS		251,637	227,533
TOTAL ASSETS		11,555,329	9,638,926
CURRENT LIABILITIES			
Trade and Other Payables	8	4,821,779	3,104,375
Accrued Employee Benefits	9	357,412	297,212
Lease Liabilities	11	200,194	199,166
Unearned Revenue	12	4,361,575	4,324,328
TOTAL CURRENT LIABILITIES		9,740,960	7,925,081
NON-CURRENT LIABILITIES			
Accrued Employee Benefits	9	96,712	68,473
Lease Liabilities	11	58,898	30,062
TOTAL NON-CURRENT LIABILITIES		155,610	98,535
TOTAL LIABILITIES		9,896,570	8,023,616
NET ASSETS		1,658,759	1,615,310
EQUITY			
Retained Surplus		1,658,759	1,615,310
TOTAL EQUITY		1,658,759	1,615,310

STATEMENT OF CHANGES IN EQUITY FOR THE YEAR ENDED 30 JUNE 2025

	Retained Surplus
	\$
Balance at 1 July 2024	1,615,310
Total Comprehensive Income	43,449
Balance at 30 June 2025	1,658,759
balance at 50 June 2025	
	Retained Surplus
	\$
Balance at 1 July 2023	1,615,310
Total Comprehensive Income	
Total comprehensive meeting	-
Balance at 30 June 2024	1,615,310

STATEMENT OF CASH FLOWS FOR THE YEAR ENDED 30 JUNE 2025

	<u>Notes</u>	<u>2025</u> \$	<u>2024</u> \$
Cash Flows from Operating Activities:			
Receipts from Funding Bodies, Customers		39,198,784	34,463,829
Payments to Suppliers		(32,557,973)	(26,904,636)
Payments to Employees		(5,632,022)	(4,867,950)
Interest Received		660,566	406,901
Interest Payments - Lease		(9,236)	(7,544)
Total Cash from Operating Activities	10	1,660,119	3,090,600
Cash Flows from Investing Activities: Payments for Asset Purchases Proceeds from Sale of Assets Total Cash from Investing Activities Cash Flows from Financing Activities: Payments of Lease Liabilities Total Cash from Financing Activities		(218,774) (218,774)	(163,821) (163,821)
Net Cash Increase / (Decrease) in Cash and Cash Equivalents		1,441,345	2,926,779
The same same of the same and same equivalents		1,771,373	2,320,773
Cash and Cash Equivalents at beginning of period		8,965,245	6,038,466
Cash and Cash Equivalents at end of period	4	10,406,590	8,965,245



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Independent Auditor's Report

To the Members of Western Queensland Primary Care Collaborative Limited

Report on the audit of the financial report

Opinion

We have audited the financial report of Western Queensland Primary Care Collaborative Limited (the "Company"), which comprises the statement of financial position as at 30 June 2025, and the statement of comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, and notes to the financial statements, including material accounting policy information and the Directors' declaration.

In our opinion, the financial report of Western Queensland Primary Care Collaborative Limited has been prepared in accordance with Division 60 of the *Australian Charities and Not-for-profits Commission Act* 2012, including:

- a giving a true and fair view of the Company's financial position as at 30 June 2025 and of its financial performance for the year then ended; and
- b complying with Australian Accounting Standards AASB 1060 General Purpose Financial Statements -Simplified Disclosures for For-Profit and Not-for-Profit Tier 2 Entities and Division 60 of the Australian Charities and Not-for-profits Commission Regulations 2022.

Basis for opinion

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Report* section of our report. We are independent of the Company in accordance with the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 *Code of Ethics for Professional Accountants (including Independence Standards)* (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

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

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Other information

The Directors are responsible for the other information. The other information comprises the information included in the Company's annual report for the year ended 30 June 2025, but does not include the financial report and our auditor's report thereon.

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

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

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

Responsibilities of the Directors for the financial report

The Directors of the Company are responsible for the preparation and fair presentation of the financial report in accordance with Australian Accounting Standards – AASB 1060 General Purpose Financial Statements - Simplified Disclosures for For-Profit and Not-for-Profit Tier 2 Entities and the ACNC Act, and for such internal control as the Directors determine is necessary to enable the preparation of the financial report that is free from material misstatement, whether due to fraud or error.

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

The Directors are responsible for overseeing the Company's financial reporting process.

Auditor's responsibilities for the audit of the financial report

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

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

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

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the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the Company to cease to continue as a going concern.

Evaluate the overall presentation, structure and content of the financial report, including the disclosures, and
whether the financial report represents the underlying transactions and events in a manner that achieves fair
presentation.

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

Grant Thorton

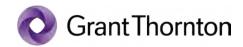
Grant Thornton Audit Pty Ltd Chartered Accountants

M S Bell

Partner - Audit & Assurance

Brisbane, 30 September 2025

Grant Thornton Audit Pty Ltd



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Auditor's Independence Declaration

To the Directors of Western Queensland Primary Care Collaborative Limited

In accordance with the requirements of section 60-40 of the Australian Charities and Not-for-profits Commission Act 2012, as lead auditor for the audit of Western Queensland Primary Care Collaborative Limited for the year ended 30 June 2025, I declare that, to the best of my knowledge and belief, there have been no contraventions of any applicable code of professional conduct in relation to the audit.

Grant Monton

Grant Thornton Audit Pty Ltd Chartered Accountants

M S Bell

Partner - Audit & Assurance

Brisbane, 30 September 2025

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As we approach ten years of service, we remain focused on what matters most: supporting communities, strengthening systems and improving health outcomes across Western Queensland.

This year's report reflects steady progress, guided by a shared understanding of our joint regional priorities. We move forward with a continued commitment to working together for wellbeing, and to the long term partnerships needed to drive meaningful change.



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While the Australian Government Department of Health, Disability and Ageing has contributed to the funding of the PHN, the information in this document does not necessarily reflect the views of the Australian Government, and is not advice that is provided or information that is endorsed, by the Australian Government. The Australian Government is not responsible in negligence or otherwise for any injury, loss or damage however arising from the use of or the reliance on the information provided in this document. Copyright protects this material.

Western Queensland PHN acknowledges the traditional owners of the country on which we work and live and recognises their continuing connection to land, waters and community. We pay our respect to them and their cultures and to elders past and present.