

Comments from clients-

Friendly

Great staff

Calm and clean environment

Empathy

Brilliant service

Respectful

Very professional

Listen to you

Communication excellent

**Family Planning Welfare Association of the Northern
Territory Incorporated Annual Report**

2018-2019

***Providing quality service that promotes reproductive and sexual
health.***

FPWANT

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Acknowledgements

FPWANT wishes to acknowledge the Larrakia people as the Traditional Owners of the Darwin, Palmerston region and pay our respects to elders past and present.

We would also like to gratefully acknowledge its members as well as thank the following organisations and individuals for their continued support and financial assistance during

2018–2019: Northern Territory Government -Departments of Health, Business, Education and Gaming and Licensing, Ansell International, NT Primary Health Network, Territory Technology Solutions. Special mention to a small number of 'friends of FPNT' who gave generous donations this year.



Photo: Coconut Grove Head Quarters

Palmerston clinic follow the PINK dots

Family Planning Welfare Association of the NT Inc. Annual Report 2018– 2019 was presented at the AGM held on October 28th 2019 in Darwin on behalf of its members, staff and board of management.

Cover photo: Comments from clients who completed the annual client survey in August 2018

Family Planning Welfare NT Overview

Family Planning Welfare Association NT is a non-government organisation (NGO) responsible to a governing board of volunteers.

In 1973 the Family Planning Association of the Northern Territory Inc. (FPANT) delivered family planning services through established NGOs. Because of operational and administration advantages, FPANT, which later changed its name to Family Planning Welfare Association of the Northern Territory Incorporation (FPWANT), commenced the devolution of its services to FPWNT. This process was completed in September 1997.

Each Australian state and territory has a lead family planning organisation and together they constitute the primary membership of Family Planning Alliance Australia (FPAA). FPAA is the nation's peak body in reproductive and sexual health. It promotes advances in public health through policy, insight and advocacy. FPAA does not provide clinical or education services. FPAA is a member of the International Planned Parenthood Federation (IPPF). IPPF, FPAA and FPWANT are guided by the outcomes of the 1994 UN Population Fund (UNFPA) International Conference on Population

and Development (ICPD). FPWANT is a member of the Asia Pacific Alliance.

On 1st January 2016, the 17 Sustainable Development Goals (SDGs) of the 2013 Agenda for Sustainable Development – adopted by world leaders in September 2015 at an historic United Nations summit – officially came into force. Over the next fifteen years, with these Goals that universally apply to all, countries will mobilize efforts to end all forms of poverty, fight inequalities and tackle climate change, while ensuring that no one is left behind. Countries have the primary responsibility for follow-up and review of the progress made in implementing the Goals, which will require quality, accessible and timely data collection.

The three Goals that relate to Family Planning Welfare Association NT:



Goal 3: Ensure healthy lives and promote well-being for all at all ages.

3.4 By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being.

3.7 By 2030, ensure universal access to sexual and reproductive health care services, including for family planning, information and education and the integration of reproductive health into national strategies and programmes.

3.8 Achieve universal health coverage, including financial risk protection, access to quality essential health care services and access to safe effective quality and affordable essential medicines and vaccines for all.

Goal 4: Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all.

4.5 By 2030, eliminate gender disparities in education and ensure equal access to all levels of education and vocational training for the vulnerable, including persons with disabilities, indigenous peoples and children in vulnerable situations.

Goal 5: Achieve gender equality and empower all women and girls.

5.1 End all forms of discrimination against all women and girls everywhere.

5.2 Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation.

5.3 Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation.

5.6 Ensure universal access to sexual and reproductive health rights as agreed in accordance with the Programme of Action of the

International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences.

Management

FPWANT is governed by a voluntary Board of Management (BoM) who is elected by general members at an Annual General Meeting. The BoM meets regularly to determine FPWANT policy, and is responsible for the governance of FPWANT. All operational matters are the responsibility of the Chief Executive Officer (CEO). The Public Officer for the Association is appointed by the BoM.

Funding

FPWANT is partially funded by the NT Department of Health and the Commonwealth Department of Human Services. FPWANT generates its own income from annual memberships, training fees, donations and project grants.

Photo Below: Anne supporting a Christmas cake raffle 2018



Photo below: Dripstone High School FPNT display



Photo below: Darwin High School Expo May 2019



Board of Management 2018 – 2019

DONE Board Attendance List:

| Board member | 7 th Aug | 28 th September | 29 th October + AGM | 10 th December | 21 st January | 11 th March | 7 th May | 12 th June |
|-----------------------------|------------------------------------------|-----------------------------------------|--------------------------------|---------------------------|--------------------------|------------------------|---------------------|-----------------------|
| Dr Suzanne Belton | yes | yes | yes | yes | yes | X | yes | yes |
| Anne Davis | X | yes | yes | yes | X | yes | yes | yes |
| Shelly Holland | yes | Resigned 3 rd September 2018 | | | | | | |
| Amy Williams | yes | yes | yes | yes | yes | X | yes | yes |
| Kevin Wrigley | yes | yes | yes | X | yes | yes | X | yes |
| Julie Ngahere | Appointed 10 th December 2018 | | | | X | yes | yes | X |
| Crystal Keitaanpaa | Appointed 10 th December 2018 | | | | yes | X | X | yes |
| Rosalind Clarke | Appointed 11 th March 2019 | | | | | yes | yes | X |
| Dr Shawgat Kutubi | Appointed 12 th June 2019 | | | | | | | X |
| Robyn Wardle Public Officer | yes | yes | yes | yes | yes | yes | yes | yes |

Associate Professor Suzanne Belton is a medical anthropologist at the Menzies School of Health Research in Darwin. This is her sixth report as Chairperson of the Board of Management for Family Planning Welfare Association NT. Her research interests include maternal health outcomes, reproductive health rights and cross-cultural health. She received her PhD in 2005 from the University of Melbourne and has worked in China, Thailand, Indonesia, Timor-Leste and remote Australia. She advocates for better sexual and reproductive health services in Australia and was presented with the Advocacy and Leadership award from the Public Health Association of Australia in September 2019.

Anne Davis is a registered nurse, a midwife who worked in a variety of medical, surgical and midwifery settings until arriving in the Territory in 1998. Since then she has worked in remote communities in the areas of health service management and sexual reproductive health. She has undertaken two major health projects: the Donovanosis Eradication Project and the setting up of the Darwin-based Midwifery Group Practice. Anne is currently the sexual health coordinator for the Tiwi Islands.

Amy Williams has a legal background, having worked for various Aboriginal legal aid organisations in Katherine and Darwin, with a focus on women's rights in the context of family violence and child protection. Amy now works for the Office of the Children's Commissioner, managing the Strategy and Rights section of the office.

Kevin Wrigley A degree-educated business professional with 10+ years' experience in strategic marketing, product management and marketing communications within the healthcare industry with a track record of working across hierarchies and cultures to identify customer / market needs and develop suitable product and service solutions within the biotech, pharmaceutical and health consumable industry.

Crystal Keitaanpaa is a registered sex therapist and counsellor. She currently manages a support service that assists people who have been affected by institutional child sexual abuse and out-of-home care. She has clinical experience in working therapeutically with culturally diverse populations including children, adults and families. Crystal is passionate about sexual health and the expansion of LGBTIQ and gender diverse inclusion in health care settings. She has presented at conferences on the lack of health services for Sistagirls in remote Northern communities and managing sexual difficulties. Crystal holds a Bachelor of Behavioural Science, Masters of Sexology and a Masters in Counselling. She conducted research around the issue of sexual health and rehabilitation for men post prostatectomy.

Rosalind Clarke is the programs and community liaison manager of the Multicultural Council of the Northern Territory. A service that provides advocacy and direct services to individual families and communities from culturally and linguistically diverse backgrounds in the NT. Rosalind joined the FPWANT board in January 2019 and unfortunately had to resign in September 2019 due to work and study commitments.

Shawgat Kutubi joined the Asia Pacific College of Business and Law at Charles Darwin University as a Lecturer of Accounting & Finance in 2017 after completing her PhD in Accounting at La Trobe University, Australia. Her dissertation, motivated by the governance and financial reporting of banks, examines the board of director's quality and loan loss accounting by banks in emerging markets. She holds a Master's Degree in Finance and Development from the University London (SOAS), an MBA in Banking & Finance and a Bachelor's (Hons) Degree in Finance from the University of Chittagong, Bangladesh. Her research interest lies in the area of corporate governance, financial reporting, and financial institutions regulation. Shawgat finds interest in supporting causes relating to women, children and disadvantaged community.

Jules Ngahere- Tena koutou katoa, (greetings to you all). I am wahine Maori from Aotearoa/New Zealand. I am relatively new to the Territory, having been here since 2012. I have a Social Work qualification and have worked across the Department of corrections in Aotearoa and the Christchurch men's prison. I continued to work in the Corrections environment when I moved to Australia, including working for Corrective Services in WA and working for an NGO as a case management coordinator for domestic and family violence in Kalgoorlie. Subsequent to WA, I won a role working for NT Correctional Services in the Barkly, which was establishing the Reintegration program at the Barkly Work camp. I remained in that role for 18 months before relocating to Darwin to work as a Project Officer supporting the commissioning of the Darwin Correctional Precinct at Holtze. For the last three years I have worked for the Department of Health, in the Women's Health policy area where we are currently progressing work related to Domestic and Family Violence, Sexual Violence, Sexual and Reproductive Health and LGBTQI Health.

Our Workforce is small considering the NT has the highest rates of STI's and unplanned pregnancies in Australia.

Part-Time: 16 % Casual: 68 %
Full time: 16 %

Employment service: <5 years 83%,
>5 years 6%, >25 years 11%

Gender: Male 6 % Female 94 %

President's Report

The Board has been stable and well-coordinated this year. The Board supported staff during Service Agreement negotiations with the Top End Health Service. We are pleased that Top End Health Service – Primary Care continues to partner and collaborate with Family Planning Welfare Association NT to deliver sexual and reproductive health services in the Northern Territory. I know that staff work hard to deliver education and clinical services to the public and their colleagues.



I was extremely happy to be presented with the Advocacy and Leadership award from the Public Health Association of Australia this year. This is national recognition for those Territorians who generated community action for better services for women regarding abortion services. We have been acknowledged for our achievements. This picture is of the very lovely award.

We advocated strongly for quality services and the NT Government data this year shows that there has been a huge uptake in early medical abortions. This has not increased abortions, simply switched women from using the expensive hospital system to the much cheaper primary health care system. About three quarters of all abortions are now done before 9 weeks gestation and in a GP like setting with no referral needed. This has also taken the pressure off the hospital theatres hopefully freeing them up for other important work while saving money for the government.

We were pleased to see the decriminalisation of abortion in Queensland and New South Wales. We note also the High Court of Australia held the notion that safe zones around abortion health services are important. These types of laws keep staff and clients safe to access health care without fear of harassment and intimidation. These are all great wins for women's health.

A handwritten signature in black ink, appearing to read 'Suzanne Belton'.

Dr Suzanne Belton *President*

Treasurer Report

FPWANT is pleased to present the audited financial statements for the year end June 30th, 2019 as prepared by Adam Dohnt (FCA) TDH chartered accountants. FPWANT generated \$1,426,015 revenue which is similar to the funding revenue in the previous year. However, by the end of December 2018 the organisation found with a deficit of \$61,000. After working within a very tight budget over the next six months, FPWANT had improved the predicted deficit. The deficit for 2018 to 2019 for FPWANT ended with \$92,000.

The CEO confirms that the deficit in revenue was generated mainly due to Medicare claims not covering the organisations clinician salaries and the continued rate of clients who “did not attend” (DNA) a booked appointment. FPWANT found that the DNA rate was approximately 11% last year. After the implementation of new clinic improvements by the staff, the rate of DNA has dropped to 9% by June 30th, 2019. Currently, FPWANT is continuing to monitor progress and is striving for a 6% DNA rate by the end of 2019. Staff are to be congratulated for maintaining services that continue to operate within a tight budget.

FPWANT has negotiated a five year funding grant with the NTG Top End Health Service commencing July 1st 2019 to June 30th 2024 and the organisation will continue to share co-location with BreastScreen NT in the Palmerston Precinct to deliver clinical services twice a week to the Palmerston region community.

I am pleased to provide this report and confident that the organisation can carry this second-year financial loss. However, FPWANT need to ensure that the funding position improves over the next twelve months. The possibility of introducing clinical fee for service must be investigated as a potential source of income.

Shawgat Kutubi Treasurer

CEO Report



Welcome to Family Planning Welfare Association of the NT (FPWANT) Incorporated 2019 annual report, highlighting a year in delivering quality clinical and educational services within a tight budget. A number of outside influences saw the organisation end the year in a financial deficit. This news was very distressing especially when this is out of our control. The loss of Medicare revenue when clients do not attend booked appointments, staff salary increases beyond indexation rates and higher costs of clinical consumables. There will be a time in our future when clinical services merge into a fee for service.

Our three year core funding service agreement with the Northern Territory Government Department of Health expired June 30th 2019 and negotiations for a continued service agreement commenced early in the year. Unfortunately, our year ended with negotiations continuing. The Board of Management and all staff found this delay very distressing and disruptive. I would like to especially thank our staff who worked in a troubling environment under difficult times. Move forward into September 2019 and we have now signed a five year funding service agreement with Top End Health Services.

We were fortunate in gaining a number of minor NTG community benefit grants that allowed us to purchase equipment, offer cyber security training to our employee's and improve our phone system.

FPWANT continued to offer clinical services in both Darwin and Palmerston whilst educational services were provided across the NT. I was fortunate to support our education team this year delivering education and clinical assessment.

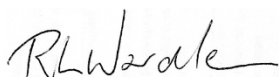
In late 2018 we introduced a new clinical nurse position called pregnancy option nurse (PON) delivering a safe and supportive pregnancy service. During the year our clinics offered 19,668 services to people in our community. We pride ourselves in offering a quality professional service that provides clients plenty of consultation time.

Continuous quality improvements have always been a focus for our organisation and we spend valuable time in reviewing and updating our service and systems. Each year we find another way of improving our performance.

FPWANT remains a primary member of Family Planning Alliance Australia (FPAA) and we are proud to contribute our time and expertise to current national projects and advocacy campaigns. Staff value the chance to contribute to reproductive sexual health national agenda's and are determined that the voices of Territories are being heard.

Looking back over the past twelve months you realize the underestimated volume of work everyone has achieved and the positive feedback received from our clientele and stakeholders. Thank you again to our staff who have managed to maintain a work place that is of quality, high standard and very much respected.

In conclusion, a special thank you to the board of management of family planning for another supportive year.



Robyn Wardle *Chief Executive Officer*

Photo: Family Planning Alliance Australia (FPAA) Directors in Hobart October 2018



Constitution

CONSTITUTION OBJECTS OF THE ASSOCIATION

- a) To assist and relieve individuals distressed by experiences associated with human relationships and human sexuality.
- b) To promote sexual health.
- c) To improve the quality of human relationships.
- d) To promote individual choice and personal responsibility in human sexuality.
- e) To develop a community awareness of the services provided by The Family Planning Welfare Association of Northern Territory Inc.

f) To attain the preceding objects by actions not limited to:

- Provision of centres to which professionals community agencies and members of the public may refer in matters of human relationships and human sexuality.
- Provision of quality medical, clinical and advisory services to individuals and communities in matters relating to promotion, attainment and maintenance of health in areas of relationships, sexuality, fertility and reproduction and in alleviation of distress or disease adversely impacting on these areas.
- Provision of specialist training of health and other professionals in matters relating to promotion, attainment and maintenance of health in areas of relationships, sexuality, fertility and reproduction and in alleviation of distress or disease adversely impacting on these areas.
- Provision of referrals and advice to distressed individuals of alternative services not provided by the Association but which are provided by other appropriate government or non-government agencies or bodies.
- Provision of training programmes to meet in-service needs and maintain professional standards for the Association.
- Provision of educational programs and training programs intended to advance the health, welfare and well-being of individuals and groups in the Northern Territory community.
- Promotion of such legislative, social and administrative reforms as may be relevant to the objects of the Association. _____

Workforce Development & Community Education Report

I would like to start by thanking the education team: Doctor Paul Rivalland (Medical Educator) Sarah Collette (Education Officer) and Belinda Collins (Administration officer) who have worked enthusiastically to raise the profile of the organization and to deliver quality health promotion and education across our community.

As always the additional support from both clinical and reception staff continues behind the scenes and I would therefore also like to make special mention of Kerry Reader, Peta Jane Goodrem and Kirsten Thompson, all of whom deserve a noted mention of thanks.

Recruitment to the position of Education Officer was finally completed in August 2018 with the commencement of Sarah Collette (RN). Completing both the Well Women's Health Unit (HLTAHW027) and the Reproductive and Sexual Health (R&SH) Course for Nurses in quick succession, Sarah dived into planning for the Reproductive and Sexual Health Course for Doctors and delivery of community based and schools education sessions to both Middle and Senior Schools within the Darwin and Palmerston urban areas.

With Sarah vacating her position in January, the education unit has, with reduced workforce capacity, continued to offer quality community and professional education services for the remainder of the year.

Registered training Organisation Status

FPWANT is the lead training organisation in reproductive and sexual health in the Northern Territory. We hold Registered Training Organisation (RTO) accreditation, and continually work towards compliance with accreditation standards.

Our education partnerships across the Northern Territory (NT) are invaluable and ensure ongoing service delivery. APNA Endorsement: Australian Primary Health Care Nurses Association for the delivery of the unit HLTAHW027 remains current until June 2020. At the completion of this educational activity, eligible participants can claim up to 40 CPD hours.

Continued engagement with our partner organisations in industry consultation guides course content and delivery methods in order to meet both RTO compliance requirements and the needs of priority populations within the NT.

RTO compliance requires each year a quality indicator annual summary report to be sent to the Australian Skills Quality Authority (ASQA) who oversees all compliance of training organisations. This report was completed in March.

Accredited Professional Training

The two units on our scope of practice, HLTAHW026 *Provide information and strategies in sexual health for men* and HLTAHW027 *Provide information and strategies in sexual health for women* are both part of the Aboriginal Health Workers National health training package modules.

Unit HLTAHW027 *Provide information and strategies in sexual health for women* was delivered this year with one course each in Alice Springs and Nhulunbuy and two in Darwin. All our training is supported by Aboriginal health worker cultural advisors. We had no student interest in the unit HLTAHW026 and therefore no delivery this year.

Table 1: Course location and registration numbers:

| UNIT LOCATION & DATE | REGISTERED NURSES/ MIDWIVES Department of Health employed | REGISTERED NURSES/ MIDWIVES Non Department of Health employed | ABORIGINAL HEALTH PRACTITIONERS | TOTAL |
|----------------------|-----------------------------------------------------------------------|---------------------------------------------------------------------------|---------------------------------------|-------|
| NHULUNBUY October | 9 | 3 | 0 | 12 |
| DARWIN November | 2 | 5 | 1 | 7 |
| DARWIN March | 7 | 7 | 1 | 15 |
| ALICE SPRINGS April | 7 | 2 | 1 | 10 |

Table 2: Geographical catchment of registrants:

| COURSE ATTENDEES GEOGRAPHICAL CATCHMENT | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|
| NORTHERN TERRITORY | OTHER |
| Alyangula, Mataranka & Jilkminggan, Kalkarindji and Pigeon clinic, Marngarr, Miwatj, Royal Darwin Hospital, Wadeye, Laynhapuy, Yirrakala, Yuendumu, Ampilatwatza, Canteen Creek, Alice Springs, Darwin, Congress, Nhulunbuy. | Palm Island (Queensland) x 2 |

Photo below: WWHU NHULUNBUY October 2018



Certificate in Reproductive and Sexual Health for Doctors and Nurses

The Family Planning Alliance Australia (FPAA) Certificate in Reproductive and Sexual Health for Doctors was planned for delivery in Darwin during November 2018.

As a nationally recognized and RACGP/RANZCOG endorsed curriculum delivered in-person over five days, attendance at the course requires availability of leave from the workplace something that has become increasingly difficult for potential participants. With this concern again impacting registration numbers, the decision was made after due consideration and consultation to defer the course to October 2019.

In future proofing local delivery of this qualification moving forward, we will be looking at how to better structure this course in a way that is favourably aligned with the workplace commitments of GPs in the Northern Territory.

In the interim, the option exists for doctors interested in pursuing the qualification to attend the theory component of the course through Family Planning Organisations elsewhere in Australia and to subsequently complete the clinical component of the qualification at Family Planning NT. It is anticipated that this option will offer an alternative for anyone wishing to complete the qualification prior to the next course in Darwin. *The Certificate in Reproductive and Sexual Health for Nurses* was delivered in both September 2018 and June 2019.

Table 3: Course dates and registrant numbers:

| COURSE DATE | REGISTRANTS |
|----------------|-------------|
| September 2018 | 10 |
| June 2019 | 11 |

Table 4: Geographical catchment of registrants:

| COURSE ATTENDEES GEOGRAPHICAL CATCHMENT | |
|--------------------------------------------------------------------------------------|--------------------------------------------------------|
| Northern Territory | Other |
| Darwin, Katherine Angurugu, Maningrida, Groote Eylandt, Gapuwiyak, Nhulunbuy, Jabiru | Cairns (Queensland) Morningside Island (Queensland) |

Photo below: R&SH Course for Nurses Darwin June 2019



NT Health Education Workforce

Six Progesterone Implant workshops (Implanon NXT) were delivered to doctors and nurses in Darwin, Alice Springs and Nhulunbuy. Three sessions were delivered to nurses (two in Darwin and one in Nhulunbuy) and three sessions to doctors (two in Darwin and one each in Alice Springs and Nhulunbuy).

Demand remains high for training, especially from registered nurses working for the Northern Territory Government. Each two hour workshop provides theory and clinical simulated practice. FPWANT medical director has been working with the Department of Health midwifery educators, to achieve training Implanon NXT modules for registered nurses/midwives on the NTGs My learning online education site. The 5 modules prepared are expected to be uploaded in 2019. Guidelines and standards are also being developed and supported by FPWANT.

An Update on early medical termination of pregnancy was presented to the Royal Darwin Hospital O&G Department which was attended by 18 Doctors plus 2 medical students. Charles Darwin University Health Studies Rural and Remote students, also requested an update on unplanned pregnancy. This session was delivered in August and covered abortion provision and legislation in the NT.

Charles Darwin University midwifery students (across Australia campuses) were provided with 3 x 2 hour sessions on communication, consent, values, sexual history taking skills. Approximately 36 students attended the session and 40 external students connected via webinar. A further 200 students will be required to view the sessions as part of their university unit requirements.

Values clarification and sexual history taking skills sessions were delivered to the 3rd year Midwifery students at Charles Darwin University (CDU) in March 2019. This was delivered over three consecutive weeks to groups of mixed gender dual registered and direct entry midwifery students.

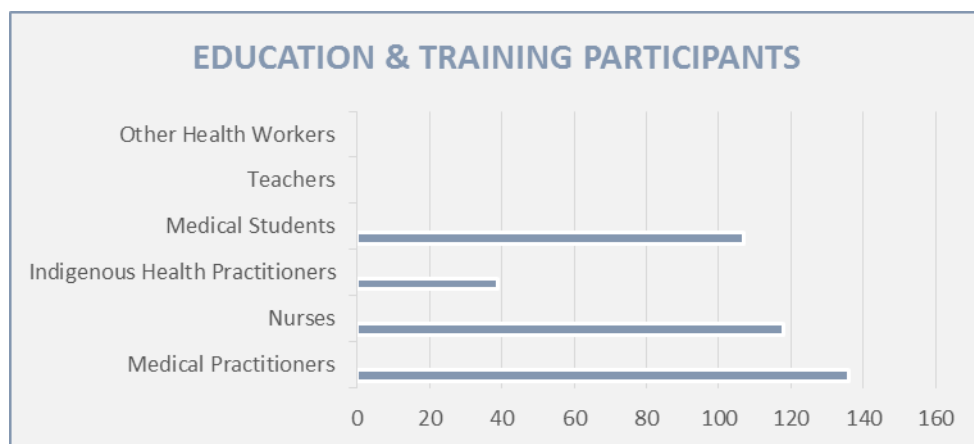
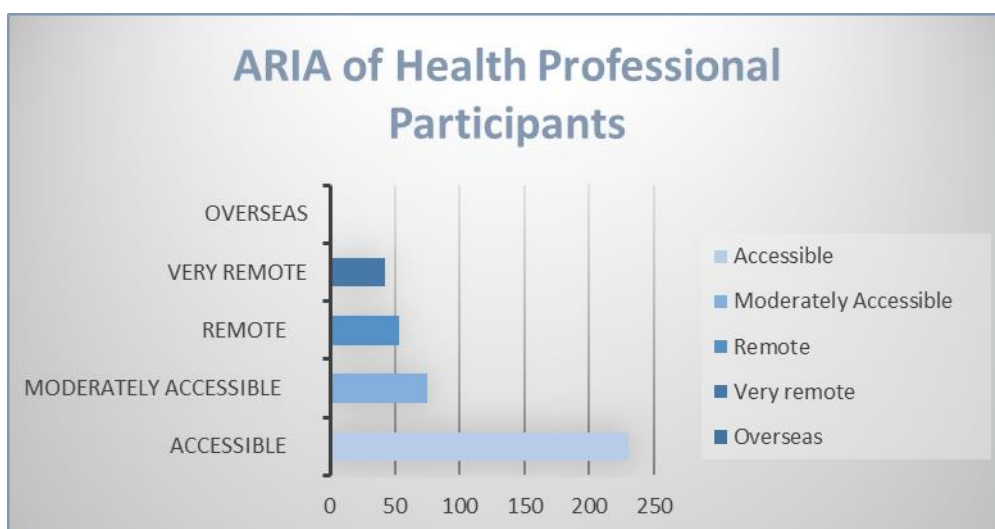


Table 5: Professional development workshops delivered in Darwin, Alice Springs and Nhulunbuy

| LOCATION | TOPIC | TARGET GROUP |
|------------------------------------------------------|--------------------------------------------------------|--------------------------------------|
| Sexual health & Blood Born Virus Unit | Sexual Health Update | Aboriginal health practitioners x 38 |
| Charles Darwin University (face to face and webinar) | FPWNT services and advocacy update | Public health nursing students |
| Flinders University | Adolescent sexual health | Year 2 medical students x 32 |
| Family Planning NT (Darwin clinic) | IUCD clinical insertion training | Local GPs x2 |
| NTGPE Registrar workshop (Alice Springs) | Women's health update progesterone implant training | GP registrars |
| AMSANT (webinar) | New guidelines for cervical screening | AMSANT GPs and nurses |



FPWANT Workforce

All employees of Family Planning NT are encouraged to actively participate in meetings, committees and National agendas in regard to reproductive and sexual health. Family Planning NT employees undertook a number of professional development/training opportunities this year and were actively supported to attend the following:

Table 6: Professional development undertaken by FPWANT staff

| WORKSHOPS |
|---------------------------------------------------------------------------------|
| My Health Record workshops and updates |
| Aboriginal & Torres Strait Islander sexual health refresher workshop (Darwin) |
| Refining Grant writing skills workshop |
| One registered nurse educator upskilled and attended all FPNT training courses. |
| 2018 VET conference in September to update AVETMISS compliance |
| MEETINGS |
| NTG Sexual Health Advisory Group Meetings |
| NTG Women Policy Unit and the Chief Health Officer meeting |
| ASHHNA monthly teleconferences 2019 Conference convener/vice chair work |
| NTCOSS and Ruby Gaea Sexual Assault Services Board meetings |
| A public conversation about altruistic surrogacy organized by NTG. |
| National Family Planning Australia Alliance Director meetings |
| FGM/C National network meeting in Melbourne. |
| National Family Planning Alliance Australia Director meetings |
| A public conversation about altruistic surrogacy organized by NTG. |
| Work Health and Safety Committee meetings |

Community Health Promotion

This year a number of employees assisted in providing health promotion and education to our community. The education team would like to thank everyone for their support.

Though not able to assist in all our requests due to limited human resources this year, 2638 community members attended 24 health promotion activities and some 400 health professionals attended a variety of reproductive sexual health courses and workshops across the NT.

This number, slightly down on the previous financial year is a direct reflection of reduced workforce capacity during the months that the education officer position remained vacant.

Sexual health and relationship education was delivered to a number of middle and senior schools within the Darwin and Palmerston region.

FPWANT participated in a number of health expos including Dripstone Middle School, Palmerston College, Darwin High School, Darwin Defence force expo, Charles Darwin University LGBTQI and Coolalinga Central Women's Health week. We participated in school health forums alongside other social and healthcare providers facilitating a collaborative perspective in addressing questions from the students. We found this learning environment more engaging than attending to weekly education sessions a sentiment shared by the school and shared by others who wish to replicate it within their own education settings.

We continued to supply a number of contraception display boards to schools and community health centres and have updated our contraceptive flip charts in partnership with TRUE Queensland.

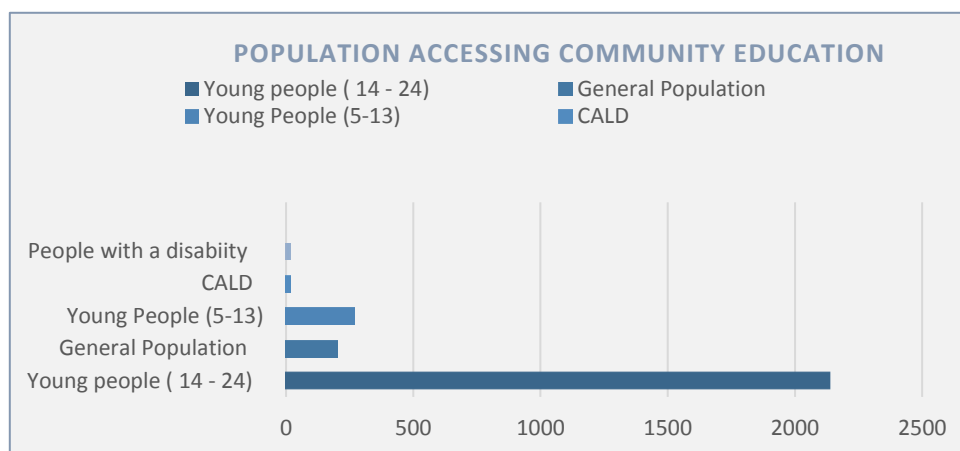


Photo below: Community Event Defence expo February 2019



In conclusion, a huge thank you to all our colleagues, networkers and partners for their support and assistance over the year. FPWANT would especially like to mention the Department of Health for their continued support. Looking forward to another wonderful and challenging year.

Maari Gray *Education Manager*



Photo: Maari celebrating the end of a training week in Nhulunbuy

Photo Below: WWHU Alice Springs April 2019



Photo Below: RSH Course Darwin November 2018



September 2018 Portugal**The International Campaign for Women's Right to Save Abortion Developing an Advocacy Agenda for Abortion in 21st Century and Making Change Happen**

Family Planning Welfare NT Board Chair Associate Professor Suzanne Belton was invited to attend this forum in Portugal. Delegates from regions of the world discussed legal and policy restrictions which limit women's access. Speakers presented from all over the world and many faced very difficult restrictive environments. Australia seemed most similar to Canada.

The right to information as well as health services for all forms of abortion and particularly medical abortion were seen to be very important. An emerging discourse is 'self-managed abortion' meaning a de-medicalized method where doctors play a limited role, if at all. Women find information via the internet and underground networks.

A number of countries where abortion is criminalized or so highly restricted that health providers cannot or will not prescribe, women are taking abortion pills and not waiting for law to change. Time was spent on legal aspects of sexual and reproductive rights..

International Safe Abortion Day occurs on 28th September each year and is an established call to solidarity. This action network began in 2012 and has over 1200 members who are NGO's health care professionals, policymakers, academics, human rights, legal, technical, scientific and other experts. 117 countries are represented in the network.

In Australia we can support this global movement as an act of solidarity but also because Australia has not yet attained safe abortion due to its remaining in the criminal codes of some States.



The Administrator's Medals in Primary Health Care November 2018 Her Honor the Honorable Vicki O'Halloran AM, Administrator of the Northern Territory congratulating FPWANT CEO Robyn Wardle on FPNT becoming a finalist in Whole of Practice nomination. Congratulations everyone.

Clinic Services Report

Darwin and Palmerston clinics were extremely busy this year. We managed to support 5,054 clients requesting 19,668 clinical services. Due to the demand on our clinical service, especially for pregnancy support, we reviewed clinical nurse positions and offered more clinics. A total of 927 general clinics were held during this past financial year, with 236 at our Palmerston clinic. A 10% increase from our previous year.

This was our second year providing early medical termination of pregnancy healthcare. In October, we introduced a trial new position called Pregnancy Option Nurse, PON. This position attends to all phone requests, provides information and stream line appointments for women requesting unplanned pregnancy discussion or abortion and follow up care, an extremely important aspect of healthcare. Providing information to clients and other medical professionals over the phone is a huge component of this position. On average, our nurse will answer over 70 phone calls a week.

The introduction of change to the clinical nurse position also meant a minor change to our Client Information Support Service (CISS). We employed a casual registered nurse/midwife trained in reproductive and sexual health to undertake this nine hour a week role. This position supports clients by providing information and investigation pathology or imaging results. The service continues to support GPs requiring information on contraception products. The volume of calls each week is high. Please note this is on top of the pregnancy option nurse weekly calls that are directed to a second phone line.

We continued to provide input into updating the NT termination of pregnancy guidelines for GP's and training programs for nurses in contraception implant insertion and removal.

Our clinic data showed this year the main service provided to our clients was contraception followed by pregnancy support and gynaecology services. 22% of all clients were under the age of 25 years and 7% of our clients identified as Aboriginal.

We continue to provide clinical training and upskilling to GPs, Registered Nurses and Aboriginal Health Practitioners for reproductive and sexual health as well as clinical Intrauterine Device insertion training and upskilling. This year three doctors completed the Family Planning Alliance Australia certificate in Sexual health for Doctors clinical component. Sixty supervised clinics were required to support the doctor's clinical training. We were very fortunate to have Doctor Sophie Scrimgeour complete her six month GP registrar placement during this year.

The antenatal shared care partnership between Royal Darwin Hospital and Family Planning NT continued during the year. This partnership commenced in October 2017 and will cease in June 2019 due to economic reasons.

We have had few staff changes this year. Doctor Paul Rivalland has been our acting Medical Director, standing in for Doctor Jacqueline Murdoch who took a six month leave of absence. We continued to have an assistant in nursing supporting our specialised contraception clinics. The support from Kristie has allowed the clinic coordinator to have extra time to attend to the ever growing paperwork involved with the clinics.

Quality assurance monitoring is a high priority for our service. During this year our client management system called DME was updated. We introduced into our practice My Health Record system (MyHR). Clients are now able to request shared medical notes to be uploaded into the clients own Commonwealth health record system. Our internal clinic advisory committee continued to address clinic guidelines and standards. We undertook our usual pathology audit twice in the year plus our yearly client survey.

For the first time we undertook an audit of our clinic clients who did not attend (DNA) a booked appointment. After implementing new measures to reduce the rate of DNA clients in our clinics, we conducted a second audit four months later. We were pleased to see a decrease from 11% to 8%. We hope to reduce this rate to 6% by the end of 2019-20.

Thank you to all our staff, goodbye to those who left and welcome to everyone who joined us this past year. We look forward to continuing to provide first class reproductive and sexual health care to NT women and men in 2019-20.

Kirsten Thompson *Clinical Coordinator*

Clinic Statistics: Darwin and Palmerston year that was.



Reception Report

This year was once again very busy for reception. Both Darwin and our Palmerston clinics continue to grow with demand, especially in the health care of pregnancy support services. Our Palmerston clinic now carries 20% of all clientele visits to Family Planning.

Reception managed approximately 10,000 client consultation requested bookings in our clinic management system. Staff also managed further client and health professional phone calls. Staff have continued to support anxious and nervous clients by phone and in person on a daily basis and I would like to thank all our staff who have worked admirably. Coping with sometimes abusive and aggressive women and/or their partners is a challenge, yet at the same time understanding the anxiety.

Our reception workforce is small, consisting of part-time and casual staff equal to 2 FTE. This year we said farewell to Bianca and Skye. I would like to thank them both for all their hard work and dedication. We welcomed to our team shortly after, Valerie and Natascha.

We have received many positive comments from our regular client satisfaction surveys regarding our clinic style, grace, friendliness and professionalism.

Each month we share with the public a specific health issue via our presentation board. Again, this has received constant praise from our clients. Topics addressed were men's health, domestic violence, adolescent health, cervical screening new guidelines, contraception and pregnancy.

Kristie, our clinic assistant, expanded her horizons and was provided training in reception duties. Our clinic management systems received their usual yearly updates. We also reviewed our staff security measures and we participated in clinic committee meetings.

I would like to personally thank PJ for another wonderful working year. PJ is my second in charge, a dedicated and very capable medical receptionist who has managed to support all services.

Kerry Reader *Reception Manager*

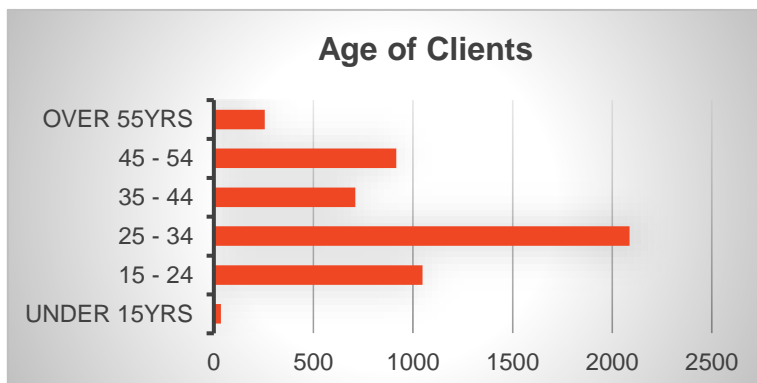


Photos above: Coconut Grove Clinic presentation board -Men's Health and Domestic Violence

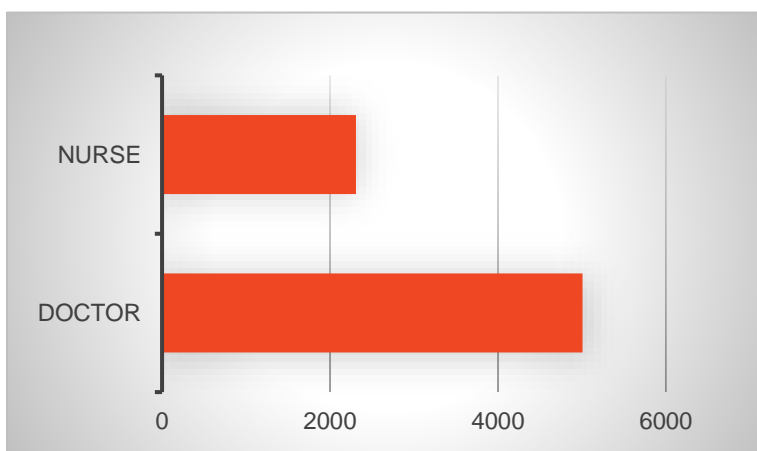
Calendar Events we support.

| | |
|----------------------------|-------------------------------|
| February 14 th | National Condom Day |
| February 27 th | Ovarian Cancer Day |
| March 8 th | International Women's Day |
| May 29 th | Suicide & Mental Health |
| June 15 th | Men's Health Week |
| July 26 th | Stop Violence against Women |
| September 2 nd | Women's Health Week |
| September 12 th | R U OK Day |
| September 26 th | World Contraception Day |
| September 28 th | World Safe Abortion Day |
| October | Breast Cancer Awareness month |
| December 1 st | World AIDS day |
| December 5 th | World Volunteer Day |

DONE Date collected from our DME CLINIC data system.

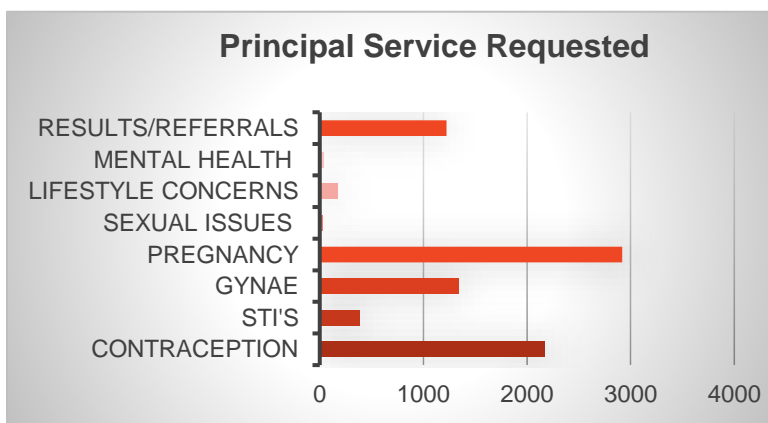


Age of Clients: Nearly 40% of all our clients are under 35 years.



Staff Consultations: Clients visit both our doctor and nurses. The average duration of each visit is 38 minutes.

2125 clients required nurse assistance during Doctor consultations.



Services provided. Analysis shows that people attend largely for pregnancy support and contraception, STI check-ups and gynecology. Our service values clients receiving all results

Clinical Quality Improvement

Telephone Survey: Three times each year we conduct an internal telephone survey to understand the volume of calls we receive. This year we received approximately 12,500 calls similar to our previous year. The majority of calls were for appointments and pregnancy support services.

Website: On average we have 1,100 visits each month.

Pathology Audit: Pathology audits are attended during the year. Both audits found 100 % electronic pathology results returned.

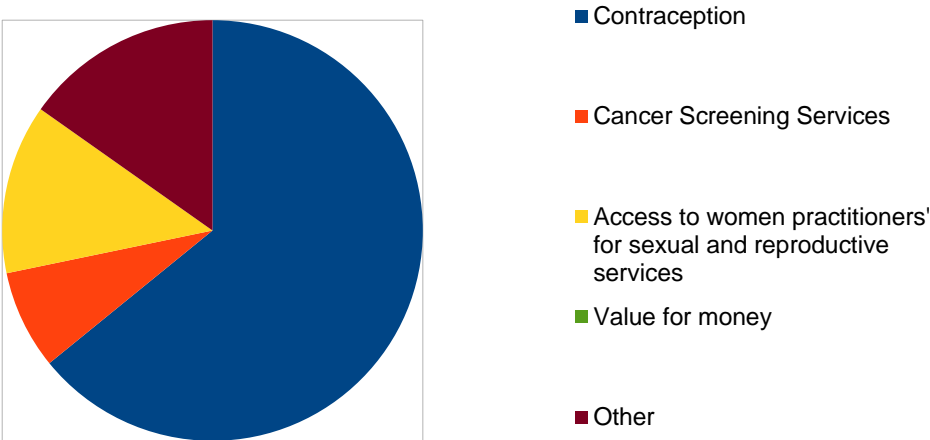
DNA Audit: Clinic clients who 'did not attend' booked appointments audit was undertaken in April. Our results indicated clients returning for follow up appointments were the major DNA group. The DNA rate was around 11%. To improve this poor outcome we reviewed our communication mechanisms within our booked client management systems. Three months later a second audit was undertaken. Results improved and decreased to 8%. We hope to improve this percentage by the end of 2019-20.

Client satisfaction survey results: Client satisfaction surveys are undertaken in August each year. An average of 100 clients volunteer to complete the survey whilst in our waiting rooms in Coconut Grove and Palmerston.

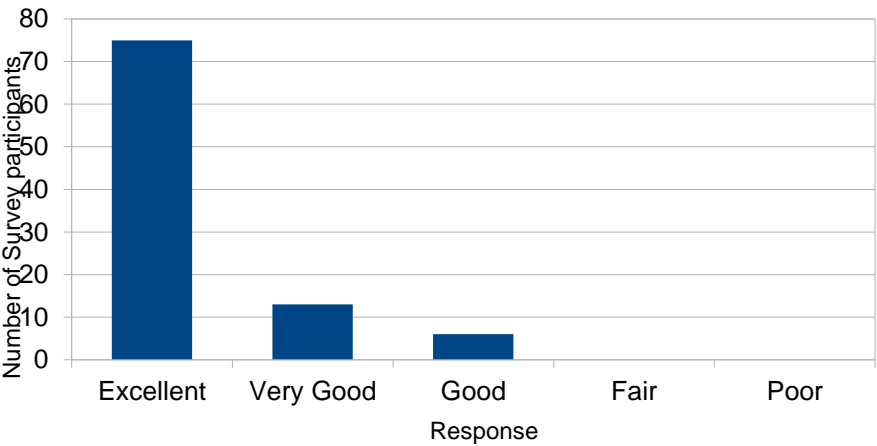
A range of comments from our clients this year-

Friendly
Got an appointment quickly
Calm and clean environment
Empathy
Brilliant service
Respectful
Very professional
Listen to you
Communication excellent

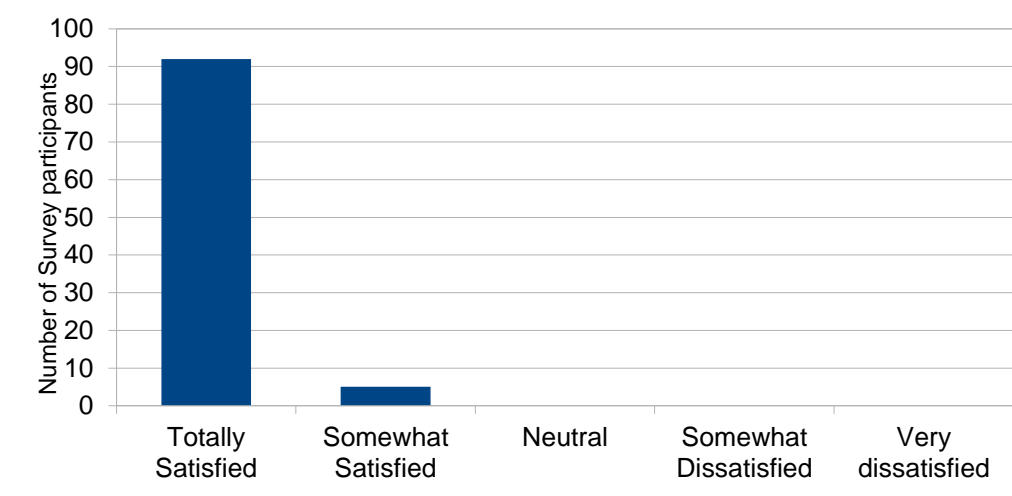
What was your primary reason for attending FPWANT?



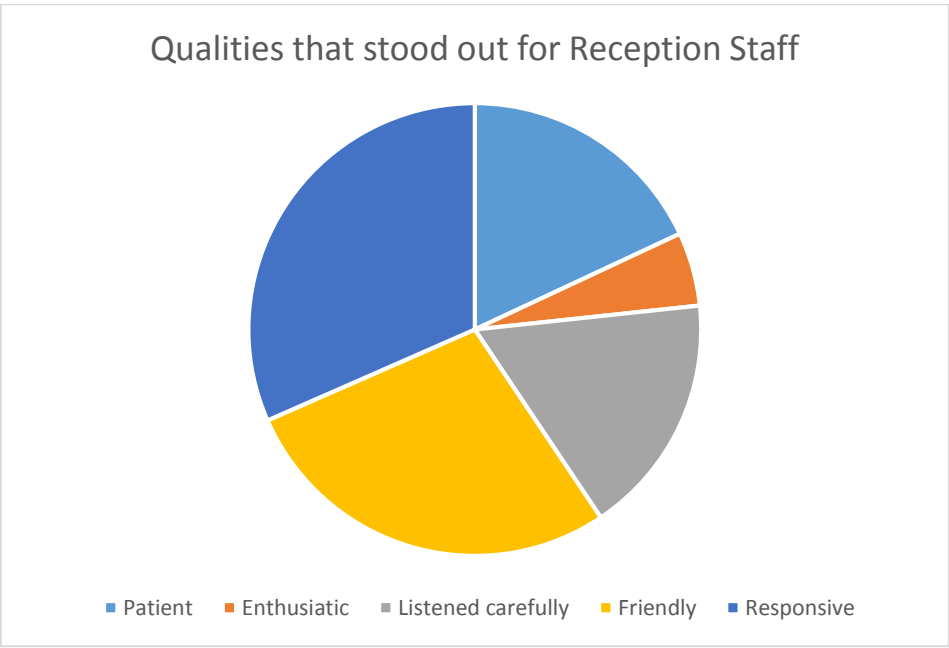
The process of getting your problem resolved was:



Overall, how satisfied have you been with FPWANT



Qualities that stood out for Reception Staff



Our Staff

Thank you everyone for another wonderful working year of achievements and challenges.

Our staff – Full-time equipment

| | | |
|------------------------------|-------------------------------------|-------|
| <i>Clinic team</i> | includes nurse and medical officers | x 4 |
| <i>Education team</i> | nurse educators | x 1.4 |
| <i>Administration</i> | includes reception | x 2.4 |

Outsourced Services

Debbie Wilson & Associates (finance), Territory Technology Solutions (IT)

Strategic Plan Summary

OUR VISION

For all Territorians to enjoy good sexual and reproductive health.

VALUES THAT GUIDE US

We believe sexual and reproductive health and wellbeing is a fundamental right for individuals and communities.

| ORGANISATIONAL VALUES | PRIORITY GROUPS |
|---------------------------|------------------------------------------|
| Non-judgmental | Young people |
| Open communication | Indigenous people |
| Confidential and safe | Agencies working with vulnerable peoples |
| Affordable | Education/training healthcare |
| Expert and professional | |
| Flexible access providers | |

OUR STRATEGIC GOALS

Organisational capacity building and governance
 Targeted programs for priority population groups
 Education and Training

NTG office of Women's Policy Framework for Northern Territory Women 2015 – 2020.

*The Northern Territory Government, through the Women's Health Strategic Unit in the Department of Health recognises the need for policy and program approached that respond to the different requirements of women and men and that some health issues are unique to, more common, or more serious for women. These include **sexual and reproductive health (including family planning)**, child birth and support for parenting, breast and cervical cancer prevention, the profound impact of family and sexual violence, primary care giving, and stress relating to the multiple roles*

Financial Report

The following information is an extract from our 2018/2019 audited Annual Financial Report year ending 30th June 2019.

A full copy of this report can be found on our website: www.fpwnt.com.au

Committee's Report

Statement of Profit or Loss and Other Comprehensive Income

Statement of Financial Position

Statement of Changes in Equity

Notes to the Financial Statements

Committee's Report

30 June 2019

The committee members present their report on Family Planning Welfare Association of NT Incorporated for the financial year ended 30 June 2019.

Committee members

The names of the committee members in office at any time during, or since the end of, the year are:

| Names | Position | Appointed/Resigned |
|--------------------|--------------------------|----------------------------|
| Suzanne Belton | President | Member for full year |
| Shelly Holland | Vice-President/Treasurer | Resigned 3 September 2018 |
| Anne Davis | Secretary | Member for full year |
| Shawgat Kutubi | Treasurer | Appointed 12 June 2019 |
| Amy Williams | Committee member | Member for full year |
| Kevin Wrigley | Committee member | Member for full year |
| Crystal Keitaanpaa | Committee member | Appointed 10 December 2018 |
| Julie Ngahere | Committee member | Appointed 10 December 2018 |
| Rosalind Clarke | Committee member | Appointed 11 March 2019 |

Committee members have been in office since the start of the financial year to the date of this report unless otherwise stated.

Principal activities

The principal activities of the Association during the financial year were:

- To assist and relieve individuals distressed by experiences associated with human relationships and human sexuality.
- To promote sexual health.
- To improve the quality of human relationships.
- To promote individual choice and personal responsibility in human sexuality.
- To develop a community awareness of the services provided by The Family Planning Welfare Association of Northern Territory Inc.

Significant changes

No significant change in the nature of these activities occurred during the year.

Operating result

The loss of the Association for the financial year amounted to \$ (98,731)(2018: \$ (22,057)).

Signed in accordance with a resolution of the Members of the Committee:

Original copy signed
President:
Suzanne Belton

Original copy signed
Treasurer:
Shawgat Kubuti 03/09/2019

Family Planning Welfare Association of NT Incorporated

Statement of Profit or Loss and Other Comprehensive Income

For the Year Ended 30 June 2019

| | 2019 | 2018 |
|------------------------------------------------|-----------------|-------------|
| | \$ | \$ |
| Revenue | 449,973 | 459,757 |
| Finance income | 2,481 | 2,444 |
| Other income | 973,561 | 1,029,544 |
| Employee benefits expense | (1,135,842) | (1,002,297) |
| Depreciation and amortisation expense | (7,345) | (8,746) |
| Other expenses | (381,559) | (407,760) |
| | <hr/> | |
| Profit for the year | (98,731) | 72,942 |
| | ===== | |
| Total comprehensive income for the year | (98,731) | 72,942 |
| | ===== | |

The Association has not restated comparatives when initially applying AASB 9, the comparative information has been prepared under AASB 139 *Financial Instruments: Recognition and Measurement*.

Family Planning Welfare Association of NT Incorporated

Statement of Financial Position

As At 30 June 2019

| | Note | 2019 \$ | 2018 \$ |
|-------------------------------|------|------------|------------|
| ASSETS | | | |
| CURRENT ASSETS | | | |
| Cash and cash equivalents | 6 | 316,883 | 344,167 |
| Trade and other receivables | 7 | 7,299 | 55,272 |
| Other assets | 9 | 29,575 | 32,597 |
| TOTAL CURRENT ASSETS | | 353,757 | 432,036 |
| NON-CURRENT ASSETS | | | |
| Property, plant and equipment | 8 | 2,102 | 9,446 |
| TOTAL NON-CURRENT ASSETS | | 2,102 | 9,446 |
| TOTAL ASSETS | | 355,859 | 441,482 |
| LIABILITIES | | | |
| CURRENT LIABILITIES | | | |
| Trade and other payables | 10 | 94,053 | 100,931 |
| Borrowings | 11 | 1,756 | 2,331 |
| Employee benefits | 12 | 175,226 | 151,659 |
| Other financial liabilities | 13 | 7,771 | 10,776 |
| TOTAL CURRENT LIABILITIES | | 278,806 | 265,697 |
| TOTAL LIABILITIES | | 278,806 | 265,697 |
| NET ASSETS | | 77,053 | 175,785 |
| EQUITY | | | |
| Reserves | 14 | 60,000 | 95,000 |
| Retained earnings | | 17,053 | 80,785 |
| TOTAL EQUITY | | 77,053 | 175,785 |

The Association has not restated comparatives when initially applying AASB 9, the comparative information has been prepared under AASB 139 *Financial Instruments: Recognition and Measurement*.

Family Planning Welfare Association of NT Incorporated

Statement of Changes in Equity

For the Year Ended 30 June 2019

2019

| | Retained Earnings \$ | General Reserve \$ | Total \$ |
|-------------------------------------------------------------|----------------------------|--------------------------|----------------|
| Balance at 1 July 2018 | 80,785 | 95,000 | 175,785 |
| Loss attributable to members of the association | (98,732) | - | (98,732) |
| Transactions with owners in their capacity as owners | | | |
| Transfers to retained earnings from general reserve | 35,000 | (35,000) | - |
| Balance at 30 June 2019 | 17,053 | 60,000 | 77,053 |
| | ===== | ===== | ===== |

2018

| | Retained Earnings \$ | General Reserve \$ | Total \$ |
|-------------------------------------------------------------|----------------------------|--------------------------|----------------|
| Balance at 1 July 2017 | 102,842 | - | 102,842 |
| Loss attributable to members of the association | (22,057) | - | (22,057) |
| Transactions with owners in their capacity as owners | | | |
| Transfers from retained earnings to general reserve | (95,000) | 95,000 | - |
| Retrospective adjustment upon change in accounting policy | 95,000 | - | 95,000 |
| Balance at 30 June 2018 | 80,785 | 95,000 | 175,785 |
| | ===== | ===== | ===== |

The Association has not restated comparatives when initially applying AASB 9, the comparative information has been prepared under AASB 139 *Financial Instruments: Recognition and Measurement*.

Notes to the Financial Statements

For the Year Ended 30 June 2019

The financial statements cover Family Planning Welfare Association of NT Incorporated as an individual entity. Family Planning Welfare Association of NT Incorporated is a not-for-profit Association, registered and domiciled in Australia.

The functional and presentation currency of Family Planning Welfare Association of NT Incorporated is Australian dollars.

Comparatives are consistent with prior years, unless otherwise stated.

1 Basis of Preparation

In the opinion of those charged with Governance the Association is not a reporting entity since there are unlikely to exist users of the financial statements who are not able to command the preparation of reports tailored so as to satisfy specifically all of their information needs. These special purpose financial statements have been prepared to meet the reporting requirements of the Association's constitution, the *Associations Act (NT) 2003* and the *Australian Charities and Not-for-profits Commission Act 2012*.

The financial statements have been prepared in accordance with the recognition and measurement requirements of the Australian Accounting Standards and Accounting Interpretations, and the disclosure requirements of AASB 101 *Presentation of Financial Statements*, AASB 107 *Statement of Cash Flows*, AASB 108 *Accounting Policies, Changes in Accounting Estimates and Errors* and AASB 1054 *Australian Additional Disclosures*.

2 Change in Accounting Policy

Financial Instruments - Adoption of AASB 9

The Association has adopted AASB 9 *Financial Instruments* for the first time in the current year with a date of initial adoption of 1 July 2017.

As part of the adoption of AASB 9, the Association adopted consequential amendments to other accounting standards arising from the issue of AASB 9 as follows:

- AASB 101 *Presentation of Financial Statements* requires the impairment of financial assets to be presented in a separate line item in the statement of profit or loss and other comprehensive income. In the comparative year, this information was presented as part of other expenses.
- AASB 7 *Financial Instruments: Disclosures* requires amended disclosures due to changes arising from AASB 9, this disclosures have been provided for the current year.

The key changes to the Association's accounting policy and the impact on these financial statements from applying AASB 9 are described below.

Changes in accounting policies resulting from the adoption of AASB 9 have been applied retrospectively except the Association has not restated any amounts relating to classification and measurement requirements including impairment which have been applied from 1 July 2018.

Impairment of financial assets

The incurred loss model from AASB 139 has been replaced with an expected credit loss model in AASB 9 for assets measured at amortised cost, contract assets and fair value through other comprehensive income. This has resulted in the earlier recognition of credit loss (bad debt provisions).

Notes to the Financial Statements For the Year Ended 30 June 2019

3 Summary of Significant Accounting Policies

3.1. Income Tax

The Association is exempt from income tax under Division 50 of the *Income Tax Assessment Act 1997*.

3.2. Leases

Lease payments for operating leases, where substantially all of the risks and benefits remain with the lessor, are charged as expenses on a straight-line basis over the life of the lease term.

3.3. Revenue and other income

Revenue is recognised when the amount of the revenue can be measured reliably, it is probable that economic benefits associated with the transaction will flow to the Association and specific criteria relating to the type of revenue as noted below, has been satisfied.

Revenue is measured at the fair value of the consideration received or receivable and is presented net of returns, discounts and rebates.

Grant revenue

Grant revenue is recognised in the statement of profit or loss and other comprehensive income when the Association obtains control of the grant, it is probable that the economic benefits gained from the grant will flow to the entity and the amount of the grant can be measured reliably.

When grant revenue is received whereby the Association incurs an obligation to deliver economic value directly back to the contributor, this is considered a reciprocal transaction and the grant revenue is recognised in the statement of financial position as a liability until the service has been delivered to the contributor, otherwise the grant is recognised as income on receipt.

Family Planning Welfare Association of NT Incorporated receives non-reciprocal contributions of assets from the government and other parties for zero or a nominal value. These assets are recognised at fair value on the date of acquisition in the statement of financial position, with a corresponding amount of income recognised in the statement of profit or loss and other comprehensive income.

Rendering of services

Revenue in relation to rendering of services is recognised depending on whether the outcome of the services can be estimated reliably. If the outcome can be estimated reliably then the stage of completion of the services is used to determine the appropriate level of revenue to be recognised in the period.

If the outcome cannot be reliably estimated then revenue is recognised to the extent of expenses recognised that are recoverable.

Subscriptions

Revenue from the provision of membership subscriptions is recognised on receipt.

Other income

Other income is recognised on an accruals basis when the Association is entitled to it.

Notes to the Financial Statements

For the Year Ended 30 June 2019

3 Summary of Significant Accounting Policies

3.4. Goods and services tax (GST)

Revenue, expenses and assets are recognised net of the amount of goods and services tax (GST), except where the amount of GST incurred is not recoverable from the Australian Taxation Office (ATO).

Receivables and payable are stated inclusive of GST.

Cash flows in the statement of cash flows are included on a gross basis and the GST component of cash flows arising from investing and financing activities which is recoverable from, or payable to, the taxation authority is classified as operating cash flows.

3.5. Property, plant and equipment

Each class of property, plant and equipment is carried at cost or fair value less, where applicable, any accumulated depreciation and impairment.

Items of property, plant and equipment acquired for nil or nominal consideration have been recorded at the acquisition date fair value.

Plant and equipment

Plant and equipment are measured using the cost model.

Depreciation

Property, plant and equipment, excluding freehold land, is depreciated on a straight-line basis over the assets useful life to the Association, commencing when the asset is ready for use.

The depreciation rates used for each class of depreciable asset are shown below:

| Fixed asset class | Depreciation rate |
|---------------------|-------------------|
| Plant and Equipment | 40.0% |
| Motor Vehicles | 22.5% |

At the end of each annual reporting period, the depreciation method, useful life and residual value of each asset is reviewed. Any revisions are accounted for prospectively as a change in estimate.

3.6. Financial instruments

Financial instruments are recognised initially on the date that the Association becomes party to the contractual provisions of the instrument.

On initial recognition, all financial instruments are measured at fair value plus transaction costs (except for instruments measured at fair value through profit or loss where transaction costs are expensed as incurred).

Financial assets

All recognised financial assets are subsequently measured in their entirety at either amortised cost or fair value, depending on the classification of the financial assets.

Notes to the Financial Statements

For the Year Ended 30 June 2019

3 Summary of Significant Accounting Policies

3.6. Financial instruments

Financial assets

Classification

On initial recognition, the Association classifies its financial assets into the following categories, those measured at:

- amortised cost
- fair value through profit or loss – FVTPL
- fair value through other comprehensive income - equity instrument (FVOCI - equity)
- fair value through other comprehensive income - debt investments (FVOCI - debt)

Financial assets are not reclassified subsequent to their initial recognition unless the Association changes its business model for managing financial assets.

Amortised cost

Assets measured at amortised cost are financial assets where:

- the business model is to hold assets to collect contractual cash flows; and
- the contractual terms give rise on specified dates to cash flows are solely payments of principal and interest on the principal amount outstanding.

The Association's financial assets measured at amortised cost comprise trade and other receivables and cash and cash equivalents in the statement of financial position.

Subsequent to initial recognition, these assets are carried at amortised cost using the effective interest rate method less provision for impairment.

Interest income, foreign exchange gains or losses and impairment are recognised in profit or loss. Gain or loss on derecognition is recognised in profit or loss.

Fair value through other comprehensive income

Equity instruments

These investments are carried at fair value with changes in fair value recognised in other comprehensive income (financial asset reserve). On disposal any balance in the financial asset reserve is transferred to retained earnings and is not reclassified to profit or loss.

Dividends are recognised as income in profit or loss unless the dividend clearly represents a recovery of part of the cost of the investment. Other net gains and losses are recognised in OCI.
Financial assets through profit or loss

Notes to the Financial Statements

For the Year Ended 30 June 2019

3 Summary of Significant Accounting Policies

3.6. Financial instruments

Financial assets

All financial assets not classified as measured at amortised cost or fair value through other comprehensive income as described above are measured at FVTPL.

Net gains or losses, including any interest or dividend income are recognised in profit or loss (refer to hedging accounting policy for derivatives designated as hedging instruments.)

Impairment of financial assets

Impairment of financial assets is recognised on an expected credit loss (ECL) basis for the following assets:

- financial assets measured at amortised cost
- debt investments measured at FVOCI

When determining whether the credit risk of a financial assets has increased significant since initial recognition and when estimating ECL, the Association considers reasonable and supportable information that is relevant and available without undue cost or effort. This includes both quantitative and qualitative information and analysis based on the Association's historical experience and informed credit assessment and including forward looking information.

The Association uses the presumption that an asset which is more than 30 days past due has seen a significant increase in credit risk.

The Association uses the presumption that a financial asset is in default when:

- the other party is unlikely to pay its credit obligations to the Association in full, without recourse to the Association to actions such as realising security (if any is held); or
- the financial assets is more than 90 days past due.

Credit losses are measured as the present value of the difference between the cash flows due to the Association in accordance with the contract and the cash flows expected to be received. This is applied using a probability weighted approach.

Trade receivables

Impairment of trade receivables have been determined using the simplified approach in AASB 9 which uses an estimation of lifetime expected credit losses. The Association has determined the probability of non-payment of the receivable and multiplied this by the amount of the expected loss arising from default.

The amount of the impairment is recorded in a separate allowance account with the loss being recognised in finance expense. Once the receivable is determined to be uncollectable then the gross carrying amount is written off against the associated allowance.

Where the Association renegotiates the terms of trade receivables due from certain customers, the new expected cash flows are discounted at the original effective interest rate and any resulting difference to the carrying value is recognised in profit or loss.

Notes to the Financial Statements

For the Year Ended 30 June 2019

3 Summary of Significant Accounting Policies

3.6. Financial instruments

Financial assets

Other financial assets measured at amortised cost

Impairment of other financial assets measured at amortised cost are determined using the expected credit loss model in AASB 9. On initial recognition of the asset, an estimate of the expected credit losses for the next 12 months is recognised. Where the asset has experienced significant increase in credit risk then the lifetime losses are estimated and recognised.

Financial liabilities

The Association measures all financial liabilities initially at fair value less transaction costs, subsequently financial liabilities are measured at amortised cost using the effective interest rate method.

The financial liabilities of the Association comprise trade payables, bank and other loans and finance lease liabilities.

3.7. Impairment of non-financial assets

At the end of each reporting period the Association determines whether there is an evidence of an impairment indicator for non-financial assets.

Where an indicator exists and regardless for indefinite life intangible assets and intangible assets not yet available for use, the recoverable amount of the asset is estimated.

Where assets do not operate independently of other assets, the recoverable amount of the relevant cash generating unit (CGU) is estimated.

The recoverable amount of an asset or CGU is the higher of the fair value less costs of disposal and the value in use. Value in use is the present value of the future cash flows expected to be derived from an asset or cash generating unit.

Where the recoverable amount is less than the carrying amount, an impairment loss is recognised in profit or loss.

Reversal indicators are considered in subsequent periods for all assets which have suffered an impairment loss.

3.8. Cash and cash equivalents

Cash and cash equivalents comprises cash on hand, demand deposits and short-term investments which are readily convertible to known amounts of cash and which are subject to an insignificant risk of change in value.

3.9. Employee benefits

Provision is made for the Association's liability for employee benefits arising from services rendered by employees to the end of the reporting period. Employee benefits that are expected to be wholly settled within one year have been measured at the amounts expected to be paid when the liability is settled.

Notes to the Financial Statements

For the Year Ended 30 June 2019

3 Summary of Significant Accounting Policies

3.9. Employee benefits

Employee benefits expected to be settled more than one year after the end of the reporting period have been measured at the present value of the estimated future cash outflows to be made for those benefits. In determining the liability, consideration is given to employee wage increases and the probability that the employee may satisfy vesting requirements. Cashflows are discounted using market yields on high quality corporate bond rates incorporating bonds rated AAA or AA by credit agencies, with terms to maturity that match the expected timing of cashflows. Changes in the measurement of the liability are recognised in profit or loss.

3.10. Economic dependence

Family Planning Welfare Association of NT Incorporated is dependent on the Northern Territory Department of Health for the majority of its revenue used to operate the business. At the date of this report, although the service level agreement has expired, the committee have no reason to believe the Northern Territory Department of Health will not continue to support Family Planning Welfare Association of NT Incorporated.

3.11. Adoption of new and revised accounting standards

The Association has adopted all standards which became effective for the first time at 30 June 2019, the adoption of these standards has not caused any material adjustments to the reported financial position, performance or cash flow of the Association.

3.12. New Accounting Standards and Interpretations

The AASB has issued new and amended Accounting Standards and Interpretations that have mandatory application dates for future reporting periods. The Association has decided not to early adopt these Standards. The following table summarises those future requirements, and their impact on the Association where the standard is relevant:

| Standard Name | Effective date for entity | Requirements | Impact |
|-----------------------------------------------|---------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| AASB 15 Revenue from Contracts with Customers | 1 January 2019 | Replaces AASB 118 Revenue, AASB 111 Construction Contracts and some revenue-related Interpretations: <ul style="list-style-type: none"> - establishes a new revenue recognition model - changes the basis for deciding whether revenue is to be recognised over time or at a point in time - provides new and more detailed guidance on specific topics (e.g. multiple element arrangements, variable pricing, rights of return, warranties and licensing) - expands and improves disclosures about revenue. | When this standard is first adopted for the year ending 30 June 2020, there will be no material impact on the transactions and balances recognised in the financial statements. |

Notes to the Financial Statements

For the Year Ended 30 June 2019

3 Summary of Significant Accounting Policies

3.12. New Accounting Standards and Interpretations

| Standard Name | Effective date for entity | Requirements | Impact |
|----------------|---------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| AASB 16 Leases | 1 January 2019 | <p>Replaces AASB 117 Leases and some lease-related Interpretations</p> <ul style="list-style-type: none"> - requires all leases to be accounted for 'on-balance sheet' by lessees, other than short-term and low value asset leases - provides new guidance on the application of the definition of lease and on sale and lease back accounting - largely retains the existing lessor accounting requirements in AASB 117 - requires new and different disclosures about leases. | <p>The entity is yet to undertake a detailed assessment of the impact of AASB 16. However, based on the entity's preliminary assessment, the likely impact on the first time adoption of the Standard for the year ending 30 June 2020 includes:</p> <ul style="list-style-type: none"> - there will be a significant increase in Lease assets and financial liabilities recognised on the balance sheet - the reported equity will reduce as the carrying amount of lease assets will reduce more quickly than the carrying amount of lease liabilities - EBIT in the statement of profit or loss and other comprehensive income will be higher as the implicit interest in lease payments for former off balance sheet leases will be presented as part of finance costs rather than being included in operating expenses - operating cash outflows will be lower and financing cash flows will be higher in the statement of cash flows as principal repayments on all lease liabilities will now be included in financing activities rather than operating activities. Interest can also be included within financing activities |

Notes to the Financial Statements

For the Year Ended 30 June 2019

3 Summary of Significant Accounting Policies

3.12. New Accounting Standards and Interpretations

| Standard Name | Effective date for entity | Requirements | Impact |
|---------------------------------------------|---------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| AASB 1058 Income of Not-for-Profit Entities | 1 January 2019 | <p>AASB 1058 clarifies and simplifies the income recognition requirements That apply to not-to-profit (NFP) entities, in conjunction with AASB 15 Revenue from Contracts with Customers. These Standards supersede all the income recognition requirements relating to private sector NFP entities, and the majority of income recognition requirements relating to public sector NFP entities, previously in AASB 1004 Contributions.</p> <p>Under AASB 1058, the timing of income recognition depends on whether a NFP transaction gives rise to a liability or other performance obligation (a promise to transfer a good or service), or a contribution by owners, related to an asset (such as cash or another asset) received by an entity.</p> <p>This standard applies when a NFP entity enters into transactions where the consideration to acquire an asset is significantly less than the fair value of the asset principally to enable the entity to further its objectives. In the latter case, the entity will recognise and measure the asset at fair value in accordance with the applicable Australian Accounting Standard (e.g. AASB 116 Property, Plant and Equipment).</p> <p>Upon initial recognition of the asset, AASB 1058 requires the entity to consider whether any other financial statement elements (called 'related amounts') should be recognised, such as:</p> <ul style="list-style-type: none"> a Contributions by owners; b Revenue, or a contract liability arising from a contract with a customer; c A lease liability; d A financial instrument; or e A provision. <p>These related amounts will be accounted for in accordance with the applicable Australian Accounting Standard.</p> | When this standard is first adopted for the year ending 30 June 2020, there will be no material impact on the transactions and balances recognised in the financial statements |

Notes to the Financial Statements

For the Year Ended 30 June 2019

4 Critical Accounting Estimates and Judgments

Those charged with governance make estimates and judgements during the preparation of these financial statements regarding assumptions about current and future events affecting transactions and balances.

These estimates and judgements are based on the best information available at the time of preparing the financial statements, however as additional information is known then the actual results may differ from the estimates.

The significant estimates and judgements made have been described below.

Key estimates – receivables

The receivables at reporting date have been reviewed to determine whether there is any objective evidence that any of the receivables are impaired. An impairment provision is included for any receivable where the entire balance is not considered collectible. The impairment provision is based on the best information at the reporting date.

5 Result for the Year

The result for the year includes the following specific expenses:

| | 2019 \$ | 2018 \$ |
|-------------------------------------|------------|------------|
| Other expenses: | | |
| Employee benefits expense | 1,135,842 | 1,002,297 |
| Rental expense on operating leases: | | |
| - Minimum lease payments | 106,118 | 104,431 |

6 Cash and Cash Equivalents

| | 2019 \$ | 2018 \$ |
|--------------------------|------------|------------|
| Cash at bank and in hand | 311,087 | 231,499 |
| Short-term deposits | 5,796 | 112,668 |
| | 316,883 | 344,167 |
| | ===== | ===== |

7 Trade and Other Receivables

| | 2019 \$ | 2018 \$ |
|----------------------------|------------|------------|
| CURRENT | | |
| Trade receivables | 4,234 | 55,272 |
| Medicare claims receivable | 3,065 | - |
| | 7,299 | 55,272 |
| | ===== | ===== |

The carrying value of trade receivables is considered a reasonable approximation of fair value due to the short-term nature of the balances.

The maximum exposure to credit risk at the reporting date is the fair value of each class of receivable in the financial statements.

Notes to the Financial Statements

For the Year Ended 30 June 2019

8 Property, plant and equipment

PLANT AND EQUIPMENT

Plant and equipment

At cost

Accumulated depreciation

| | |
|----------|----------|
| 21,178 | 21,178 |
| (21,178) | (19,560) |

Total plant and equipment

| | |
|---|-------|
| - | 1,618 |
|---|-------|

Motor vehicles

At cost

Accumulated depreciation

| | |
|----------|----------|
| 25,450 | 25,450 |
| (23,348) | (17,622) |

Total motor vehicles

| | |
|-------|-------|
| 2,102 | 7,828 |
|-------|-------|

| | |
|-------|-------|
| 2,102 | 9,446 |
|-------|-------|

8.1. Movements in carrying amounts of property, plant and equipment

Movement in the carrying amounts for each class of property, plant and equipment between the beginning and the end of the current financial year:

| | Plant and Equipment \$ | Motor Vehicles \$ | Total \$ |
|---------------------------------------|------------------------------|-------------------------|-------------|
| Year ended 30 June 2019 | | | |
| Balance at the beginning of year | 1,618 | 7,828 | 9,446 |
| Depreciation expense | (1,618) | (5,726) | (7,344) |
| Balance at the end of the year | - | 2,102 | 2,102 |

| | Plant and Equipment \$ | Motor Vehicles \$ | Total \$ |
|---------------------------------------|------------------------------|-------------------------|-------------|
| Year ended 30 June 2018 | | | |
| Balance at the beginning of year | 4,637 | 13,554 | 18,191 |
| Depreciation expense | (3,019) | (5,726) | (8,745) |
| Balance at the end of the year | 1,618 | 7,828 | 9,446 |

Notes to the Financial Statements

For the Year Ended 30 June 2019

| | | | |
|-----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|----------------|
| 9 | Other Assets | 2019 | 2018 |
| | | \$ | \$ |
| | CURRENT | | |
| | Prepayments | 22,253 | 24,329 |
| | Accrued income | - | 946 |
| | Rental bonds | 7,322 | 7,322 |
| | | <u>29,575</u> | <u>32,597</u> |
| | | ===== | ===== |
| 10 | Trade and Other Payables | 2019 | 2018 |
| | | \$ | \$ |
| | CURRENT | | |
| | Trade payables | 16,853 | 54,017 |
| | GST payable | 18,479 | 4,136 |
| | Sundry payables and accrued expenses | 44,753 | 42,779 |
| | PAYG withholding payable | 13,966 | - |
| | | <u>94,051</u> | <u>100,932</u> |
| | | ===== | ===== |
| | Trade and other payables are unsecured, non-interest bearing and are normally settled within 30 days. The carrying value of trade and other payables is considered a reasonable approximation of fair value due to the short-term nature of the balances. | | |
| 11 | Borrowings | 2019 | 2018 |
| | | \$ | \$ |
| | CURRENT | | |
| | Unsecured liabilities: | | |
| | Credit cards | 1,756 | 2,331 |
| | | <u>1,756</u> | <u>2,331</u> |
| | | ===== | ===== |
| 12 | Employee Benefits | 2019 | 2018 |
| | | \$ | \$ |
| | CURRENT | | |
| | Long service leave | 72,232 | 56,081 |
| | Provision for employee benefits | 102,994 | 95,578 |
| | | <u>175,226</u> | <u>151,659</u> |
| | | ===== | ===== |

Notes to the Financial Statements

For the Year Ended 30 June 2019

13 Other Financial Liabilities

| | 2019 \$ | 2018 \$ |
|------------------------------|--------------|---------------|
| CURRENT | | |
| Unexpended government grants | 7,771 | 9,694 |
| Income received in advance | - | 1,082 |
| | <u>7,771</u> | <u>10,776</u> |
| | ===== | ===== |

14 Reserves

14.1. General reserve

The general reserve records funds set aside for operational and capital expenditure of Family Planning Welfare Association of NT Incorporated as detailed below.

| | 2019 \$ | 2018 \$ |
|------------------------------------|---------------|---------------|
| Future ICT replacement | 10,000 | 10,000 |
| Future motor vehicle replacement | - | 30,000 |
| Future leasehold restoration costs | 45,000 | 45,000 |
| Future legal cost insurance excess | 5,000 | 10,000 |
| | <u>60,000</u> | <u>95,000</u> |
| | ===== | ===== |

15 Auditors' Remuneration

| | 2019 \$ | 2018 \$ |
|--------------------------------------------------------------|--------------|--------------|
| Remuneration of the auditor, TDH Chartered Accountants, for: | | |
| - auditing or reviewing the financial statements | 6,000 | 8,500 |
| | <u>6,000</u> | <u>8,500</u> |
| | ===== | ===== |

Notes to the Financial Statements

For the Year Ended 30 June 2019

16 Cash Flow Information

16.1. Reconciliation of result for the year to cashflows from operating activities

Reconciliation of net income to net cash provided by operating activities:

| | 2019 \$ | 2018 \$ |
|----------------------------------------------------------------------|------------|------------|
| Profit for the year | (98,731) | 72,943 |
| Cash flows excluded from profit attributable to operating activities | | |
| Non-cash flows in profit: | | |
| - depreciation | 7,344 | 8,747 |
| Changes in assets and liabilities: | | |
| - (increase)/decrease in trade and other receivables | 47,973 | (51,902) |
| - (increase)/decrease in prepayments | 1,928 | 2,452 |
| - increase/(decrease) in trade and other payables | (9,366) | (117,009) |
| - increase/(decrease) in employee benefits | 23,567 | 5,375 |
| Cashflows from operations | (27,285) | (79,394) |
| | ===== | ===== |

17 Events Occurring After the Reporting Date

The financial report was authorised for issue on by the committee.

The committee were expecting a renewal of the service level agreement with the Northern Territory Department of Health during the financial year ended 30 June 2019. At the time of signing these financial statements this agreement has yet to be renewed although advances of operational funding had been received during the year ended 30 June 2020. Should this agreement not be renewed it is doubtful that the Association will be able to continue as a going concern.

Except for the above, no other matters or circumstances have arisen since the end of the financial year which significantly affected or could significantly affect the operations of the Association, the results of those operations or the state of affairs of the Association in future financial years.

18 Statutory Information

The registered office and principal place of business of the association is:
 Family Planning Welfare Association of NT Incorporated
 Clocktower Building
 2 Dickward Drive
 Coconut Grove NT 0812

The End