

*Mala'la*



*Malabam Health Board  
Aboriginal Corporation*

Productivity Commission

Dear Commission,

We are disappointed that we are not able to meet with you during your visit to Maningrida this week, as we would have liked to have had a chat about what the board is doing and the future plans of the organisation. We are attending a Malabam Health Board Retreat near Darwin this week, to continue working on our strategic plan, and develop ways that the Health Board can become an integral part of the Maningrida Community and surrounding outstations.

The last 6 months has been particularly exciting for the Malabam Health Board Aboriginal Corporation. We have been through a review, and from that process a number of recommendations have been developed, which the board have identified as crucial to the way forward. We have attached a copy of the recommendations with this letter, and are happy to report that quite a number of these recommendations have already been addressed.

Our immediate concerns are the overall health and wellbeing of the people of Maningrida and surrounding outstations, and board members have undertaken a lot of training in the areas of corporate governance and financial management, to enable us to understand the processes involved in our roles and responsibilities as a board, so we can develop plans to address this overall concern.

The people in this area face a major crisis in the areas of health, housing and education, and the board feels that these areas must be addressed immediately. Drastic improvements in these particular areas will lead to improvements in a lot of other areas, and the board will play an important link role in developing resources to combat these problems. The board has a particular interest in seeing Aged Care lifted to priority status, given the ageing population of the area.

The board is in a perfect position to develop policy in all areas of health and be the link organisation, due to its widespread representation of people, not only in Maningrida, but surrounding outstations. We believe that health in this area should be community controlled, and we are determined to make sure that the

*Malabam Health Board Aboriginal Corporation*  
(formerly Maningrida Health Board Aboriginal Corporation)

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delivery of health services, are of a culturally sensitive nature. This is paramount for the success of prevention programs and education of the people in the area of health.

We have also attached two diagrams which came out of the recent review, which were adopted officially at a special general meeting recently. We changed our constitution to assist in developing a representative team approach, with a rotating chairperson from in town as well as from the outstations.

The Malabam Health Board Aboriginal Corporation is serious about the future of health in this area, and sees its role in the development of health vital.

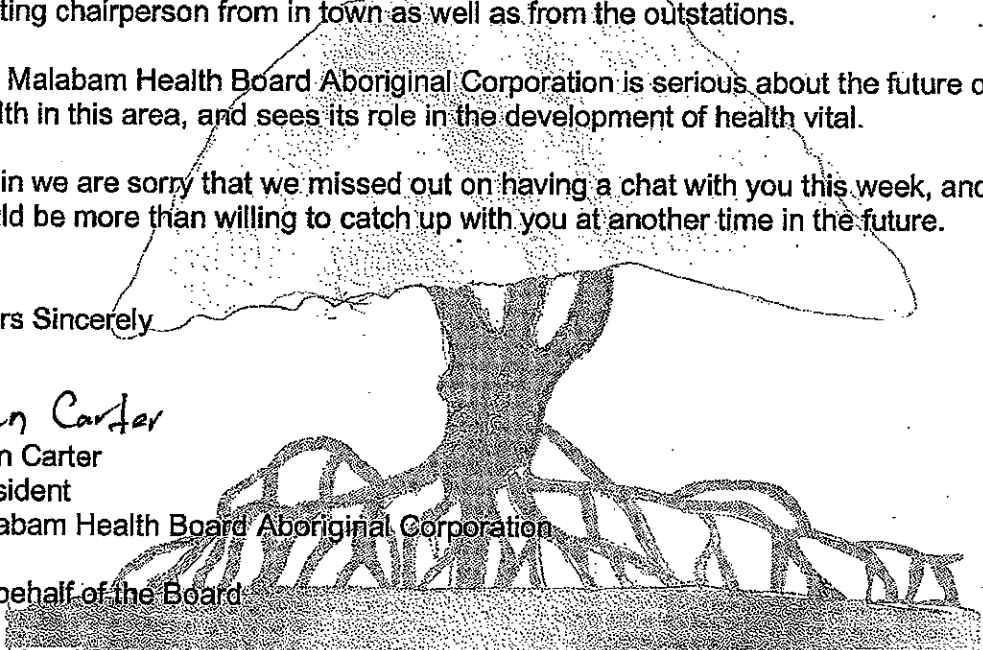
Again we are sorry that we missed out on having a chat with you this week, and would be more than willing to catch up with you at another time in the future.

Yours Sincerely

*Alan Carter*  
Allan Carter  
President  
Malabam Health Board Aboriginal Corporation

On behalf of the Board

Tuesday August 24, 2004

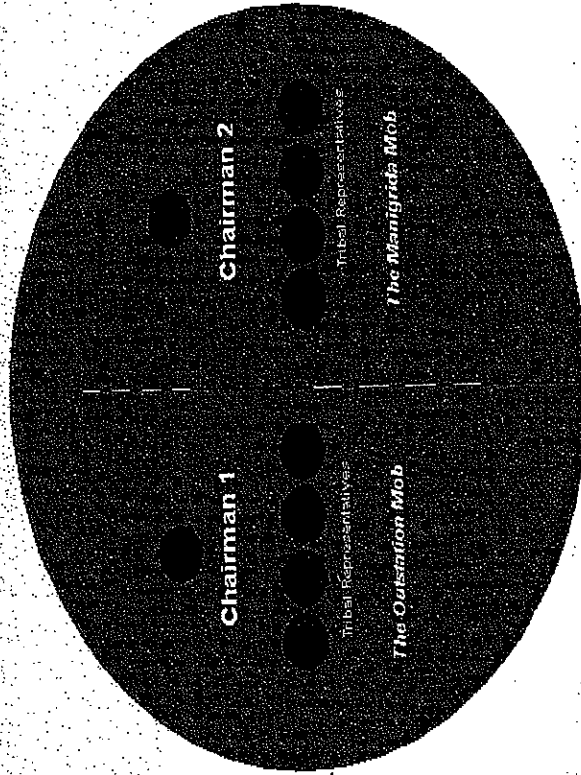


## Malabam Health Board

### The Representative Team

"Traditional Setup"

- + Culture
- + Kinship
- + Law



- + Adequately representative of multi (skin) groups
- + Adequately represents tribal language groups
- + Dual control and power
- + Agreement is obtained
- + "Two heads" are better than one's
- + Everyone's issues are communicated
- + Balance is achieved

**Malabam Health Board**

**The Representative Team**

- + "All-Stars" Model
- + Culture
- + Kinship
- + Law

**GOAL!**

**IMPROVED ABORIGINAL HEALTH**

- Health Clinic
- Top End Mental Health
- Allied Health Services
- Maningrida Local Government Council
- Bawinanga Aboriginal Corporation
- School
- Maningrida Progress Association
- Police
- Danila Dilba
- + Another 'two way' support; sponsors are required to support the team in return for the team doing the 'right thing' by the sponsors and acknowledging the need for support.



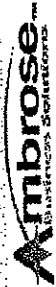
**The Boundary - Our People's Health Needs**

- Old People
- Young People
- Men
- Women
- + This efforts of the team mean a lot to the supporters
- + 'Two way' support required; harder to achieve goal without supporters and supporters more likely to support when goal achieved.

**Commonwealth Government Northern Territory Government**

- + Administers the ground rules
- + Gives feedback
- + Supports fair achievement of 'goal'

- JET services
- Accounting Service Providers
- Human Resource Management Consultant
- Legal consultant
- + Help team by providing 'extra' support and training where required



Recommended Action	Priority
<p>1.1 The current management structure needs to be reviewed and improved. The need for a CEO should be reassessed in light of the reviews finding that there is an urgent need for a coaching and mentoring approach to the capacity and capability building required by the Board</p>	<b>2</b>
<p>1.2 The Board structure itself needs to be reviewed and improved. The 'two heads' format requested by the current members has merit and needs to be fully investigated. An AGM is required to elect representatives that are assessed individually; as to strengths and areas of interest and then assigned 'health portfolios.</p>	<b>1</b>
<p>1.3 The Strategic plan, Business plan and Action list to needs be communicated to the Board members and agreed. The strategic plan should also encompass succession planning and the merit of a Junior Health Board, utilising the strong sporting teams in Maningrida, discussed with members.</p>	<b>8</b>
<p>1.4 Once understood and agreed by the Board the strategic plan should be communicated to all funding bodies and stakeholders with a view to gaining approval and support.</p>	<b>9</b>
<p>1.5 It is highly recommended that the Board formally builds communication lines with other Maningrida organisations. This could be done by representatives of the Board attending other organisations meetings, along with the Board's coach, to facilitate 'two way' communication.</p>	<b>10</b>
<p>1.6 Imperative to the development of the Board is that training programs are continued to ensure the Boards capacity and capability is increased. 'Walk before run' projects, such as <i>old people's day</i> and <i>nutrition day</i> should simultaneously be decided upon and implemented by the Board with community consultation.</p>	<b>11</b>
<p>1.7 An 'outcome focused' culture <i>must</i> be established with respect to the Malabam Health Board. With due regard to the politic, the structure of the Board should facilitate effective decisions which result in the economic and efficient delivery of outcomes. The key element of this requirement are;</p> <ol style="list-style-type: none"> <li>1. a representative board;</li> <li>2. an effective structure that shares responsibility and control;</li> <li>3. an effective 'coach' who; motivates, facilitates training and helps drive the bureaucratic process;</li> <li>4. effective capacity and capability training;</li> <li>5. support from funding bodies; and local organisations.</li> </ol>	<b>3</b>

Recommended Action	Priority
<p>2.1 Written policies and procedures of the MHB should be reviewed and improvements made where required ensuring that they support effective financial control. The Board should be involved in this process to ensure that they have understanding and 'buy in' to all policies and procedures. It is further recommended that the process's intent is to create Board ownership and control over its financial activities and that they are outcome focused.</p>	5
<p>2.2 Improvements are required to be made to the internal control system of the Board. The current system should be re-engineered to limit the over reliance on the accounting service provider and CEO function. Control over the fundee's financial activities should be devolved to the Board. The current system should be re-engineered within limits of 'cost-benefit' especially in the areas of; procurement; payment authorisation and financial activities relating to funding purpose.</p>	4
<p>3.1 It is imperative that the Board ensures that the principal purpose of funding agreement is understood and adhered to at all time.</p>	13
<p>4.1 Recommendations with respect to the re-engineering of the internal control system, increased focus on funding purpose and training should be enacted to ensure that the financial records of the MHB have integrity.</p>	14
<p>5.1 Procurement procedures are reviewed and re-engineered to ensure that all purchases of the MHB;</p> <ul style="list-style-type: none"> <li>• Are in budget;</li> <li>• Meet grant purpose; and</li> <li>• Authorised</li> </ul>	12
<p>5.2 Controls over assets should be reviewed and strengthened immediately to safeguard the assets of the Board and to ensure they are used for the required purpose.</p>	7
<p>5.3 A full asset identification process should be undertaken and the asset register updated to ensure all assets of the MHB are brought to account. In future all capital purchases should be recorded on the asset register. Asset location should be noted on the asset register to assist in control and safeguarding of MHB assets</p>	15
<p>6.1 It is recommended that intensive and consistent training, coaching and mentoring should continue to be supported by stakeholders of the Board. This will assist in ensuring the Board has the capabilities and capacity to positively impact the health of the people of the Maningrida region.</p>	6