

Western Australia → Newman, Broome, Esperance, Exmouth, Port Hedland, Narrogin, Shark Bay, Gnowangerup, Carnarvon, Kununurra, Karratha, Northam, Mount Magnet, Halls Creek, Fitzroy Crossing, Christmas Island, Cocos Keeling Islands | Queensland → Cairns, Mount Isa, Toowoomba, Longreach, Rockhampton, Cloncurry, Tambo, Blackall, Pormpuraau, Thursday Island, Blackbutt, Thargomindah, Miles, Bowen, Cooktown, Charters Towers, Hughenden, Dysart, Barcaldine | Northern Territory → Nhulunbuy, Alice Springs, Darwin, Tennant Creek, Katherine, Warakurna, Ali Curung, Haasts Bluff, Tiitjikala, Dhalinbuy, Nauiyu  
Victoria → Melbourne, Harrow, Lorne, Bendigo, Colac, Heywood, Nealesville, Omeo, Edenhope  
South Australia → Adelaide, Port Augusta, Berri, Mount Gambier, Coober Pedy, Ceduna | New South Wales → Tamworth, Dubbo, Byron Bay, Broken Hill, Bathurst, Coomealla, Lennox Head | Tasmania → Hobart, Cape Barren Island, Norfolk Island, Rosebery, Queenstown, St Marys, St Helens

## ANNUAL REPORT 2017-2018

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

THE PEAK PROFESSIONAL  
BODY FOR THE REMOTE AND  
ISOLATED HEALTH WORKFORCE

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



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CRANAplus acknowledges the Aboriginal and Torres Strait Islander peoples as the traditional custodians of Australia, many of whom live in remote areas, and pays its respect to their Elders both past and present. CRANAplus contributes significantly to improving the health of Aboriginal and Torres Strait Islander peoples by building the strength of the remote and isolated health workforce.

# FROM OUR PATRON



Photo: Marcus Mok

I am proud once again to send a message of admiration and support to the officers, members and supporters of CRANAplus.

In a few weeks I will be setting out to attend the CRANAplus annual conference, taking place in Cairns, Queensland. This was the venue for the first encounter I had with CRANAplus nearly a decade ago. I am proud to serve as Patron of such a wonderful and valuable organisation, with far flung influence for good.

Over the year past, CRANAplus has seen continuity, progress and change:

- Paul Stephenson remains Chair. He continues to offer fine leadership for which I thank him and praise him;
- The organisation has identified a need for improved mental health services for the remote health workforce. It will be doing this through the development of a Mental Health Emergency course and in other ways. Mental health needs have long been neglected in Australia, partly as a consequence of our macho attitudes. I am glad that CRANAplus is giving leadership on this issue;
- CRANAplus is also directing a number of its efforts to the broadening of membership engagement with global healthcare in our region and the world;
- Drawing on 36 years of experience that goes behind CRANAplus, it is identifying the place that the organisation should hold in the broader field of global health; and
- Time and energy have been spent developing safety and security resources for the remote workforce that undertakes such heroic work in regional, rural and remote areas of Australia.

I am delighted at the increasing focus of CRANAplus on global healthcare issues. This was a theme I adopted in my first talk nearly a decade ago. I urged an attitude of thinking globally and acting locally. We should share our experience in Australia with colleagues beyond our shores. Especially, we should do this in our region of Asia and the Pacific where our experience could give leadership and example.

CRANAplus is thinking globally and acting locally, providing leadership and example on healthcare issues

One of my tasks over the last decade has been working with the United Nations Development Programme on the Global Commission on HIV and the Law and on the UN Secretary-General's High Level Panel on Access to Essential Medicines.

The response to HIV (and more recently to HCV – Hepatitis C) is a subject where Australians have experiences and successes to share. But how many Australians have heard of the Sustainable Development Goals? These were adopted by the UN General Assembly in 2015. They commit the international community of nations to 17 important goals that are to be achieved by 2030. One of those goals is access to essential healthcare. This is stated in SDG3. It is a worthy and urgent goal. We must try to attain it for ourselves in Australia. We must also try, by assistance and example, to spread the message to our neighbours and the world.

To all my friends who are participants in the CRANAplus adventure, I send felicitations and best wishes.

**The Hon. Michael Kirby** AC CMG  
Retired Justice of the High Court of Australia  
Patron of CRANAplus



Ensuring that people everywhere have access to essential healthcare, whatever their birthplace, nationality, age or ethnicity

## CEO'S REPORT



We're facilitating and promoting the development and delivery of safe, high-quality healthcare to remote and isolated areas of Australia.

In 1982 one hundred and thirty Remote Area Nurses trekked to Alice Springs because they knew something had to be done about the poor health provision in the bush and the conditions under which they were expected to provide care. Fast forward thirty-six years and the hard work, commitment, dogged determination and resilience of the hundreds of people engaged with CRANAplus since its inception should be proud of their achievements, even though we continue to push for the same simple goals.

As an organisation we should be proud of our clarity of mission and our ability to embrace the diversity that can so often divide. To be in a position to wield purposeful influence to achieve our objectives, we are driven to build our capacity. We achieve this through the business functions of CRANAplus that generate income, that gets re-invested into promoting the development and delivery of safe, high quality healthcare to remote and isolated areas of Australia.

As you can see in this annual report, CRANAplus continues to deliver excellence in remote education where it's needed, highly professional support and psychological services and have propelled change through our professional services. Much of this could not be achieved without the generous financial support of the Commonwealth Government of Australia and their commitment to ensure our services remain accessible, affordable and of the highest possible quality.

Our volunteers, contractors and staff are the backbone of the organisation. Their passion, expertise and credibility within the industry are second to none, I thank them for continuing to give so much of themselves, making CRANAplus such an enjoyable place to work.

The CRANAplus board of Directors, so adeptly led by our Chairperson Mr Paul Stephenson, volunteer many of their weekends along with their skills, knowledge and expertise to govern. On behalf of all of the members, staff and beneficiaries of CRANAplus I respectfully thank each and every one of you.

Primarily CRANAplus belongs to its members and I applaud you for sustaining the development of remote and isolated health through your membership with CRANAplus. As our membership continues to increase, both from individuals and organisations, so does our voice and our ability to passionately advocate for improvements in the health and wellbeing of remote and Isolated Australians.



**Christopher Cliffe**  
Chief Executive Officer  
CRANAplus



## CHAIR'S REPORT



During the last 12 months, CRANaplus has continued to provide excellent education programs, support services and representation of the remote workforce at a national level. As you will see in this annual report we exceeded our goals in providing high quality first rate education workshops all across remote Australia; as well as those workshops provided through our Bush Support Services in mindfulness and resilience building.

CRANaplus membership has seen unprecedented growth during the last 12 months, both of individuals and organisations. As our membership increases so does our voice and our collective ability to passionately advocate for improvements in the health and wellbeing of remote and isolated Australians. Your contribution to this is greatly appreciated.

I would like to thank our hardworking Board members for their time and the invaluable expertise they bring to the organisation. Board activity for the 12 months has included:

- ensuring that the most geographically isolated Australians have access to high quality professional health care services;
- progressing our strategic plan supporting the health workforce to contribute to improved health outcomes among people living in remote areas of Australia.
- a refresh and update of the 2012 joint venture agreement with Flinders University, CARPA & CAAC for the continued Remote Primary Health Care Manuals collaborative, publication and distribution – to support clinical practice for remote practitioners

CRANaplus is continuing to deliver high quality education programs, support services, and representation to Australia's remote and isolated health workforce.

The Board would like to convey our sincere thanks to all staff for their contributions to the work of CRANaplus. Christopher Cliffe, our Chief Executive Officer and Steven Dangaard our Chief Finance Officer for the skilful management of the business.

Thanks also to our unit directors and our highly skilled and dedicated staff who collectively, with the help of our valued volunteers, continue to strive for excellence in remote and isolated health.

CRANaplus Staff are based throughout Australia in every state and territory. As part of their role, many staff travel frequently and long distance to ensure that our programs are accessible to those living in some of the most remote areas of Australia. They do so while demonstrating great commitment to the delivery of quality services and training where there is the greatest need.

In conclusion, I sincerely thank all the CRANaplus members, who are individuals and organisations with the vision, passion and determination to influence and be part of the bigger remote picture. Your contributions continue to have the greatest impact.

**Paul Stephenson**  
Chair  
CRANaplus

Actively providing education, support and advocacy to ensure safe and secure environments for remote and isolated health workers



BOARD OF DIRECTORS



**Paul Stephenson**  
Chair



**Fiona Wake**  
Deputy Chair



**Dr Nicholas Williams**  
Secretary



**John Ryan**  
Board Appointed Member  
Treasurer



**John Wright**  
Board Member



**Lynette Byers**  
Board Member



**Claire**  
Boardman  
Board Member



**Belinda Gibb**  
Board Appointed Member  
Chair of Governance Committee



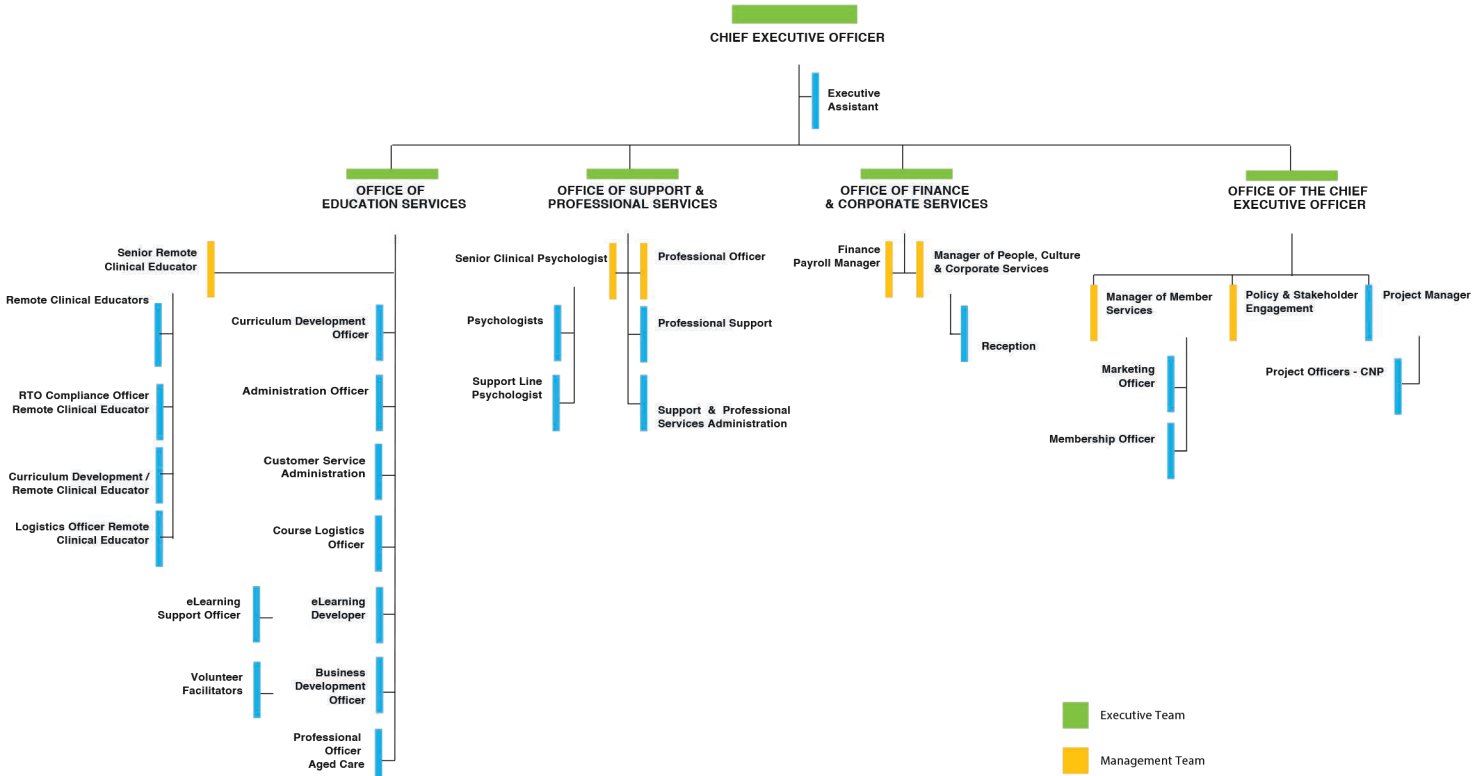
**Christopher Cliffe**  
Chief Executive Officer



**Steven Dangaard**  
Chief Finance Officer

ABOUT US

Current Organisational Structure



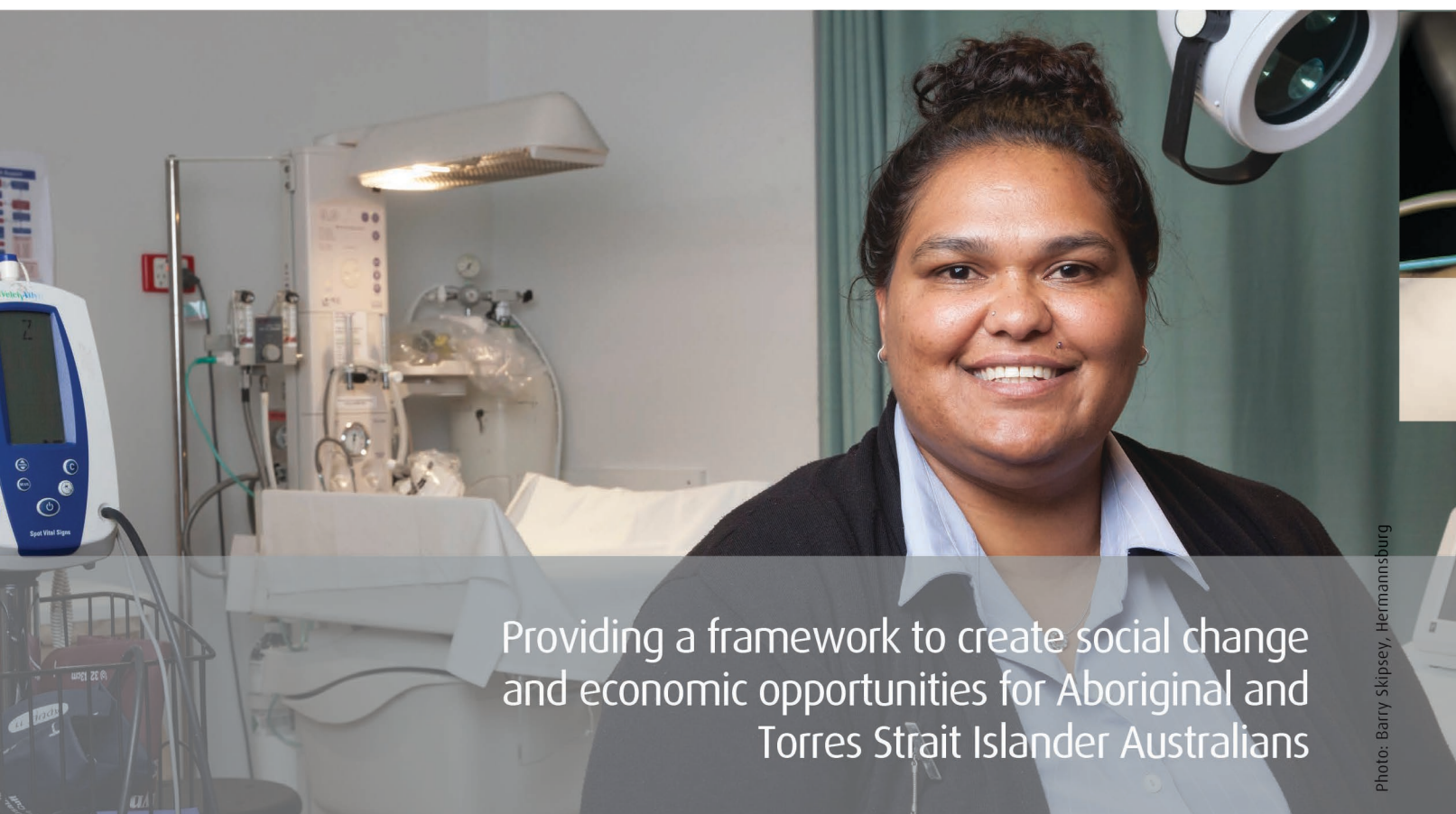


Strategic Directions





## INNOVATE RECONCILIATION ACTION PLAN (RAP)



Providing a framework to create social change and economic opportunities for Aboriginal and Torres Strait Islander Australians

Photo: Barry Skipsey, Hermannsburg

CRANApplus continues to strive in its vision for reconciliation in contributing to improving the health and well-being of Aboriginal and Torres Strait Islander peoples who live in remote and rural Australia and is proud to launch its second Reconciliation Action Plan which has been endorsed by Reconciliation Australia and takes us to 2020.

We have come a long way since 2014, where CRANApplus commissioned an external review of its existing programs to assess their impact for the Aboriginal and Torres Strait Islander remote health workforce, and identified the need for a RAP, supported by the Board of Directors, Executives and staff.

A proposal was then approved to resource the development of the first CRANApplus RAP, as part of the 2014-15 organisational business plan, along with establishing the RAP Working Group in November 2014. The RAP Working Group included a broad cross representation of CRANApplus staff, Board members and other stakeholders who volunteered their time, passion and energy, with the first CRANApplus RAP launched at our annual Conference, in Alice Springs in 2015.

A number of people in the RAP Working Group, continue to volunteer their time, with the addition of some new members including an Aboriginal and Torres Strait Island Board Member and an Employee, all of whom share CRANApplus' core values of Integrity, Social Justice, Respect, Inclusiveness and Excellence in all we do.

By working in consultation with Aboriginal and Torres Strait Islander communities, organisations and leaders, our CRANApplus RAP continues to support us to embed cultural change within the whole organisation, in the way we live our core values, undertake our day-to-day work practices, build relationships, create sustainable opportunities, respect culture and improve the life expectancy for Aboriginal and Torres Strait Islander peoples.

CRANApplus is excited to progress the Reconciliation Action Plan, with much to do, leading into 2020.

**Karen Clarke, Co-Chair - RAP Working Group**

## EDUCATION SERVICES



**Sue Crocker**

Director  
Education Services

The CRANApplus Education Team has grown significantly during the 2017/18 year now comprising of the following full time equivalent staff members: 7 Remote Clinical Educators, 1 Curriculum and 1 Business Development Officer, 1 eLearning Developer, 1 eRemote Administrator and 1 Aged Care Project Officer. We also have over 120 Facilitators who give their time and expertise voluntarily to ensure CRANApplus course participants receive the most contemporary clinical knowledge from practicing clinicians.

The Remote Clinical Educators have continued to travel the length and breadth of Australia ensuring our courses are accessible to the remote area health workforce with 100 face to face courses delivered throughout 2017/18. The Educators continue to successfully adapt to meet the logistical challenges of delivering courses in a wide variety of venues to ensure accessibility. This is no easy task requiring the movement across the country of our teams and movement of tonnes of educational equipment.

Our ongoing goal is to ensure quality of our courses is maintained and enhanced with an approach to education that is contemporary. To achieve this we are utilising evidence based teaching and learning strategies in the review, design and development of existing and new courses. Over the next 12 months you will see our courses transition from a traditional approach to one that embraces action-learning and problem solving while at all times contextualised for the remote and isolated workforce. You will also see a more rigorous evaluation process built into our courses to help inform what you, the learner, need to ensure we continue to meet the needs of industry and the

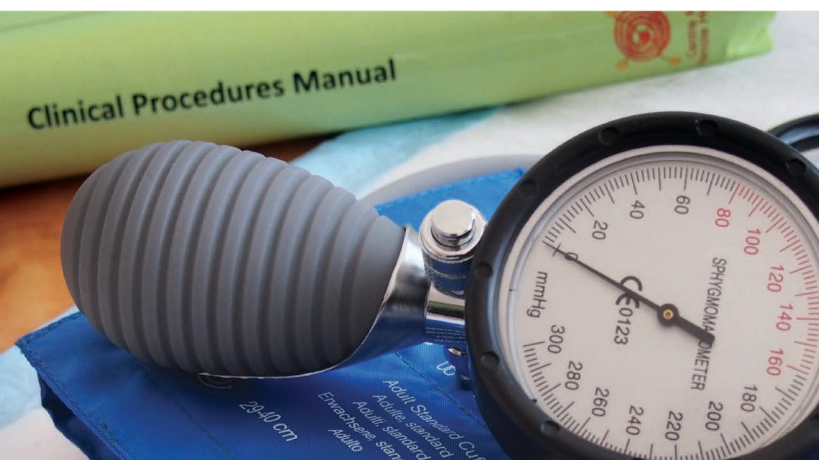
remote and isolated health workforce. The Curriculum Development and eLearning team have been working closely with the Remote Clinical Educators to develop new courses and review and update existing courses including Midwifery Up Skilling, Advanced Remote Emergency Care, Advanced Life Support and Triage Courses. Our eRemote Modules: Basic and Advanced Life Support underwent a substantial review and development utilising new eLearning software. Work has commenced on our eRemote suite of courses due to be released later in 2018.

2017/18 also saw the development of 2 new courses: Mental Health Emergencies (MHE) and Stay Safe and Secure (SSS) both with contemporary on-line learning modules with a 1 day face to face workshop where participants consolidate the theory into practice.

The MHE course is designed to enable remote health staff to develop the knowledge and skills necessary to respond with confidence when encountering acute mental health issues, substance affected patients and episodes of acute distress as a result of traumatic events such as attempted/completed suicide. The SSS course is designed to enable the remote health staff to develop the knowledge and skills necessary to prevent and manage with confidence incidences that threaten personal safety and security in a remote health setting with a focus on aggression and violence. To learn more about these courses go the CRANApplus Education Page SSS Course and MHE Course. Check out our new look course video introduction on the MHE Course Page.



## EDUCATION SERVICES



We also had 4 significant projects

1. CRANaplus with funding from the North Queensland Primary Health Network worked closely with residential aged care facilities (RACF) and community-based organisations on the Atherton Tablelands to improve competencies of RACF staff to deliver comprehensive aged care to reduce the need for after hours care. An eRemote Module on Diversity in Aged Care was developed and is available through the eRemote platform.
2. Recognising the need for aged care education to the remote workforce CRANaplus undertook a needs analysis to determine future education products. The areas of palliative care, dementia, ageing in remote areas and geriatric nursing in general were identified as future areas of educational need.
3. CRANaplus worked closely with the Rural Doctors Association of Australia, Australian College of Rural and Remote Medicine and National Rural Health Alliance to support rural and remote clinicians and their communities to adapt to the rescheduling of codeine. The project developed and delivered resources for both community and health services and delivered 3 webinars to assist clinicians with prescribing of non-codeine related pain relief. These webinars are freely available and can be found at [www.acrrm.org.au/rural-and-remote-medicine-resources/codeine-rescheduling](http://www.acrrm.org.au/rural-and-remote-medicine-resources/codeine-rescheduling)
4. CRANaplus is part of a working group with Australasian Society for HIV Medicine (ASHM) to develop an eLearning module on Stigma and Discrimination and will be a free module available on the CRANaplus eRemote platform.

CRANaplus continues to be a Registered Training Organisation (RTO) and this year successfully gained accreditation for another 7 years to 2025. The RTO structure provides the quality mechanisms that is embedded across our systems and processes to ensure the highest level of educational rigor and participant support. Our courses

continue to meet the accreditation requirements of the Australian College of Midwives, Australian College of Rural and Remote Medicine and Royal Australian College of General Practitioners.

Some significant work has been undertaken with our IT and learning management system (eRemote) that you will start to see and experience. The eLearning Developer and eRemote Administrator have been pivotal to these changes and updates. Participants can now access their certificates electronically through the dashboard negating the need for postage and wait times associated with the postal system. It also means that certificates are available when the consumer wants them easily through their dashboard. The eLearning team and curriculum development team have worked closely to ensure the best possible software programs are utilised for education purposes that gives users content that is engaging, motivating and scaffolded for easy access and retention these include: Articulate Storyline, Articulate Rise, FlipHTML5, Moodle, Power Point and VideoScribe.

I believe it is always important to stop and reflect on where we have come from, it was 21 years ago when the first Remote Emergency Care Course was developed and delivered by CRANaplus. During this time, we have achieved significant growth and change; we have a team of 15, are an RTO with over 20 blended and 40 eRemote courses.

I am proud and enthused to lead this highly motivated team of skilled professionals into the future and be a part of the growth that is planned across our courses and systems. These changes will undoubtedly augment the learning experience for our members and consumers. The world of education is forever changing and to remain the leaders in remote and isolated health professional education, we need to embrace and implement new education and teaching theories, methodologies and technologies in our courses. The future is exciting.

## PROFESSIONAL SERVICES



### 2017-18 HIGHLIGHTS

#### Rural Nursing Project

Recognising that there has been a void in professional representation within the health industry for rural nursing CRANaplus commissioned the twelve-month internally funded Rural Nursing Project, with the aim to identify opportunities for CRANaplus to be more relevant for Nurses working in rural context of practice. From the outset the project was primarily targeted to nurses who worked in health services located in the "outer regional" areas. Judy Whitehead was the CRANaplus Rural project professional officer for the period of the project.

The project outputs comprised:

- a Literature review on rural nursing practice, recruitment, retention, professional pathways
- consultation process with Rural Nurses
- creation of an Expert Advisory Group
- Review of existing CRANaplus Resources to accommodate Rural Nursing
- a marketing and engagement strategy
- identification of and subsequent development and delivery of Rural Nursing professional development activity



**Geri Malone**

Director  
Professional  
Services

CRANAPLUS Professional Services aims to provide information to members and the broader remote health workforce on issues that impact on professional practice. This extends from individuals to informing Government and non-Government, Organisations and Agencies on the context of remote and isolated practice, pursuing opportunities to inform of the unique context of practice and impacts on consumers and workforce.



## PROFESSIONAL SERVICES



The combination of activities, the literature review, survey and face to face visits undertaken to gain valid information and data regarding the challenges and issues associated with rural nursing was vital to legitimately completing this project. The Face-to face engagement during the consultation visits was extremely important on a number of levels. Specifically:

- increasing the visibility of CRANApplus, to the Rural sector
- promoting the resources, programs and professional gains that CRANApplus could already offer Rural Nurses
- The genuine engagement in seeking their input was extremely well received and demonstrated an interest and acknowledgment of the unique role and contribution of Rural Nurses to rural health

Many of the issues raised from the engagement are beyond the scope of this project, however the general nature of the information received, further equips CRANApplus with the ability to inform Government and other stakeholders of the particular issues facing Nurses in the rural sector. At the same time CRANApplus is able to leverage off its remote experience to support rural nurses.

### Submissions

Senate Community Affairs References Committee Inquiry: The accessibility and quality of mental health services in rural and remote Australia.

Commonwealth Department of Health: National Strategic Approach to Maternity Services Consultation.

Nursing & Midwifery Board of Australia NMBA: Submission on the Registered nurse and midwife prescribing – NMBA Discussion paper.

Western Australia Health, Public Health Division: Supply of chronic disease medications by Registered Nurses in Aboriginal Medical Services.

CRANApplus Position Paper: Cultural Respect and Cultural Safety was finalised with input and endorsement from Congress of Aboriginal and Torres Strait Island Nurses and Midwives (CATSINaM).

### Certification of RAN Program

The formal launch was held at CRANApplus Broome Conference which resulted in a surge of activity on the CRM custom designed site /portal, as RAN's investigated the process. Since that time there has been a steady stream of applicant undertaking their self directed assessment against the nine professional Standards of remote Practice.

Applicants are supported through their application process by Marcia Hakendorf.

### Scholarships and Awards

CRANApplus continues to provide a range of Scholarships and Grants to members and non members, to access funds to assist in Continuous Professional Development activities and clinical placements.

### Gayle Woodford Scholarship

The second round of this scholarship, jointly sponsored by CRANApplus and the Centre for Remote Health attracted a competitive field of applicants, The 2017 scholarship was awarded to Emma Bugden, who will formally be recognised at the 2018 CRANApplus Conference. The scholarship is open

## PROFESSIONAL SERVICES



to registered nurses, Indigenous health practitioners, allied health practitioners and medical officers. Applicants must meet the entry requirements of the Graduate Certificate in Remote Health Practice offered through the Centre for Remote Health(FUSA). Working in remote practice is desirable.

The scholarship covers all course fees for the Graduate Certificate in Remote Health Practice. One scholarship will be awarded annually, for study to commence the following year.

### Nurses Memorial Fund South Australia Scholarship Scheme

The scholarship funds, generously donated by the South Australian Nurses Memorial Foundation provides funding for CRANApplus members to be subsidised to attend CRANApplus Courses and/or Conference. In 2017-18, 13 were awarded.

### Undergraduate Remote Clinical Placement scholarships

This popular scholarship remains over subscribed for the funds available and in 2017/2018, 11 were awarded from 49 applications.

We continuously seek more external sponsors for these scholarships to provide Undergraduate students supportive funding to undertake a remote or rural clinical placement

on 7 March. It was an ideal opportunity to highlight the issues facing consumers in remote areas accessing aged care services and challenges around workforce. CRANApplus had the opportunity to present to Senators Griff, Polley, Reynolds, Siewert and Smith.

### CRANApplus Conference Attendance Scheme

In 2017 CRANApplus provided 8 to attend the 35th 2017 Broome Conference "Future of Remote health and the Influence of Technology". Seven of those were specifically available to Aboriginal and Torres Strait Islander Applicants.



## AFTER HOURS AGED CARE PROJECT COMMUNITY NIGHT PATROL PROJECT



**Kristy Hill**

Project Manager  
Community Night Patrol  
Project

CRANaplus was contracted by the Department of the Prime Minister and Cabinet to develop a communications strategy and safety package to increase the safety of the Community Night Patrol (CNP) Workforce. This included undertaking consultations and capturing the safety concerns of the workforce from 81 Night Patrols operating within the Northern Territory and 6 communities in the South Australian Anangu Pitjantjatjara Yankunytjatjara (APY) lands.

The CNP workforce comprise of over 400 employees and the majority are local Aboriginal men and women who retain connection with country, family, language, lore and custom allowing them to maintain respect and cultural authority within their own communities. They are often first-responders to accidents, injuries, fights and deaths within the community, defuse volatile situations and manage many of their own family and community disputes without police intervention.

Key outcomes achieved in the first 12 months of the Working Safely in Community Patrol Project include:

- developing 5 modules of the Working Safely in Community Night Patrol eLearning course
- producing the 'Working Safely in Community Night Patrol Handbook'
- producing the Working Safely in Community Night Patrol Guidelines
- working with the Central Australian media Association (CAAMA) to produce 21 interviews with community night patrollers; and a short film promoting the Community Night patrol workforce and the need to keep them safe.



**Lisa Crouch**

Project Manager  
Aged Care Project

The CRANaplus After Hours Aged Care Project in the Atherton Tablelands has successfully improved competencies of Residential Aged Care Facility (RACF) staff to deliver comprehensive aged care. This collaborative project has strengthened existing relationships and referral pathways, facilitated new partnerships and improved links and networking between the RACF and their local GPs, hospitals, pharmacists and the palliative care community in both Atherton and Mareeba. The project has been refunded by the Northern Queensland Primary Health Network until June 2019 to extend its services to Port Douglas, Julatten and Mossman.

CRANaplus believes that success of after-hours primary care, particularly for vulnerable or at-risk groups, largely depends on tailored approaches that suit the local context and is reflective of local needs. CRANaplus also recognises that the aged care user cohort is becoming more diverse and these changes are placing increasing pressure on the workforce to have the specialised skills required to meet the increasing service needs. In response to this, the project has developed an eLearning resource addressing Diversity in Aged Care, available as a free resource on the CRANaplus website.

## BUSH SUPPORT SERVICES



**Colleen Niedermeyer**

Director  
Support Services

Bush Support Services, continued to provide excellent counselling and support services via telephone and the internet to rural and remote health workers, professionals and their families, seven days a week, on a 24-hour basis, through the Toll Free Support Line: 1800 805 391.

As BSS celebrates its 21st Anniversary, we are delighted to report that 1041 rural and remote health workers/practitioners (and some of their families) sought help and support from the BSS Toll Free 24hr Support Line.

Our dedicated team of 11 highly skilled and experienced psychologists spent a total of 797 hrs 27 min providing telephone counselling. Although all resources are available on line, the demand for hard copy material remained high with 45,439 informational/promotional items being distributed.

CRANaplus recognise the challenges of working remotely and offer unique and helpful resources that draw on a vast network and specialised knowledge. CRANaplus sees Bush Support Services as vital in retaining a healthy and resilient workforce in the remote sector and makes health worker support a priority.

Operating every day of the year on a 24-hr basis, BSS is a free, anonymous and confidential telephone (1800805391) counselling service for rural, remote and isolated health care professionals/workers and their families. The service is national and includes external territories as far afield as Christmas and The

Keeling Islands. Repeat callers can speak to the same psychologist on request.

The success of the Collaborating Engaging Connected Workplaces (CECW) Symposium delivered in the first part of 2017 in Darwin resulted in the roll-out of a new one-day psycho-therapeutic workshop. So far, these popular CECW workshops, which attracted very positive feedback, have since been conducted in Katherine, Armidale and Mt Isa. The Collaborating Engaging Connected Workplaces Toolbox is now available at [crana.org.au](http://crana.org.au).

In addition, BSS has delivered a number of workshops for the Hunter New England Health Service. Entitled "Helpful Conversations" the workshops are aimed at introducing basic counselling skills to a variety of multi cultural health professionals across all disciplines. Of note is the fact that there has been a significant number of Aboriginal participants and the workshops have been further developed in consultation, and presented in partnership, with a senior Aboriginal Health Consultant.

There has been increased networking across health disciplines as well as fresh interest in the form of presentations from national recruitment agencies who acknowledge the benefit and value of the provision of BSS information to employees prior to their rural or remote postings in hospitals and clinics nationwide. In addition presentations to health faculty students at tertiary institutions are increasing in demand as young people consider their future work options in health service delivery at a rural or remote level.



# MEMBERSHIP



Partnering with our corporate members and stakeholders we push for the advancement of our workforce, our workplaces and our industry. CRANaplus' new category of membership 'Mates of CRANaplus' describes a relationship of mutual benefit between entities that supports the behaviours, values, and activities of the other. Mates of CRANaplus formally acknowledges the links between CRANaplus and these organisations, businesses or consultancies.

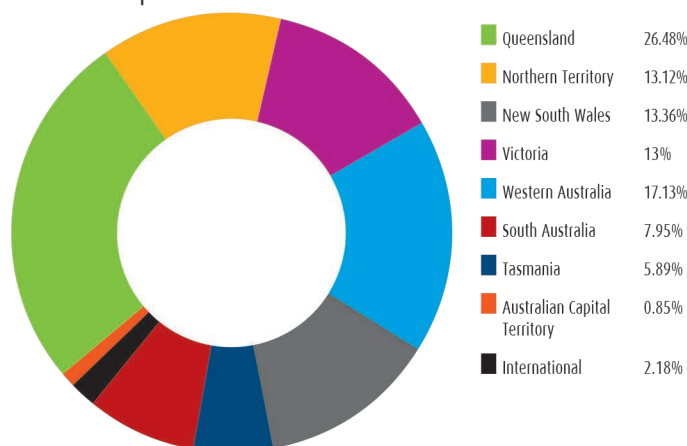
We provide expert advice on key issues involving remote health and facilitate networks of interest in key areas, fostering communication between all parties. We provide a platform for connection and sharing our expertise. We communicate and connect with our members and supporters through our widely read weekly e-newsletter and quarterly magazine, as well as social media. We provide organisations and employers the opportunity to reach a niche group of remote health professionals.

The CRANaplus website provides access to a wealth of information, and a gateway to our many services and resources.

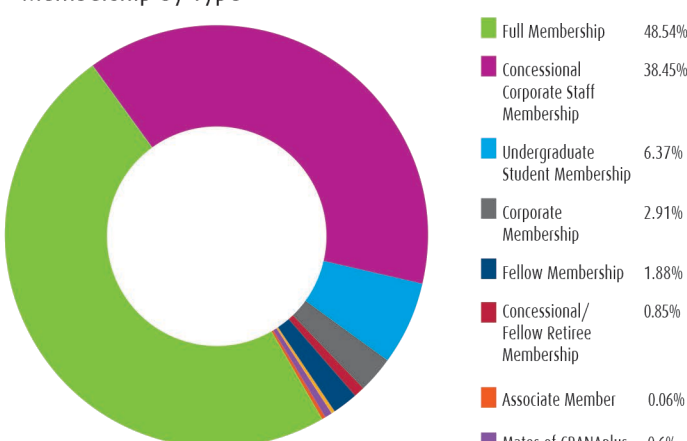
## Conference

The CRANaplus annual national conference brings together speakers and delegates from all over Australia. Our awards and fellowships recognise excellence in remote health practice and our scholarships and sponsorships encourage health students to experience remote practice. In many ways, CRANaplus is working to bond and unite the remote and isolated health workforce. The Aurora Award is the highest possible accolade within the remote and isolated health profession. Nominated by their peers, the recipient of this award is a leader in their field, who shows a commitment to quality, safety, and professionalism.

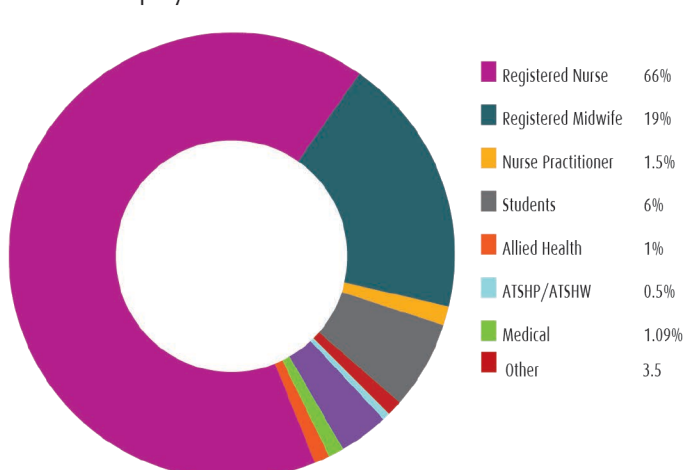
Membership



Membership by Type



Membership by Profession



# MEMBERSHIP

## Corporate Members



## CRANaplus Mates





## MEDIA AND PUBLICATIONS



CRANAplus utilises many forms of media and publications to stay in touch and help build that feeling of connectedness.

- Our weekly newsletter is emailed to over 8,000 contacts worldwide each week.
- Our quarterly magazine shares stories, information, and photos.
- Follow us on Facebook and Twitter for up-to-date news and information.
- As always, you can get the year in review through our Annual Reports.

**Keeping our members up-to-date and connected throughout the year with our various publications.**

## FINANCIAL REPORT 2017-2018



**Steven Dangaard**  
Chief Finance Officer

The financial position of CRANAplus remains healthy, with the net assets growing to more than \$3.2 million.

This year the 2018 financial statements were prepared and audited by BDO. A full set of the Financial Statements is now available to all members, and can be collected at the Annual General Meeting or alternatively a copy can be requested by emailing [cfo@crana.org.au](mailto:cfo@crana.org.au).

It is with great pleasure that I announce that this year's audit report was again completed with no qualifications. The financial position of the Organisation remains healthy, with net assets growing to just over \$3.2 million while achieving a net annual profit of \$18,547.

Over the next 12 months CRANAplus will be planning to reinvest a large portion of its accumulated profits into tangible assets to help strengthen its ability to deliver on its three-year strategic plan.

CRANAplus has also secured another core three-year funding agreement with our main partner the Department of Health. Moving into the next financial year CRANAplus now has the important task of continuing to work with the Department of Health in delivering all the key outcomes established in the new agreement. This funding agreement is a critical component to the Organisation's ongoing operations, and will enable CRANAplus to continue to provide vital products and services to the remote health workforce over the next three-years.



# FINANCIAL REPORT 2017-2018

## Statement of Profit or Loss and Other Comprehensive Income

For the year ended 30 June 2018

	2017 \$	2018 \$
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<b>Revenue and Other Income</b>		
Grant Revenue	4,344,822	4,706,292
Other Income	1,708,189	2,027,483
	<b>6,053,011</b>	<b>6,733,775</b>

<b>Expenditure</b>		
Cost of Goods Sold	-	-
Employee Costs	(3,150,933)	(3,410,511)
Depreciation	(96,040)	(85,318)
Amortisation	(149,002)	(215,004)
Conference Costs	(149,543)	(125,189)
Consultants and Subcontractors Fees	(292,960)	(423,537)
Course Costs, Catering and Facilitators	(142,417)	(246,331)
Donations	(41,072)	(39,767)
Interest Expense	(13,120)	(11,488)
IT Costs	(272,060)	(331,247)
Postage, Printing and Stationery	(371,716)	(339,659)
Rent and Utilities	(114,033)	(166,107)
Travel and Accommodation	(650,866)	(652,284)
Obsolete Stock Write Off	(36,565)	-
Loss on Disposal of Assets	(32,077)	(6,999)
Other Expenses	(457,541)	(661,787)
	<b>(5,969,945)</b>	<b>(6,715,228)</b>

<b>PROFIT BEFORE INCOME TAX EXPENSE</b>	<b>83,066</b>	<b>18,547</b>
Income Tax Expense	-	-
<b>PROFIT AFTER INCOME TAX EXPENSE</b>	<b>83,066</b>	<b>18,547</b>

<b>Other Comprehensive Income</b> <i>Items that will not be reclassified to profit or loss</i>		
Increase in Asset Revaluation Reserve	50,000	-
<b>TOTAL COMPREHENSIVE INCOME</b>	<b>133,066</b>	<b>18,547</b>

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