

November 2018 Clinical Senate: Aboriginal health and wellbeing is everybody's business: our collective roles for improvement

Recommendations endorsed by Director General in April 2019

WA Health Actions to be reported back on by October 2020

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Response to the recommendations

An important aspect for reporting activity addressing the recommendations is identifying the overall status (level of implementation) for activity. This is a required field. Please use the table below to select the most appropriate status level for each recommendation.

Table 1: Overall status of the recommendation at last update	
Level of implementation	Outcomes that may have been achieved
Discontinued	The recommendation has been discontinued. Please provide further information in the 'Comments' section.
Level 1: No/little progress	Outcomes include: Components to deliver recommendations may have commenced (e.g. the establishments of a governance structure and/or scoping of a plan) but the project has not progressed further.
Level 2: Partial implementation	Outcomes include: Governance has been established and formal plans have been endorsed. Change has commenced and/or resources have been allocated (recruitment or training of personnel, development of procurement procedures etc.)
Level 3: Substantial implementation	Outcomes include: Processes and/or procedures to deliver the recommendation have been established and the timetable for full implementation is almost complete and/or milestones have been achieved.
Level 4: Full implementation	Outcome: The recommendation is fully implemented.

Recommendation	WA Health Actions	Responsible office	Start	Expected end	Progress to date	Next steps	Current status
<p>Endorsed</p> <p>1: Enhance the existing mandatory cultural awareness program to explore and address systemic bias and challenge racism.</p> <p>The delivery method must be multi-modal, including face-to-face and online approaches, and focus on providing clinicians and staff with dedicated time and space to safely debrief and yarn on their experiences and cultural reflections in providing health care to Aboriginal people.</p>	Development of a new Aboriginal Cultural eLearning (ACeL) course that explores and addresses systemic bias and challenges racism.	AHPD	January 2019	August 2020	The course has been completed and is awaiting deployment on the whole of health system Learning Management System (LMS).	Launch	Level 4 – Full Implementation
	Launch of the ACeL on the new WA health systemwide LMS.	HSS and AHPD	September 2020	April 2021	HSS is currently finalising a procurement agreement to establish a whole of health system LMS. It is anticipated that the new ACeL course will be hosted on this LMS for the WA health system's workforce. AHPD are liaising closely with HSS to ensure capability to support the course on the new LMS.	AHPD is dependent on timelines from HSS on the selection of provider and implementation of a new LMS. AHPD will work with HSS when the LMS is in place to launch the new course.	Level 2 – Partial Implementation

<p>Endorsed</p> <p>2. In caring for Aboriginal patients, use multidisciplinary teams that include members of the Aboriginal workforce to better coordinate the patient journey. Encourage increased use of technology (such as telehealth) to increase patient communication and understanding and to minimise the need for patients to move 'off country'.</p>	<ul style="list-style-type: none"> Development & Implementation of <i>WA Country Health Service (WACHS) Aboriginal Health Strategy 2019-24</i>, to improve health outcomes through provision of quality, timely and culturally appropriate safe services. 	Aboriginal Health Strategy	2019	2019	Completed	Monitor compliance & report back to DoH.	<i>Substantial implementation.</i> First round of reporting completed. Second round of reporting currently in process.
	<ul style="list-style-type: none"> Continue to procure 13 projects, via 5 MOUs with HSPs and the Mental Health Commission and 8 Regional Service Level Agreements with WACHS regions; and 47 Service Level Agreements with non-government service providers. Programs provide culturally appropriate health care, patient transport, multi-disciplinary care planning, development of care pathways and partnership working. 	Aboriginal Health Strategy & Procurement and Contract Management	2018	2021	Transitioning to newly evaluated Strengthening Aboriginal Health Programs, which includes reviewing programs outcomes and content.	Evaluate Monitor compliance and reporting.	<i>Substantial implementation.</i> On-going process of procurement and program management.
	<ul style="list-style-type: none"> Recruitment of Regional Aboriginal Health Consultants across all WACHS. 	Regions	2018	2019	Recruited in six of seven regions	Conduct recruitment process	<i>Substantial implementation.</i> Commencing recruitment process for 7 th region
	<ul style="list-style-type: none"> Expand the delivery of culturally appropriate transport, liaison and coordination service for Aboriginal people travelling to Perth from rural and remote Western Australia to receive specialist medical treatment. 	Aboriginal Health Strategy	2019	2021	Completed recruitment of additional Aboriginal drivers and Aboriginal Health Workers. Expanded operational hours.	Monitor service delivery	<i>Full implementation.</i> Providing on-going service to patients
	<ul style="list-style-type: none"> Manage and operate the Elizabeth Hansen Autumn Centre (EHAC) facility, ensuring continuation of a comprehensive and culturally secure accommodation, transport and support services, including the introduction of a Video Conferencing (VC) facility for regional Aboriginal people and their carers to contact family back on country, whilst residing in Perth for medical appointments. 	Aboriginal Health Strategy	2019	2021	Facility operational.	Commence long term intention to transition facility to an Aboriginal community-controlled organisation service provider.	<i>Substantial Implementation.</i> Commenced procurement process to transition out.
	<ul style="list-style-type: none"> Aboriginal Health Workers. 	System wide			Continuing to grow the number of Aboriginal health workers across WACHS is an ongoing priority, including Aboriginal Liaison Officers, Aboriginal Health Workers, and Aboriginal Mental Health Workers. Aboriginal health workers work in multidisciplinary teams across the system to improve the patient journey.	Ongoing	<i>Substantial Implementation.</i>
	<ul style="list-style-type: none"> Development and ongoing implementation of Mary G telehealth awareness campaign – targeting remote Aboriginal communities to support engagement with telehealth. 	Innovation and Development	2019	2021	Campaign launched in 2019 with targeted re-launch scheduled for Telehealth Awareness Week 2020 (19 – 23 Oct 2020).	Evaluate campaign reach and impact.	<i>Substantial implementation.</i> Planning of re-launch is underway.

	<ul style="list-style-type: none"> Partnership with NHMRC “healing right way” - integrating telehealth in Aboriginal Brain Injury Coordinator research model for regional patients supporting in-home telehealth (access to rehabilitation care closer to home) for Aboriginal clients following stroke and brain injury. Targeted clinical telehealth service development in partnership with Aboriginal communities e.g. Implementation of a TeleEarNoseThroat (ENT) (Kimberley) and TeleRenal (Pilbara and Kimberley) Model of Care (MOC). Implementation of TeleChemotherapy service with support from specialists in Perth via telehealth for low-risk cancer treatments. 	Innovation and Development	2019	2020	Workforce training provided and ongoing identification of suitable patients for trial	Monitor service uptake.	<i>Full implementation.</i>
		Innovation and Development	2019	2020	Transitioned Implementation of Tele-ENT and Tele-Renal MOCs into BAU within respective regions to provide ongoing services to remote Aboriginal communities.	Finalise evaluation reports along with recommendations for scalability.	<i>Substantial implementation.</i> Evaluation reporting underway.
		Innovation and Development	2019	2020	Pilbara (Karratha) TeleChemotherapy service launched September 2019 & service expanded to the Kimberley (Broome) and Wheatbelt (Narrogin) in April 2020.	Finalise evaluation reports along with recommendations for scalability.	<i>Substantial implementation.</i> Evaluation reporting underway.
<p>Endorsed</p> <p>4. Define entry career pathways within the health system by:</p> <ul style="list-style-type: none"> establishing Aboriginal cadetship pathways in all Health Services to give Aboriginal students work experience in health while completing their studies establishing Aboriginal Graduate Officer 50(d) positions linked to an offer of employment at the completion of the program. 	<p>DoH established the systemwide Aboriginal Cadetship program in 2018, with the first intake in 2019.</p> <p>Established two quarantined positions within the Graduate Development Program (GDP) – corporate stream.</p> <p>Established one Public and Aboriginal Health Division Aboriginal Graduate position.</p>	Department of Health and Health Service Providers	2019		<p>Established the Aboriginal cadetship program with HSP stakeholders.</p> <p>Ongoing commitment of two quarantined positions within the GDP (corporate stream).</p> <p>Applied section 51 of the Equal Opportunity Act (1984) WA to all streams of the GDP program; finance, data and ICT.</p>	DoH and HSPs will continue to seek opportunities to increase Aboriginal graduate and cadet positions across the health system.	Level 4 – Full implementation

<p>Endorsed</p> <p>6. That targets be set to increase the number of Aboriginal people in our health workforce and ensure that recruitment processes are culturally appropriate by:</p> <ul style="list-style-type: none"> ▪ ensuring that all vacancies across the system are advertised as Section 51 under the Equal Opportunity Act 1984 (WA) ▪ reviewing recruitment processes for Aboriginal applicants to ensure consistency across the system and incorporate more flexible recruitment processes (i.e. review JDFs for lower positions). 	<p>Health Service Performance Report (HSPR) indicator; P4:1 Percentage of Aboriginal Employees.</p> <p>Set HSP quarterly targets to achieve 3.2% by 2026 which is monitored via the HSPR.</p> <p>HSP Aboriginal Workforce Policy mandates implementation of Section 51 of the Equal Opportunity Act 1984 (WA).</p> <p>Recruitment, Selection and Appointment (RSA) policy enacted on April 2020, includes Aboriginal workforce as a priority and flexible recruitment processes.</p>	<p>Department of Health</p>	<p>2019</p>		<p>Implementation of section 51 pilot project recommendations.</p> <p>Partnered with Institute for Health Leadership, Chief Nursing and Midwifery Office and HSPs to implement flexible recruitment strategies into graduate and cadetship recruitment processes.</p> <p>Monthly monitoring of workforce data for WA health system to review progress and inform strategies.</p> <p>All HSPs apply section 51 in either a targeted or blanket approach.</p> <p>Worked with Workforce and Employment Directorate to embed flexible recruitment in the RSA policy.</p> <p>GDP, GradConnect and cadet recruitment demonstrate flexible recruitment strategies.</p>	<p>Continue to work with HSS to embed culturally considered and flexible recruitment processes as per the recruitment, selection and appointment policy.</p> <p>Continue to promote the use of section 51 to increase Aboriginal representation in the health workforce.</p>	<p>Level 4 – Full implementation</p>
<p>Endorsed</p> <p>9. The System Manager and Health Service Providers seek opportunities to work more effectively with other government agencies, non-government organisations and Aboriginal Community Controlled Organisations to better address and monitor social determinants.</p>	<p>Establishment of the WA Aboriginal Advisory Group on COVID-19 (the WAAAG).</p> <p>The AHPD, established the WA Aboriginal Advisory Group on COVID-19 (the WAAAG). Membership includes representatives from the Department of Health and Health Service Providers, the Aboriginal Community Controlled Health Services, other state government agencies and the primary health sector.</p>	<p>AHPD</p>	<p>March 2020</p>	<p>TBD</p>	<p>The AHPD, through the WAAAG, has initiated, supported and provided oversight to strategies and initiatives relevant to the WA Aboriginal population. The WAAAG has provided an effective instrument through which members can raise, discuss and broker solutions for emerging issues that impact Aboriginal people.</p>	<p>WAAAG will be important in the next stage of COVID-19 response planning, providing a mechanism for government agencies and community organisation to share information and advocate for the Aboriginal community as the State recovery plan is developed and implemented.</p>	<p>Level 4 – Full implementation</p>

	<p>Member of the WA Aboriginal Health Partnership Group (Partnership Group). The Partnership Group brings together key stakeholders from across the health sector including representatives from Government, non-Government and Aboriginal Community Controlled Health Organisations.</p>	AHPD		Ongoing	<p>The Partnership Group partners together in order to:</p> <ul style="list-style-type: none"> - provide a formal mechanism for collaboration on policy and planning matters occurring at the State and Commonwealth levels including providing advice on health issues and priorities. - discuss and share information on initiatives, data and best practice to increase effectiveness and reduce duplication. 	Continue quarterly meetings.	Level 4 – Full implementation
	<p>Member of the Aboriginal Affairs Coordinating Committee (AACC). The role of the Committee is to:</p> <ul style="list-style-type: none"> (i) enable whole-of-government coordination on strategic government initiatives and policies that affect the cultural, health, social and economic outcomes for Aboriginal people in Western Australia; (ii) work with the Aboriginal Advisory Council to develop a whole-of-government Aboriginal affairs strategy for WA, including a more representative structure for regional engagement and decision-making and; (iii) provide stewardship and direction to the Government of Australia, and the Government of Western Australia, regarding the Closing the Gap Refresh including its objectives, work plan, and the development of future outcomes, indicators and targets. 	AHPD		Ongoing	<p>The AACC adopted a new term of reference and implemented a board charter in May 2020, both reflect the expanded membership of the AACC.</p>	Continue quarterly meetings.	Level 4 – Full implementation
	<p>Statewide Aboriginal Health Network (SAHN), The key role of the SAHN is to provide an overarching mechanism to advance our common goal of ‘improving health outcomes for Aboriginal people across Western Australia’, optimising our expertise, potential solutions and partnerships.</p>	Aboriginal Health Strategy, WACHS		Ongoing	<p>The SAHN complements the work of the Partnership Group by providing collective expertise and sharing information about common issues in service delivery from a regional perspective.</p>	Meet twice annually.	