

What do we mean?

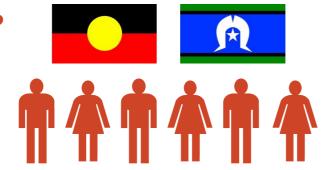
We draw our understanding of Aboriginal health from the words of the original National Aboriginal Health Strategy (1989):

'Aboriginal health' means not just the physical wellbeing of an individual but refers to the social, emotional and cultural wellbeing of the whole community in which each individual is able to achieve their full potential as a human being, thereby bringing about the total wellbeing of their community. It is a whole-of-life view and includes the cyclical concept of life-death-life.

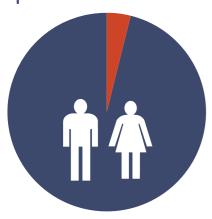
These words remain relevant today and have been reiterated in the National Aboriginal and Torres Strait Islander Health Plan 2013-2023.

Why is this a priority?

> 20,000 people are identified as Aboriginal and Torres Strait Islander in our catchment



= 4.2% of our resident population



Local Aboriginal people experience significantly poorer health outcomes than non-Aboriginal people and have done so for many decades.

This inequality is unacceptable



We believe there is a role for all services, whether Aboriginal community-controlled or mainstream, to work together to improve health outcomes for Aboriginal people in the region



What is our approach?

We are committed to improving Aboriginal health and commissioning culturally appropriate and sensitive health services for local Aboriginal people. We work closely with the four Aboriginal Medical Services to identify needs and co-design the best service responses. To facilitate this, we identify the health and service needs of Aboriginal people in our catchment areas and commission services that are specifically designed to meet the health needs of Aboriginal communities.

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Chronic conditions

1.1 Integrated Team Care (ITC)

This program aims to improve the management of chronic conditions amongst our Aboriginal population by enhancing care coordination and access to services, as well as the provision of supplementary services.

We currently fund 10 Care Coordinators across the region. To do this, we:

- commission Illawarra Aboriginal Medical Service, South Coast Medical Service Aboriginal Corporation, Katungul Aboriginal Corporation Regional Health and Community Services, Waminda - South Coast Women's Health and Welfare Aboriginal Corporation to provide and care coordination services for Aboriginal people with chronic disease who access Aboriginal Medical Services (AMSs)
- commission Grand Pacific Health to provide care coordination services for Aboriginal people with chronic conditions who access mainstream GP services.

> 2,870 Aboriginal people in South Eastern NSW with chronic conditions received support



> 5,800 supplementary services funded



created a program monitoring data platform:



- developed through several co-design sessions and workshops
- captures program / service data
- will help improve understanding of this program, and health and social outcomes
- extensively tested before going live in last quarter of 2018/19

1.2 Chronic pain

This program aims to ensure people living with chronic pain in South Eastern NSW experience improved functional capacity through improved management of their chronic pain condition.

We currently commission a number of programs and services including:



brief pain self-management: allied health run pain programs in five locations across Southern NSW, with 2.7% of the people in these programs identifying as Aboriginal and/or Torres Strait Islander



shared medical appointments: two pilot groups for chronic pain have commenced at Waminda and Katungul



St Vincent's telehealth outreach service: members of the St Vincent's pain service visited three Katungul sites in February 2019 to improve relationships and raise awareness of the telehealth service amongst health professionals. A flyer has also been developed to promote telehealth to Aboriginal and Torres Strait Islander people.

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Prevention initiatives

2.1 Smoking cessation

We commissioned the Australasian Society of Lifestyle Medicine to trial Programmed Shared Medical Appointments (pSMA) for **smoking management** in Southern NSW.

The program, which offered smoking management along with a structured educational component in a particular chronic disease area. Approximately 18% of participants identified as Aboriginal. A pilot of pSMA for smoking management was conducted at Waminda.

Participant feedback from the pilot held at Waminda:

Ifelt supported in a culturally safe environment – there was no judgement as we are all in the same situation.

I felt supported in learning about the underlying nicotine and triggers and ways of getting through each day was beneficial.

2.2 Cancer screening

We commissioned Waminda to deliver Strong Kooris, Strong Communities – Shoalhaven Cancer Care Project from June 2017 until June 2019.

This program helped to **increase community cancer awareness and promote participation** within cancer care pathways including prevention and screening (breast, bowel and cervical cancers) initiatives for Aboriginal and Torres Strait Islander people living in the Shoalhaven region.

Participant feedback:

If it wasn't for the Waminda, cancer care project and support, I wouldn't have ever felt comfortable or supported to have a follow-up.

And I could of possibly not been here to raise my four children

2.3 Health promotion

As part of our inaugural Pitch Night initiative, Coomaditchie United Aboriginal Corporation received funding for their *Deadly Women and Deadly Girls program* which will offer a unique and much needed approach to meeting the needs of communities which traditionally don't access facilities, or mainstream health services.

2.4 Implementation of the National Guide to a Preventive Health Assessment

Workforce development opportunities were held at three locations across our catchment to support the implementation of the National Guide to a Preventive Health Assessment for Aboriginal and Torres Strait Islander People (3rd edition).

The National Guide can be used to support best practice preventive health care for Aboriginal and Torres Strait Islander people, anywhere in Australia, by advising on activities that can help prevent disease, detect early and unrecognised disease and promote health in Aboriginal and Torres Strait Islander communities.

Mental health

To provide culturally safe mental health support among the Aboriginal population, we have commissioned Aboriginal Community Controlled Health Services (ACCHSs) and mainstream service providers to deliver mental health services across the catchment.

We currently commission the following Aboriginal mental health services:

- South Coast Medical Service Aboriginal Corporation to provide early-intervention/ resilience-building and psychological support as part of their Koori Kids program
- Waminda, South Coast Medical Service Aboriginal Corporation, Illawarra Aboriginal Medical Service and Katungul to provide mental health services including earlyintervention/resilience-building, psychological therapies and/or mental health nursing services
- Waminda, partnered with South Coast Medical Service Aboriginal Corporation, to develop and test a model of supporting Aboriginal people with mental health and drug and alcohol issues who were at risk of self- harm in the after-hours period
- Marathon Health to employ a young Aboriginal trainee to complete Certificate III in Community Services at headspace Queanbeyan.

We also monitor access by Aboriginal people to other commissioned services:

almost 8% of consumers who accessed any of our commissioned mental health services from mainstream organisations identified as Aboriginal (excluding headspace)



for headspace services, the figure rises to between 9 - 14% (varying by centre) 10% of clients
accessing the
Clevertar*
mobile app in
our region were
Aboriginal

^{*} Clevertar is a mobile application, commissioned by COORDINARE to support cognitive behavioural therapy in people with or at risk of mental illness



Drug and alcohol

To increase the service delivery capacity of drug and alcohol treatment and to improve the effectiveness of services in this sector, we have commissioned:

- ▶ Waminda as the lead agency for a **community brokerage service** for Aboriginal women who are experiencing alcohol and other drug addictions. The service, which was co-designed with all four local Aboriginal Medical Services, continues to increase access to necessary services for Aboriginal women in a culturally sensitive way
- Marathon Health to provide care coordination for young Aboriginal and/or Torres Strait Islander people in Yass who seek assistance in negotiating care from a range of health and community providers
- Directions Health Services to deliver South Eastern NSW Pathways and Arcadia house (residential withdrawal and rehabilitation program), in which 19% of the clients identified as Aboriginal
- ▶ Lives Lived Well to run Mudjilali Aboriginal Men's Group in the Bega Valley which **provides peer support through offering informal group activities** to build leadership, a sense of identity and empowerment for Aboriginal men of all ages
- ► The Salvation Army to deliver the Shoalhaven Bridge Program which provides **non-residential treatment and support for individuals and their families,** in which 21% of the clients identified as Aboriginal.



End of life care

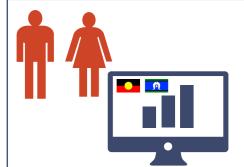
To improve outcomes for patients with palliative needs and their families and carers, we are working towards supporting and strengthening the coordination and management of palliative and end of life care.

We have:

- commissioned Waminda to improve coordination of palliative and end of life care in the Shoalhaven by training and credentialing three trainee Aboriginal Health Workers in advanced palliative and end of life care, and providing a range of resource to Aboriginal communities and their health care workers
- partnered with Illawarra Shoalhaven Local Health District (ISLHD) to co-fund an Aboriginal Health Worker in Palliative Care to ensure there is culturally sensitive support for both ISLHD and general practice staff who are engaging with Aboriginal people at the end of life.



Access to health services



Recording Aboriginality: one of the quality improvement domains as part of our Sentinel Practices Data Sourcing (SPDS) project is to increase the recording of Aboriginality in general practice in order to enable clinicians to promote the uptake of Aboriginal specific services and health assessments



Pathways for Aboriginal health: we have established localised HealthPathways which have Aboriginal health priorities factored into pathway prioritisation and review processes. It includes pathways for the ITC program, closing the gap and health assessments

Illawarra Shoalhaven LHD Aboriginal Health Partnership Agreement:



we are a member and participate regularly

Southern NSW Integrated Care (LHD/PHN) Strategy:

Aboriginal Health has been agreed as a shared health priority and a work plan has been developed to improve coordination of services and strengthen relationships between all agencies



Aboriginal community engagement



a Local Elder is a member of our Community Advisory Committee





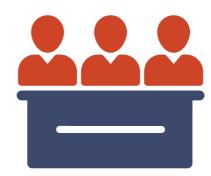
each of our two Clinical Councils has an Aboriginal member as well as GP representatives who work in local AMSs



we seek the advice of our **Aboriginal Health CEOs Advisory Group,** which is convened regularly throughout the year



Aboriginal consumers were involved in a focus group to understand their perspective on self-management of their chronic conditions



Aboriginal representatives were consulted in the development of HealthPathways localised for Aboriginal services



the Illawarra Shoalhaven Suicide Prevention Collaborative has an **Aboriginal working group** to drive culturally sensitive activities



Training and support for Aboriginal organisations

- ▶ ACCHO research and evaluation capacity building: we have commissioned the Australian Health Services Research Institute (AHSRI) to co-design and work collaboratively with the ACCHOs in South Eastern NSW. All four local ACCHOs have engaged actively in this initiative, with each participating in a data-related capacity project. As well, staff from each of the ACCHOs have attended a series of capacity building workshops.
- ▶ Shared medical appointments (chronic pain) training: staff members from Waminda and Katungul were trained as facilitators for shared medical appointments; in addition, one Waminda staff member was provided with the brief pain self-management training run by the Pain Management Research Institute affiliated with Sydney University.
- ▶ **Shared medical appointments (smoking cessation) training**: staff from Waminda were trained as facilitators of shared medical appointments for smoking cessation.
- ▶ **Aboriginal and Torres Strait Islander Health Practitioner:** ITC funding has supported 4 Care Coordinators to complete this qualification to be registered with the Aboriginal and Torres Strait Islander Health Practice Board of Australia.



Building our organisational capacity



Cultural awareness protocols and Acknowledgement of Country flashcards were developed by our Cultural Advisor, in consultation with local ACCHSs, and distributed to all staff



Staff have continued to develop their cultural awareness through two workshops – one with Dr Julie Moore (at three locations) and one with Dr Lynette Riley. A Kinship online module is currently available as a follow-up activity



The local AMSs generously facilitated a full day workshop for our management team on the 'ACCHO service delivery model'



Our Reflect Reconciliation
Action Plan has been endorsed by
Reconciliation Australia and was
launched in October 2019

References

¹ Ghosh A, 2018. Brief Aboriginal health snapshot - 2018, COORDINARE – South Eastern NSW PHN.