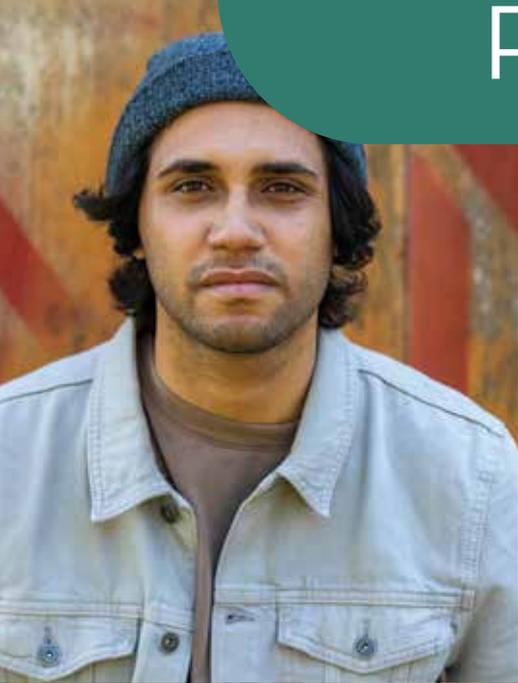




# Aboriginal Health Report Card



July 2021 – June 2022



## Acknowledgement of Country

COORDINARE acknowledges that Aboriginal peoples are the First People of this country and pay respect to their Elders past, present and emerging and acknowledge their continuing connections to their ancestral lands.

COORDINARE is not qualified to determine nor define the boundaries of Traditional Lands and understands the sophisticated and complex relationships of Aboriginal peoples and the land. We understand that within the organisation's 50,000+ km<sup>2</sup> geographic footprint are large areas of the Traditional Lands of:

**Yuin Nation** – from the Shoalhaven River down to Eden and out to Braidwood, including the towns of Nowra and Moruya

**Dharawal Nation** – the area across southern Sydney down to the Illawarra Shoalhaven region and west to Moss Vale, encompassing Bass Point, Helensburgh and Wollongong

**Ngunnawal/Ngambri Nations** – Queanbeyan, Yass, Gunning and north to the Goulburn region

**Ngarigo Nation** – the Monaro Snowy Mountains region down to the Victorian border, including the NSW towns of Cooma and Delegate

**Gundungurra Nation** – includes Goulburn, Crookwell, Southern Highlands and across to the Blue Mountains



Artist: – Loretta Parsley

The artwork above was painted by Walbunja woman Loretta Parsley. She is a Traditional Custodian of Yuin country and has a strong connection to the South East coast of NSW. Loretta paints under the name DAWN, which stands for Doing Art With Nature.

The painting is in the form of a cultural map and depicts the South Eastern NSW PHN region. It will be used by COORDINARE to reflect internal cultural protocols and management of cultural awareness for staff.

The areas in the painting are defined by local government territories and include 12 places of significance. They are: Wollongong, Shellharbour, Kiama, Shoalhaven, Jervis Bay, Eurobodalla, Bega Valley, Snowy/Monaro, Queanbeyan, Goulburn/Mulwaree, Yass Valley and Upper Lachlan Shire.

“The feet represent services walking to the epic centre of COORDINARE. I have used colours that are easily decoded to unlock the physical, emotional and spiritual mood for services in health.

“RED is the colour for self-love! ORANGE is for living in the present! YELLOW connects us to humanity! GREEN maintains a strong connection to Mother Earth! TURQUOISE is a gateway too spiritual belonging! BLUE is the expression of freedom and self-worth! INDIGO is a model for openness and knowledge! MAGENTA influences one's personal development and spiritual awareness!

“The main circle in the centre is the beginning of a journey to provide good health for all the community. The single free spirit is a journey that takes us through life! The hands are always helping and healing.” – Loretta Parsley

## A note about language

Language carries history and creates meaning. In this COORDINARE report, the term 'Aboriginal' is generally used in preference to 'Aboriginal and Torres Strait Islander' and 'First Nations' in recognition that Aboriginal peoples are the original inhabitants of South Eastern NSW.

In recent years, the term 'patient' has become less favoured by people using and delivering health services. COORDINARE uses the word 'consumer' through this document where possible in recognition of the choice, control and power of people now accessing services, and their role in their care, service planning, delivery and evaluation.

## What do we mean by 'Aboriginal health'?

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 are reiterated in the *National Aboriginal and Torres Strait Islander Health Plan 2013-2023*.



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# Introduction

Each year, COORDINARE's Aboriginal Health Report Card is a chance to reflect on how we have tracked against our commitment to improving outcomes for Aboriginal peoples and communities in our region. This is our fourth report dedicated to sharing the results of our work throughout the year with our community.

Partnership, collaboration, and respect are at the core of our business. For the first time, COORDINARE has appointed an Aboriginal-identified Director to our Board. This demonstrates our commitment to health equity at all levels of our organisation. The achievements highlighted in this report reflect a collaboration between COORDINARE and individuals, services and organisations united in their belief in equal health outcomes for Aboriginal peoples.

This year, COVID-19 has been an enormous challenge for Aboriginal communities. In our region, COORDINARE and the ACCHOs, GPs, Local Health Districts and the Aboriginal community worked together to achieve one of the highest vaccination rates in the world, especially for First Nations people. Second dose vaccination rates for adults were over 85% for the Aboriginal community overall by the end of June 2022. While this is 10% behind the overall NSW population, a gap which we are working to close, we want to celebrate the hard work of everyone in the community who have been dedicated to keeping each other safe.

COVID-19 came hard on the heels of the Black Summer bushfires and drought and placed an additional burden on the mental health of our communities, who already experience unacceptable rates of mental ill health. The input of Aboriginal peoples into our commissioned services has been successfully translated into a high number of Aboriginal peoples accessing both Aboriginal-led and mainstream mental health and alcohol and drug services.

On behalf of the COORDINARE team, we extend our heartfelt gratitude to everyone we have worked alongside this year. In particular, we wish to thank the Aboriginal community leaders and members, the staff from the local ACCHOs and other healthcare professionals for their trust, support and knowledge. Working in genuine partnership will ensure that we can continue improving outcomes for Aboriginal peoples who live in our region together.

Dianne Kitcher  
CEO

Paul Knight  
Board Member  
and Aboriginal Health Council Chair



## About Paul Knight Board Member, Aboriginal Health Council Chair

The COORDINARE Board appointed Mr Paul Knight as a new Director. Paul is a proud Dharawal-Yuin man from the Illawarra area. He brings over 25 years of experience across Indigenous employment, health, business and economic development. Paul is taking on the role of inaugural Chair of COORDINARE's newly formed Aboriginal Health Council.

# Tackling inequity together

## Who we are

COORDINARE is the South Eastern NSW Primary Health Network (PHN). Established in 2015, we are one of 10 PHNs in NSW and 31 PHNs across Australia funded by the Department of Health and Aged Care.

Our vision is for one coordinated regional health system that provides exceptional care, promotes healthy choices and supports resilient communities.

## How we work

Our values guide the way we work:

- we build trusted and meaningful relationships
- we respect and include diverse voices
- we act with integrity
- we embrace change with purpose.



## Reconciliation and Closing the Gap

Our vision for Reconciliation is an Australia that embraces unity between Aboriginal peoples and other Australians, embedded in a shared national identity that represents equality and equity, and underpinned by acceptance of our shared history. In the context of our organisation, this represents equal health outcomes for members of Aboriginal communities in South Eastern NSW, and an inclusive and diverse workplace that is culturally safe, culturally rich and proud.

COORDINARE is guided by and works with Aboriginal peoples to 'close the gap' in health care and health outcomes for Aboriginal communities. We believe there is a role for all services, both Aboriginal community-controlled and mainstream, to work together to improve social and emotional wellbeing outcomes for Aboriginal peoples in our region.

## Our community

South Eastern NSW is home to over 25,800 Aboriginal peoples who represents 4.2% of our local population. Our geographic footprint covers an area of 50,000 square kilometres and encompasses large areas of the Traditional Lands of the Yuin, Dharawal, Ngunnawal / Ngambri, Gundungurra, and Ngarigo Nations.

COORDINARE continues to collaborate with the four Aboriginal and Torres Strait Islander Community-Controlled Health Organisations (ACCHOs) in our region:

- Illawarra Aboriginal Medical Service
- Katungul Aboriginal Corporation Regional Health and Community Services
- South Coast Medical Service Aboriginal Corporation, and
- Waminda – South Coast Women's Health and Welfare Aboriginal Corporation.

Our key stakeholders include Aboriginal community members and leaders, Aboriginal health workers, doctors and health care professionals from these ACCHOs and Local Health Districts. We also work with diverse government, non-profit, education and research as well as private health organisations.

**\$4.5m**

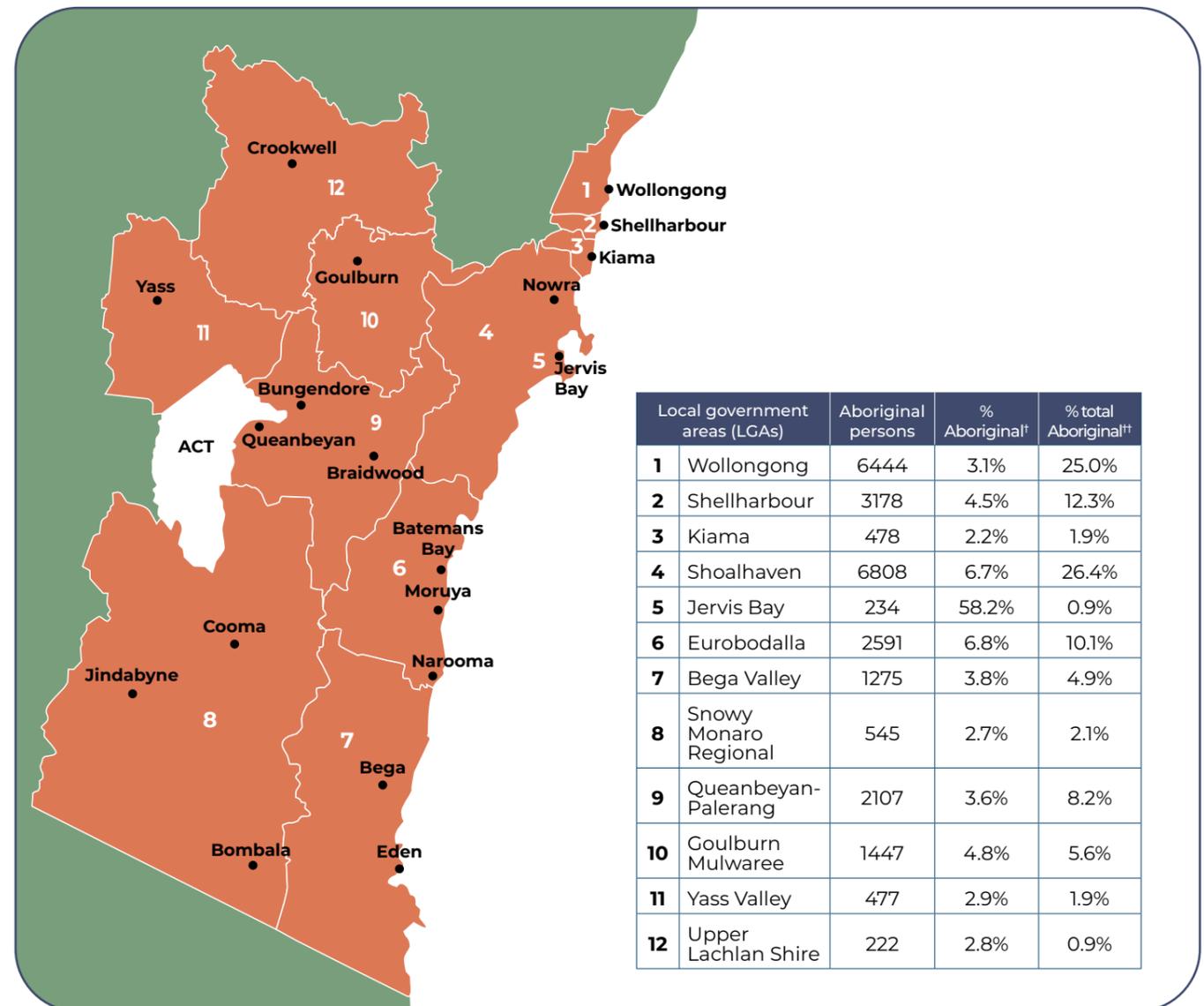
invested in targeted-specific Aboriginal health services in South Eastern NSW



**> 2,490**

Aboriginal peoples supported across commissioned services

## COORDINARE's 'footprint'



Download a copy of the [Aboriginal Health Snapshot \(2022\)](#).

† Aboriginal population as a proportion of total LGA population (%)  
 ‡ Aboriginal population as a proportion of total Aboriginal population of SENSW PHN (%)

# Our action plan: Aboriginal health

Aboriginal health is a priority for action in the COORDINARE Strategic Plan 2021-2023, and we have committed to four key areas:

1. We will strengthen our consultation and engagement with Aboriginal communities, broaden Aboriginal input and representation on our governance structures, including at the Board level.
2. We will launch our Innovate Reconciliation Action Plan.
3. We will continue to work in partnership with the ACCHOs in our region to co-design and commission services specifically for Aboriginal peoples.
4. We will work with mainstream primary care providers to develop and improve meaningful cultural safety as we continue our journey of reconciliation.

# Aboriginal consultation, engagement and representation

**ACTION: We will strengthen consultation and engagement with Aboriginal communities and broaden Aboriginal input and representation on our governance structures, including at the Board level.**

Consultation and engagement with Aboriginal communities is at the heart of our reconciliation journey. It is vital to 'closing the gap' in health care outcomes for Aboriginal peoples and their communities across South Eastern NSW.

Throughout the year, the COORDINARE team continued to build relationships, grow our knowledge of local communities and their needs, and improve cultural awareness and practices within our organisation.

## In 2021-2022:

- An Aboriginal-identified Director joined the COORDINARE Board.
- Commenced the establishment of our inaugural COORDINARE Aboriginal Health Council.
- More Aboriginal-identified staff members joined our team, including our new Aboriginal Health Service Development and Performance Manager and Community Engagement Consultant.
- Local ACCHOs, Aboriginal community leaders, Aboriginal health professionals and general practitioners continued to participate in our Board advisory groups.
- Aboriginal community members participated in our community consultation network, 'Mudjjs of COORDINARE', an expansion of 'Friends of COORDINARE' which is specific to and for Aboriginal peoples. Established in 2021-2022, 'Mudjjs of COORDINARE' encourages Aboriginal community members to yarn with us about health and wellbeing.
- COORDINARE is a member of the Aboriginal Health Partnership Committee, working alongside the Illawarra Shoalhaven Local Health District, local ACCHOs and the University of Wollongong Woolyungah Indigenous Centre.
- Aboriginal community members were included on assessment panels to ensure cultural safety is considered during the commissioning of services.

# Reconciliation action plan

**ACTION: We will launch our Innovate Reconciliation Action Plan.**

In August 2021, the COORDINARE Board launched our Innovate Reconciliation Action Plan (RAP).

This RAP, endorsed by Reconciliation Australia in May 2021, continues to build on our journey and enhance our learnings from our Reflect RAP. Through its development, we have focused on deepening our understanding of the reconciliation process, cultivating relationships and welcoming truth telling. In doing so, we have recognised the circumstances of Aboriginal ill-health and accessibility as they relate to historical impact, colonisation, and dispossession. We acknowledge the importance of responding with culturally appropriate models of care, co-designed with the Aboriginal peoples who will use them.

Our RAP was developed and will be implemented with guidance from our working group co-chaired by an Aboriginal Elder and including members of Aboriginal communities and COORDINARE staff.

COORDINARE staff have cultural-appropriateness training each year to continue their journey of understanding how to respectfully engage with Aboriginal consumers and the impact of trauma on Aboriginal peoples, and barriers to service access.

Read our [Innovate Reconciliation Action Plan](#).

“Our Innovate RAP is our commitment to the organisations and communities we work with to be truthful in our work together with a vision to progress and celebrate health, wellbeing and equity for and with First Nations peoples.”

- Terry Hill, Chair of Innovate RAP working group

“This has been a supportive and inclusive experience. I felt safe to challenge things and can already see how my input is making a difference. I think this RAP is a real opportunity for COORDINARE to create leadership roles and further demonstrate their integrity.”

- Alfie Walker, Wiradjuri-Yuin





# Commissioned health services

**ACTION: We will continue to work in partnership with the ACCHOs in our region to co-design and commission services specifically for Aboriginal peoples.**

COORDINARE supports the Closing the Gap Priority Reforms of building a strong and sustainable Aboriginal community-controlled sector delivering high quality services to meet the needs of Aboriginal peoples.

COORDINARE collaborates with and commissions all four ACCHOs in South Eastern NSW to deliver a range of services.

## Mental health and suicide prevention

Reducing the impact of mental illness and suicide on Aboriginal peoples is a major priority for COORDINARE, in line with our commitment to closing the gap and improving the social and emotional wellbeing of Aboriginal peoples. We recognise a greater burden of mental illness is borne by Aboriginal peoples and people living in the more rural parts of our region.

All four ACCHOs in the South Eastern NSW region provide holistic mental health services and in 2021-2022, COORDINARE commissioned the Illawarra Aboriginal Medical Service, Katungul, Waminda and the South Coast Medical Service Aboriginal Corporation to deliver culturally safe mental health services. Key initiatives during the period included:

- Ongoing support for the **Strong foundations program**, a South Coast Medical Service Aboriginal Corporation program which focuses on resilience building and psychological support for school-aged children.
- **Strong Yawa**, an after-hours telephone line provided by Waminda, offers support to Aboriginal peoples in the Shoalhaven area experiencing acute mental illness, alcohol and other drug-related issues, suicidality and people impacted by suicide.
- The **Framework for Mental Health Lived Experience (Peer) Work in South Eastern NSW** was launched in August 2021. The framework explores lived experience work with Aboriginal communities and provides guidance for supporting the future development of a Lived Experience (Peer) workforce in Aboriginal communities. This guidance was created through conversations with Aboriginal health and community professionals and community members.

## Access to our commissioned mainstream mental health services

Throughout 2021-2022, Aboriginal peoples continued to access mainstream mental health services supported by COORDINARE.

The proportion of Aboriginal people who accessed mainstream mental health services 2021-22 is shown in the table.

Mental health service activity 2021-2022	Aboriginal consumers (%)
Bushfire recovery mental health services	21.6%
Clinical care coordination and support	9.6%
Continuity of support; Psychosocial headspace (youth services)	5.8%
Head to Health - Shellharbour	11.5%
Low intensity coaching service	9.3%
MoH pandemic response	5.9%
Psychological supports	3.8%
Suicide after care service	7.9%
<b>Total mental health services (adult)</b>	<b>13%</b>

## headspace

COORDINARE commissions seven headspace services in the region with planning underway for a new headspace centre for Shellharbour which will commence operations in 2023.

Ensuring cultural safety and inclusion is a priority for headspace and they have undertaken consultations with Aboriginal communities on how to better support young people.

## Case study: Strong foundations program

Lauren\*, a 9-year-old girl, was referred to the Strong foundations program for therapeutic support for anxiety-related systems and support to develop coping strategies. Lauren's triggers for her anxiety included parental separation, sleepovers and standing on stage at school.

Lauren is very creative and enjoys art making and the sessions. Sessions supported her to recognise and understand her worries, and utilised art making to support self-expression and to calm the mind and body. Lauren reimagined her worry in the form of a 'worry monster' which assisted her to separate herself from anxious thoughts and feelings, and to have some control over it. She came to understand that worry is like a bully and was supported to stand up to the worry when it comes to visit. Lauren illustrated a book as a reminder of this story which she can pull out and read when needed. At the end of the sessions, Lauren's mother said that: "...she had a sleepover at her friend's house two weeks ago!!! I was so proud that she actually stayed. Thank you for everything, I feel like the sessions have definitely helped her anxiety."



## Case study: headspace

In 2021-2022, headspace Batemans Bay employed a senior Aboriginal person in the role of Community Engagement Officer. This led to excellent engagement of young people, their families and communities in the Batemans Bay centre, reflected in the high proportion of young people engaging with the centre. headspace Batemans Bay have taken the learnings from this key role to create an Aboriginal-identified position for a youth access worker to ensure ongoing cultural engagement and safety.



24%

of consumers who accessed our drug and alcohol commissioned services identified as Aboriginal



### Alcohol and other drugs

Alcohol and other drug misuse are significant issues within our communities. In 2021-2022, COORDINARE continued to support ACCHOs and mainstream service providers to increase the number and effectiveness of drug and alcohol treatments for Aboriginal peoples.

- Waminda acts as the lead agency for a drug and alcohol brokerage and community service for Aboriginal women and their families who are affected by substance misuse in the Illawarra Shoalhaven and Far South Coast regions.
- Directions Health Service is providing clinical support for an Aboriginal and Torres Strait Islander alcohol and other drug case worker to offer culturally safe treatment and support to people with AOD and mental health concerns in the Yass and surrounding areas.
- Waminda is one of three primary care providers in the region commissioned to implement a practice change initiative to improve early identification and quality care to people with alcohol and other drug concerns. Waminda has implemented strategies to identify and support clients at risk of alcohol dependency or misuse, including assessments and consumer education through yarning circles.

### Introduction of alcohol and other drugs treatment guidelines

During 2021-2022, the *Alcohol and other drugs treatment guidelines for working with Aboriginal and Torres Strait Islander People in non-Aboriginal settings* was released. The guidelines were funded and supported by a consortium of six PHNs including COORDINARE and were developed in consultation with Aboriginal peoples and communities.

The guidelines aim to improve alcohol and other drugs treatment outcomes by supporting services to establish better relationships and links with Aboriginal organisations and communities and provide practical resources to improve service delivery. An audit tool was developed to assist the implementation of the guidelines and six Aboriginal senior drug and alcohol workers were trained as auditors.

[Download the guidelines](#) from the Network of Alcohol and Other Drugs Agencies (NADA) website.

### Chronic health conditions

Chronic health conditions have a devastating effect on Aboriginal communities across NSW. The disproportionately high rates of non-communicable diseases such as diabetes, heart, kidney and lung disease contribute to premature mortality rates in Aboriginal populations.

COORDINARE commissions services which focus on the prevention, early detection and optimal management of chronic health conditions. This is with a view to eliminating the gap in life expectancy between Aboriginal peoples and other Australians – a key Closing the Gap priority.

### Integrated Team Care

In 2021, the Integrated Team Care program was updated and enhanced through the adoption of the recommendations in the Ngarruwan Ngadju review completed in 2020.

The ITC program run by the four ACCHOs in the region and Grand Pacific Health aims to improve health outcomes for Aboriginal and Torres Strait Islander people with chronic conditions through better access to coordinated and multi-disciplinary care. The program provides eligible people with a dedicated care coordinator to work closely with them, their GP, practice nurse, allied health practitioners and specialists to receive care.

Changes to the program during the year included the introduction of a new funding allocation model and the establishment of a Regional Advisory Committee for Innovation and Improvement. The committee is driving change across the service – providing advice, cross-sectoral and community co-design and input into the continuous improvement of the design and delivery of the Integrated Team Care Program in South Eastern NSW.

### Reconnecting to Country – Clinical redesign project

The Reconnecting to Country - Clinical Redesign Project is a collaborative sponsorship between COORDINARE and the Illawarra Shoalhaven Local Health District, Grand Pacific Health and Waminda.

Part of the broader Agency for Clinical Innovation Redesign program, the project aims to provide safe, seamless, and appropriate care and positive person-centred experiences for Aboriginal peoples transitioning between acute and community primary health care in the Illawarra Shoalhaven region.

The program will:

- address service duplication
- improve referral processes
- reduce delays in primary health care supports and care coordination.



10

full-time care coordinators funded across the region



1,011

Aboriginal peoples with chronic conditions received care coordination this year



> 3,160

supplementary services related to their care, were accessed



2

care coordinators funded\* to undertake a Postgraduate Certificate in Clinical Redesign through the University of Tasmania.

\*by COORDINARE



## End of life care

In 2021-2022, we continued to support and strengthen the coordination of culturally sensitive palliative and end of life care for Aboriginal peoples.

4

Aboriginal Health Workers were trained and credentialled in advanced palliative and end of life care



### Community-based palliative and end of life initiative

Waminda has enhanced the coordination of culturally appropriate palliative and end of life care in the Shoalhaven over the past three years with funding and support from COORDINARE.

- Through liaison with general practices, the Illawarra Shoalhaven Local Health District and other service providers, Waminda has supported appropriate access and referral pathways to these services.
- Waminda has held outreach clinics and Yarn Ups promoting advance care planning and the importance of advance care directives.

### Community pharmacies

COORDINARE has funded the Pharmaceutical Society of Australia to build capacity in community pharmacies to provide culturally appropriate palliative and end of life support to Aboriginal people.

### Case study: End of life care

When an elderly Aboriginal woman was diagnosed with cancer of the throat, she and her family were referred to the end of life / comprehensive care team and Aboriginal health practitioner at Waminda.

With the team's support, aunty received dedicated, culturally appropriate care and support was extended to her family and friends. The Aboriginal health practitioner made weekly home visits with members of the care team and GP, attended hospital visits and advocated on behalf of aunty in her appointments with her GP and specialists.

Waminda provided transport support and a diary for aunty and her family to keep records and understand the services and workers who were supporting and visiting during aunty's end of life journey. Waminda also provided the family with transport support to attend specialist appointments and assisted with referrals for other services and in-home care equipment.

Respecting aunty's wishes, she passed away peacefully at home with her family around her.

## Support disaster response and recovery

COORDINARE is proud to have played a role in helping the community to achieve a high level of protection against COVID-19 which was higher than state and national averages. This was achieved by:

- **COVID-19 briefings to coordinate access to vaccinations** – In collaboration with local ACCHOs and the Illawarra Shoalhaven and Southern NSW Local Health Districts, COORDINARE coordinated regular Aboriginal COVID-19 briefing meetings. We facilitated planning and joint efforts for vaccination clinics, promotional material and supported access to and interpretation of locally relevant vaccination data.
- **Vaccination clinics, testing and community support** – The COORDINARE team worked with Local Health Districts (Public Health Unit and Virtual Care Centre) and ACCHO staff to coordinate responses to COVID-19 transmission and outbreaks. We worked with the Wreck Bay Aboriginal Community Council, Jerrinja Aboriginal Lands Council and Nowra Local Aboriginal Lands Council to ensure individuals and families had access to testing, in-home health care, food and other essential items while in isolation.
- **Short-term funding relief** – COORDINARE provided small grants to ACCHOs and a number of general practices to support vaccination clinics and community safety. Funding provided to ACCHOs facilitated the following:
  - COVID-19 vaccinations for 276 people
  - 281 people received telephone support
  - 631 people received face-to-face support
  - 36 people were provided access to food supplies and essentials
  - 100 people received access to rapid antigen tests.
- **Promoting COVID-19 vaccination uptake** – We worked with all four ACCHOs to develop joint media releases on vaccination rates for local Aboriginal peoples and the importance of getting vaccinated. The media releases generated a number of interviews on local radio and articles in print and online media.



87.9%

of the eligible Aboriginal population had two COVID-19 vaccination doses (NSW 85.4%, Australia 81.5%)



4

ACCHOs supported to provide COVID-19 vaccination, treatment and community care



### Case study: #fabvac video campaign

COORDINARE joined forces with ACCHOs in South Eastern NSW and Beyond Empathy to create the #fabvac video campaign encouraging Aboriginal peoples to get vaccinated against COVID-19 and influenza. In a series of videos promoted the key message to "talk to your doctor or health worker", local young Aboriginal peoples were featured yarning with local Aboriginal community members and health works about their experiences of COVID and attitudes to COVID and flu vaccinations.

The videos reached more than 100,000 people via Facebook and have been shared and commented on by local Aboriginal organisations and media outlets.



### Bushfire recovery

COORDINARE is deeply conscious of the ongoing impact of the 2019-2020 bushfires on Aboriginal peoples and communities in our region. Building on the support we provided in 2020-2021, we funded a range of services and natural disaster community grants.

Five non-clinical support positions were recruited for a 12-month period commencing in 2021:

- three full time Recovery Officers at the Katungul Aboriginal Corporation, servicing the Eurobodalla region
- two full time Aboriginal Support Officers at the South Coast Aboriginal Corporation, with outreach to the Ulladulla region.

These services and the individuals in these roles worked closely with local stakeholders to connect people with appropriate support services and worked directly with community members to provide social and emotional wellbeing support. The Katungul initiative has been extended by six months to continue working with community members in areas identified as hard-to-reach.

The three Recovery Officers involved with this initiative received a service recognition award in the Katungul 2022 NAIDOC Awards.



# Cultural safety

**ACTION: We will work with mainstream primary care providers to develop and improve meaningful cultural safety as we continue our journey of reconciliation.**

There is increasing recognition that improving the cultural safety of health care services can improve Aboriginal peoples' access to health service and the quality of health care they receive. This means a health system where Aboriginal cultural values, strengths and differences are respected; and racism and inequity are addressed.

Cultural safety requires practitioners to be aware of their own cultural values, beliefs, attitudes and outlooks that consciously or unconsciously affect their behaviours. Certain behaviours can intentionally or unintentionally cause clients to feel accepted and safe, or rejected and unsafe. In addition, cultural safety is a systemic outcome that requires organisations to review and reflect on their own policies, procedures, and practices in order to remove barriers to appropriate care.

## Access to health services

### Recording Aboriginal status

COORDINARE'S Sentinel Practices Data Sourcing (SPDS) project is striving to increase the recording of Aboriginal status for patients in general practices. This is to enable clinicians to promote the uptake of Aboriginal-specific services and health assessments.

Due to sustained efforts in the SPDS project over several years, the proportion of people whose Aboriginal status is not recorded at their primary care service continues to be low, with only 16.6% of patients not having their Aboriginality status recorded on their records in general practices partaking in the project.

### Referral pathways for Aboriginal health

HealthPathways is an online health information portal for GPs that provides information on how to assess and manage medical conditions, and how to refer individuals to local specialists and services.

COORDINARE has established localised HealthPathways referral guides for Aboriginal peoples which include referral pathways for the Integrated Team Care program, Aboriginal health assessments, and training for cultural competency.

## Consumer-focused models of care in general practice

In 2021-2022, COORDINARE supported mainstream general practices to co-design improvements to service delivery in partnership with Aboriginal peoples who regularly use their service – with an emphasis on reinforcing cultural safety.

Using prevalence data and data mapping, regions and practices with a high number of Aboriginal populations and attendance were selected, with consideration given to areas with no proximity to an ACCHO. There are currently five general practices enrolled in the initiative. These practices have been involved in activities including:

- a practice cultural audit
- cultural awareness training
- co-design training with the Australian Healthcare and Hospitals Association
- co-designing a plan for improvement with Aboriginal people, and
- regular meetings to monitor the implementation of agreed actions from co-design.

In the past year, 28 Aboriginal community members have participated in co-design training and over 10 co-design meetings. Community members have been instrumental in identifying areas for improvement as well as leading the way in defining practice improvement plans and activities that will be implemented over the next 12 months.

## Increased

use of the HealthPathways GP portal (**133.3%**) to access the cultural awareness and cultural safety pathways





Some practices have already begun implementing community-driven actions such as:

- Aboriginal artwork and language in their logos and on uniforms
- establishing Aboriginal-specific clinics
- establishing Aboriginal-identified positions.

## 5

cultural awareness and 5 cultural immersion sessions delivered for 122 GPs and their staff



### Cultural training for primary care providers

One of the actions in COORDINARE'S Innovate RAP is to source and facilitate cultural awareness and safety training for primary care providers. In 2021-2022, five cultural awareness and five cultural immersion sessions have been delivered across seven of the 12 cluster areas and attended by 122 general practitioners and other practice staff.

### Improving access to specialists - co-design project

COORDINARE engaged Beacon Strategies to co-design a proposed model of care which would help improve access to specialist care across South Eastern NSW.

A project steering group which included Aboriginal members was established and Aboriginal consumers and health professionals working in ACCHOs across the region were consulted to understand their specific needs, identify priorities and potential solutions.

The project has now moved into the implementation phase. A steering group will be formed to oversee implementation and will include Aboriginal representation.



### What the community told us

Needs and priorities for increasing Aboriginal peoples access to specialist services





## COORDINARE – South Eastern NSW PHN

Phone: 1300 069 002

Website: [www.coordinare.org.au](http://www.coordinare.org.au)

Email: [info@coordinare.org.au](mailto:info@coordinare.org.au)

Signing up to be a Mudji (Friend) of COORDINARE can make a difference. If you would like to yarn with us about Aboriginal and Torres Strait Islander health and wellbeing, please register as a Mudji of COORDINARE.

<https://connect.coordinare.org.au/mudjingaal-djama-coordinare>



Thank you to our consumers, community, staff and partners for sharing your stories and images in this review.

Photos on cover:

**Top left:** Aunty Narelle – photo by Emma Korhonen. **Top middle:** Brittany from IAMS. **Top right:** Merv – photo by Emma Korhonen. **Middle centre:** Daniel, Harry and Emily Berrenger discuss COVID vaccines for children. **Middle right:** Anita from Waminda. **Bottom left:** Nikki – photo by Emma Korhonen. **Bottom right:** Naomi – photo by Emma Korhonen.

Images within the review:

**Page 1:** Artist: Loretta Parsley. **Page 4:** Naomi-Lee Campbell and Shelley Hinton - photo by Emma Korhonen. **Page 7:** COORDINARE's RAP working group from left Emma Wooldridge, Philippa Gately, Paul Lillyman, Catherine Poutasi, Kay Stewart, Jo Telenta, Kaleena Webbe, Nathan Deaves and Terry Hill. **Page 9:** Local Indigenous traditional dance performers, Muladha Gamara Dancers at the opening of headspace Batemans Bay.

**Page 13:** Uncle Ken and granddaughter Alicia

All other images are stock images.