

# North Metropolitan Area Health Service

## Aboriginal Reconciliation and Integration Strategy

June 2009



Government of Western Australia  
Department of Health

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This work has been developed in consultation with the NMAHS Aboriginal Health Reference Group.

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Endorsed by North Metropolitan Area Executive Group on 2<sup>nd</sup> June, 2009

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## The North Metropolitan Area Health Service:

- Acknowledges Past Policies and Injustices against Aboriginal and Torres Strait Islander people, including colonisation without consent, dispossession of land, separation of children from families, assimilation, segregation and discrimination;
- Acknowledges and supports the Apology to all Aboriginal and Torres Strait Islander people, including the Stolen Generation for the mental, social, emotional, physical and cultural pain and suffering caused by the shared involvement of our health system in these past policies and injustices;
- Recognises the Continued Impact these past policies and injustices have on the disturbing level of ill-health and disadvantage among Aboriginal and Torres Strait Islander people, families and communities, which is many times that of the wider community;
- Acknowledges Our Shared Responsibility for Action to heal the wounds of past injustice and building on the positive initiatives of many Aboriginal and Torres Strait Islander people and organisations by:
  - Improving our understanding of the impact of past actions on the present and the future;
  - Enhancing our awareness of the Aboriginal and Torres Strait Islander holistic view of health that links the mental, physical, emotional, social, environmental and cultural aspects of health and well-being of the person, the family and the community through linkages with the land and sea.

As we reach beyond the boundaries of western health care, the North Metropolitan Area Health Service especially values the Aboriginal and Torres Strait Islander holistic view of health in developing a health system that respects the views, beliefs, rights and customs of Aboriginal and Torres Strait Islander people.

The North Metropolitan Area Health Service affirms our commitment to strengthening partnerships and creating new ways of working with Aboriginal and Torres Strait Islander people that are based on our shared values of **Respect, Acceptance, Honesty, Openness, Patience, Trust and Good Faith.**

## The North Metropolitan Area Health Service values and respects:

- Aboriginal and Torres Strait Islander people as the First People, belonging to the land and sea of Australia for more than fifty thousand years.
- The spiritual wisdom of Aboriginal Culture that has survived through great adversity to remain one of the oldest living cultures in the world.
- The Aboriginal and Torres Strait Islander holistic view of health, which connects the Mind, Body, Heart, Soul, Spirit, Environment and Culture of the whole person, to their family and their community through strong links with the land and sea.
- Aboriginal and Torres Strait Islander views, beliefs, rights and customs.

## **The North Metropolitan Area Health Service Aboriginal Reconciliation and Integration Strategy:**

The North Metropolitan Area Health Service (NMAHS) is one of four area health services in Western Australia. It provides public hospital, community and mental health services to over half a million people living in Perth's northern suburbs. The NMAHS includes Graylands Hospital, Joondalup Health Campus, Kalamunda Hospital, King Edward Memorial Hospital, Osborne Park Hospital, Sir Charles Gairdner Hospital and Swan District Hospital.

At Area level, the NMAHS has established an Aboriginal Health Reference Group that has representation from all health provider, consumer, government and community groups as appropriate to the development of health care for Aboriginal people. This Reference Group has been responsible for the development of the NMAHS Aboriginal Reconciliation and Integration Strategy (ARIS), with the wide membership, especially the Indigenous representatives, providing active input to develop a document that will ensure the relationships, respect and opportunities required to build the right services provided by the right staff in the right locations.

The NMAHS ARIS is an overarching Area-wide document that has identified strategies and suggested actions and targets for the individual NMAHS health service sites. The NMAHS ARIS will be published on the NMAHS website making it available and open to further consultation and feedback processes.

Each of the NMAHS health service sites will develop an ARIS that builds on the NMAHS ARIS strategies and has specific actions and targets, relevant to that site and level of services and particularly to the catchment population.

This tiered approach will ensure that the actions in each ARIS are linked to specific service sites, making them meaningful and achievable.

The development, actions and progress including achievement of objectives for each NMAHS site ARIS will be reported to the NMAHS Aboriginal Health Reference Group via site representatives. In turn, the Reference Group will report to the NMAHS Executive.

The three key areas of the study are:

- Relationships – working together to build a stronger future;
- Respect – acknowledging, understanding and valuing people; and
- Opportunities – reducing inequalities in health; maximising health outcomes.

## North Metropolitan Area Health Service Aboriginal Reconciliation and Integration Strategy (ARIS)

STRATEGY	ACTION (Suggested / Examples)	RESPONSIBILITY	TIME LINE	MEASURABLE TARGET
<b>Healthy Leadership</b>				
Implement and maintain the NMAHS Reconciliation and Aboriginal Integration Strategy (ARIS)	<ul style="list-style-type: none"> <li>NMAHS Aboriginal Health Reference Group (AHRG) to monitor and report on progress of the ARIS at Area level</li> <li>ARIS to include flow chart showing linkages e.g. Department of Indigenous Affairs, Population Health, NMAHS and site committees</li> <li>NMAHS sites/services determine processes for reporting regularly on progress of ARIS</li> </ul>	North Metropolitan Area Executive Group	<p>June 2009</p> <p>June 2010</p>	<p>ARIS developed at Area level</p> <p>Annual reporting to NMAHS Executive</p> <p>ARIS developed at site / service level</p> <p>Annual reporting to NMAHS AHRG</p>
Empower Aboriginal people to actively participate in decision making regarding their own health care and the delivery of health services	<ul style="list-style-type: none"> <li>Identify points in models of care where Aboriginal people could be engaged in decision making in their own health care</li> <li>Educate staff to actively engage Aboriginal people in decision-making</li> <li>Targeted feedback strategies for complaints, etc, following discharge, which include methods other than written surveys, i.e. oral, network.</li> </ul>	<p>Area Director of Clinical Planning and NMAHS sites / services</p> <ul style="list-style-type: none"> <li>Executive Director sites and Services</li> <li>Executive Director NMAHS sites</li> </ul>	<p>June 2010</p> <p>Annual reporting</p>	<p>NMAHS models of care identify processes for engagement of Aboriginal people</p> <p>Site / service ARIS identify processes for engagement of Aboriginal people in care delivery and progress on implementation</p>
Develop leadership capacity in management and executive roles	<ul style="list-style-type: none"> <li>Aboriginal Health Council of WA and NMAHS leadership programs</li> </ul>	North Metropolitan Area Executive Group	June 2010	NMAHS and site / service identify actions to develop Aboriginal leadership capacity

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Executive level responsibility with authority to monitor implementation of the NMAHS Aboriginal Cultural Respect and Security Framework	<ul style="list-style-type: none"> <li>Defined accountability for the success of the cultural security plan at each level and at each site / service within the NMAHS</li> </ul>	Chief Executive NMAHS	Annual reporting	Reported success of the cultural security plan at each level and at each site / service within the NMAHS
<b>Healthy Workforce</b>				
<p><b><u>Education of staff</u></b></p> <p>Develop comprehensive education program for all staff in the NMAHS that includes cultural awareness training and acknowledgement of Aboriginal and Torres Strait Islander culture</p>	<ul style="list-style-type: none"> <li>Liaise with NMAHS Learning and Development Service to develop education program for NMAHS staff; e.g. site orientation, graduate and specific study programs and mandatory and regular training</li> <li>Liaise with site education departments to determine ways to enhance staff knowledge base; e.g. SCGH Centre for Nursing Education, Workforce and Post Graduate Education Committee and Nursing and Midwifery Education and Research at KEMH</li> <li>Implement the WA Health cultural training packages as appropriate across NMAHS</li> <li>Encourage incorporation of training into performance management for all staff</li> <li>Improve focus on Aboriginal health in health service educational activities (including annual grand round presentation)</li> </ul>	NMAHS Learning and Development Service and NMAHS sites / services staff education services	<p>June 2010</p> <p>Annual reporting</p>	<p>Comprehensive NMAHS education program developed with consistent Area-wide approach</p> <p>Site / service ARIS include:</p> <ul style="list-style-type: none"> <li>Cultural awareness included in orientation package</li> <li>All staff to undertake cultural awareness training as appropriate to their level of contact with Aboriginal people</li> <li>Reported uptake of training in service accreditation</li> <li>Performance indicator for number of patients presented in education activities</li> </ul>

STRATEGY	ACTION (Suggested / Examples)	RESPONSIBILITY	TIME LINE	MEASURABLE TARGET
<p><b>Workforce</b></p> <p>Develop an Aboriginal employment plan for the NMAHS, focusing on recruitment, participation and retention of Aboriginal staff</p>	<ul style="list-style-type: none"> <li>• Pro-active Aboriginal employment and recruitment practices to encourage the training and employment of Aboriginal people at all levels in the health service – including job descriptions, advertising, training and recruitment processes which are culturally appropriate and decrease barriers, i.e. not everyone has the ability or opportunity to access a computer or the Internet.</li> <li>• Provide career development opportunities to increase intakes of Aboriginal staff</li> <li>• Increase number of Aboriginal people in clinical and non clinical roles to implement cultural change in NMAHS</li> <li>• Develop a firm structure on which to develop well supported Aboriginal positions, focussing on the role, specific duties and outcomes</li> </ul>	<p>Area Director of Workforce Planning and NMAHS sites/services</p>	<p>June 2010</p> <p>Annual reporting</p>	<p>NMAHS Aboriginal employment plan developed</p> <p>Site / service ARIS include Aboriginal employment plan and development opportunities</p> <p>Recruitment of Aboriginal health professionals to match the targets set in the WA Health, Office of Aboriginal Health Reconciliation Action Plan 2008-2013 (3.2% increase for 2008-2009)</p>
<p>Increase training and development opportunities for Aboriginal staff, including leadership capacity at managerial and executive levels</p>	<ul style="list-style-type: none"> <li>• Annual funded scholarship for a WA medical student for an elective in Aboriginal child health in Australia or internationally</li> <li>• Regular (quarterly) meetings for WA Health Staff for Aboriginal people for information sharing, support and planning</li> <li>• Consideration of involvement of non-WA Health services (e.g. Derbarl Yerrigan) and teleconferencing for rural based staff</li> <li>• Consideration of a graduate program for Aboriginal Health Workers</li> </ul>	<p>Area Director of Workforce Sorry Team and NMAHS sites/services</p>	<p>June 2010</p> <p>Annual reporting</p>	<p>NMAHS Aboriginal employment plan has strategies with identified targets for increased retention and education / skill levels</p> <p>Site / service ARIS have strategies with specific targets for increased retention and education / skill levels</p>

STRATEGY	ACTION (Suggested / Examples)	RESPONSIBILITY	TIME LINE	MEASURABLE TARGET
Increase employment opportunities for Aboriginal people in NMAHS	Development, employment, appointment of: <ul style="list-style-type: none"> <li>• Aboriginal Mental Health Workers</li> <li>• Aboriginal senior officer position(s) under Section 50(d) of the EOI Act to improve the proportion of Aboriginal people in policy and senior officer positions</li> <li>• ALOs across sites / services with network to support and provide professional development</li> <li>• Aboriginal volunteer programs, in association with hospital volunteer services and ALOs</li> </ul>	Area Director of Workforce Sorry Team and NMAHS sites / services	June 2010  Annual reporting	NMAHS Aboriginal employment plan and site / service ARIS have identified targets for increased employment rates
<b>Healthy Partnerships</b>				
Form strategic partnerships to build Aboriginal community and wider public engagement	<ul style="list-style-type: none"> <li>• Liaise with Community Aboriginal Reference Group (link to Health Consumers' Council WA)</li> <li>• Develop a communication strategy that ensures a positive and sustainable relationship is maintained with the community</li> <li>• Development of alternative service models for Aboriginal patients who do not access mainstream health services; including linkages with Aboriginal Community Controlled Health Organisations</li> </ul>	NMAHS Public Health and Ambulatory Care and NMAHS sites / services	June 2010  Annual reporting	Area level strategic partnerships are maintained through the membership of the NMAHS Aboriginal Health Reference Group NMAHS and sites / services identify set targets including: <ul style="list-style-type: none"> <li>• Specific levels of participation in the 2010 Aboriginal Health Promotion conference</li> <li>• Number of local initiatives and events to be held</li> </ul>



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<b>Healthy Community</b>				
Contribute to the building of healthy Aboriginal communities through recognition of culture, health practices and inclusion	<ul style="list-style-type: none"> <li>• Health Service recognition of significant Aboriginal events such as:               <ul style="list-style-type: none"> <li>- National Sorry Day</li> <li>- National Reconciliation Week</li> <li>- NAIDOC week</li> <li>- National Aboriginal and Islander Children's Day</li> <li>- International Day of the World's Aboriginal People</li> </ul> </li> <li>• Empowering Aboriginal people to actively participate in decision - making regarding their own health care (Leadership Strategy)</li> </ul>	NMAHS Public Health and Ambulatory Care and NMAHS sites / services	Annual reporting	NMAHS and sites / services reported initiatives and events in service accreditation
<b>Healthy Hospitals, Health Services and Infrastructure</b>				
Increase visual presence of Aboriginal and Torres Strait Islander culture across NMAHS	<ul style="list-style-type: none"> <li>• Implement WA Health Guidelines and Protocols for Welcome to Country and Acknowledgement of Traditional Ownership</li> <li>• Develop a planned approach for an increased visual presence with:               <ul style="list-style-type: none"> <li>- Standard protocols, e.g. Welcoming ceremonies;</li> <li>- Aboriginal art displays.</li> </ul> </li> <li>• Reconciliation statement and an Aboriginal welcome at the main entrance of the facility</li> </ul>	NMAHS Public Health and Ambulatory Care and NMAHS sites / services	Annual reporting	NMAHS and sites / services report for service accreditation

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	<ul style="list-style-type: none"> <li>• Incorporate signage and way finding that is easily understood with large letters, simple language, pictures and traditional community symbols for health facilities/ services</li> <li>• Health Service Recognition of significant Aboriginal events (see Healthy Communities)</li> </ul>			
Design Health facilities to incorporate needs of Aboriginal Communities in relation to Cultural security and respect	<ul style="list-style-type: none"> <li>• Implement strategies outlined in the NMAHS <i>Aboriginal Cultural Respect and Security Framework for Facility Design, October 2008</i></li> <li>• Construction of an outdoor Aboriginal meeting place on existing campuses</li> </ul>	NMAHS Executive	Annual reporting	All new NMAHS facilities are reviewed using the NMAHS <i>Aboriginal Cultural Respect and Security Framework for Facility Design, October 2008</i>
Develop and implement NMAHS guidelines for the use of Aboriginal interpreter services	<ul style="list-style-type: none"> <li>• Review available guidelines for interpreter services</li> <li>• Determine appropriate guidelines for the NMAHS</li> <li>• Implement recommendations from the <i>Review of Language Services in WA Health System, April, 2008</i></li> </ul>	NMAHS Public Health and Ambulatory Care and NMAHS sites / services	June 2010  Annual reporting	NMAHS and sites / services guidelines in place and reported usage of interpreter services

STRATEGY	ACTION (Suggested / Examples)	RESPONSIBILITY	TIME LINE	MEASURABLE TARGET
<b>Healthy Resources</b>				
Appropriate distribution and use of available resources	<ul style="list-style-type: none"> <li>• Develop Aboriginal specific / friendly resource information for patients and their families</li> <li>• Develop video / DVD / educational materials about hospitals / health services for rural and remote Aboriginal patients coming to major teaching hospitals</li> </ul>	NMAHS sites / services Executive Director Population and Ambulatory Care	June 2010  Annual reporting	Each NMAHS site / service ARIS identifies appropriate distribution of resources and strategies and targets for use of these resources
Improve Aboriginal patient access to and attendance at NMAHS services, particularly to Outpatient Departments	<ul style="list-style-type: none"> <li>• Plans to reduce barriers and aid attendance at appointments e.g. use of outreach services</li> <li>• Advocacy and planning for accommodation and transportation for rural and remote Aboriginal patients, e.g. Co-operation with Office of Aboriginal Health, WACHS re Aboriginal Hostels</li> </ul>	NMAHS sites / services	June 2010  Annual reporting	Each NMAHS site / service ARIS identifies specific targets for increased attendance rate and reduced rate of missed appointments

## **References:**

Nyoongar Health Plan 2004

WA Aboriginal Health Impact Statement and Guidelines (2005)

WA Health Aboriginal Cultural Respect – Implementation Framework (2005)

Aboriginal and Torres Strait Islander Employment Framework Business Plan 2008-2013

National Aboriginal and Torres Strait Islander Health Council's "A Blue Print for Action – Pathways into the health workforce for Aboriginal and Torres Strait Islanders"





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