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SOUTH EASTERN NSW
An Australian Government Initiative

Report Card

2019 / 2020

Aboriginal health



COORDINARE acknowledges that Aboriginal people 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.

Introduction

The past year has severely tested South Eastern NSW Aboriginal communities as they experienced drought, floods, the Black Summer bushfires and the COVID-19 pandemic. These events will be remembered for generations.

The Black Summer bushfires stretched from the border with Victoria in Eden-Monaro, Bega Valley and Eurobodalla to Batemans Bay, across to Moruya, the Snowy Mountains and Braidwood and up towards Nowra, the Shoalhaven and Jervis Bay. For Aboriginal peoples, this sense of loss is acute and we recognise the pain felt from destruction of Country, with all its cultural, sacred meanings and associations.

The proactive leadership of the Aboriginal services towards planning the local response and management of the pandemic has contributed to the COVID-19 rate being the lowest of any indigenous population in the world.

COORDINARE is committed to improving Aboriginal health and wellbeing, and to commissioning culturally appropriate and sensitive health services for local Aboriginal peoples. We work closely with the four Aboriginal Community Controlled Health Organisations (Illawarra Aboriginal Medical Service, Katungul, South Coast Medical Service Aboriginal Corporation, and Waminda) and Aboriginal community members across the South Eastern NSW region to identify needs and co-design the best service responses.

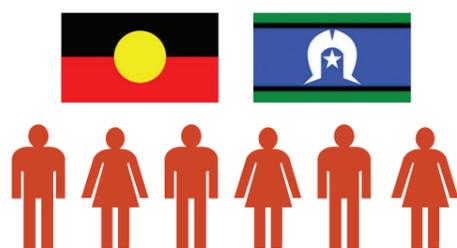
This Report Card is the second we have produced in this series, and it shows how our organisation continues to work with communities to 'close the gap' for Aboriginal peoples to improve their health, and emotional and cultural wellbeing.

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 have been reiterated in the National Aboriginal and Torres Strait Islander Health Plan 2013-2023.

Why is this a priority?

Approximately **25,806** people identify as Aboriginal in South Eastern NSW, or **4.2%** of our resident population



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

At COORDINARE, the term 'Aboriginal' is generally used in preference to 'Aboriginal and Torres Strait Islander,' in recognition that Aboriginal peoples are the original inhabitants of South Eastern NSW. Throughout this document, the word 'Aboriginal' will be used to represent Aboriginal and Torres Strait Islander peoples.



Aboriginal community engagement

COORDINARE uses a cooperative and respectful approach to engage with Aboriginal peoples to build and enhance relationships, and to grow our knowledge of local communities and their health and wellbeing needs, and to improve our own awareness and practices. The following demonstrates our commitment to representation and engagement with the Aboriginal community at all levels of our organisation:



A Local Elder is a member of our Community Advisory Committee.



Each of our Clinical Councils has representation of people who are **Aboriginal Health Workers** as well as general practitioners (GPs) who work in local Aboriginal Community Controlled Health Organisations (ACCHOs).

We seek the advice of COORDINARE's **Aboriginal Health CEO Forum**, which is convened regularly throughout the year.



Aboriginal community interviewers were engaged to survey the community regarding access to telehealth services during COVID-19.



Aboriginal community members were recruited to participate in patient journey mapping workshops in Southern NSW to better understand journeys of care, and to participate in the HealthPathways development process.



Aboriginal community members are regularly included on commissioning assessment panels to ensure cultural safety is considered during the commissioning process.



Aboriginal community members are encouraged to join and participate in 'Friends of COORDINARE'.

The Illawarra Shoalhaven Suicide Prevention Collaborative has an **Aboriginal working group** to drive culturally sensitive suicide prevention activities.



There is **Aboriginal representation** on the Suicide Prevention Plan implementation committee.



Response to the COVID-19 Pandemic

The leadership and response to the COVID-19 pandemic by the Aboriginal health sector has gained international recognition. Where possible, COORDINARE provided funding and assistance to the commissioned ACCHOs and other health partners in South Eastern NSW, with the aim of improving community pandemic education and ensuring providers could continue to deliver primary health and mental health services appropriately and safely. The following points describe some of our activities to support Aboriginal communities during the COVID-19 pandemic:

- ▶ **Short-term relief funding:** COORDINARE repurposed existing funding and directed it towards the planning, response and recovery from COVID-19 across the region. These funds were distributed across local ACCHOs to help develop a COVID-19 response plan; provide direct services to Aboriginal community members and facilitate good health; and ensure the safety and wellbeing of Aboriginal communities during the pandemic, including those at home in isolation and those living in isolated communities. A portion of the relief funding was provided for the communities of Wreck Bay, Jerrinjaa, Coomaditchie, Twofold Bay and Wallaga Lake.
- ▶ **Service continuity via telehealth:** COORDINARE assisted service providers to deliver health and care coordination services via telehealth and virtual health where appropriate, rather than conducting face-to-face and home visits, in order to reduce the risk of COVID-19 in Aboriginal communities. Providers of the Integrated Team Care (ITC), chronic pain self-management, mental health, alcohol and other drug programs, as well as general practices, were assisted to transition to an online or telehealth model. Providers were proactive in supporting people at higher risk of COVID-19 through the isolation period by conducting frequent welfare checks, and reaching out to older persons, those with complex mental health needs, and people known to drug and alcohol services.
- ▶ **Katungul GP respiratory clinic:** COORDINARE has been providing support, as required, to the Katungul Aboriginal Corporation Regional Health and Community Services in their operation of a mobile GP-led respiratory clinic in Bega and Eden. The purpose of the respiratory clinic is to assess, test and diagnose mild-to-moderate respiratory conditions including COVID-19, influenza and pneumonia.
- ▶ **Increased mental health services:** COORDINARE commissioned Wellways to employ an Aboriginal identified position to offer culturally sensitive mental health and wellbeing services for individuals and families during the pandemic.
- ▶ **COVID-19 cross agency reference group:** A cross agency reference group was established to consider epidemiological evidence; map government and non-government organisation (NGO) services and identify gaps; and to co-design and collaborate on communication approaches and pandemic response plans. Other issues examined included flu vaccination, Elders in isolation, schooling, mental health during COVID-19, and youth health. The members of the reference group included local ACCHOs, Local Health Districts, COORDINARE, Department of Education, Justice Health, Aboriginal Health and Medical Research Council (AHMRC), and NSW Government Aboriginal Affairs.
- ▶ **Home Isolation Tool roll-out:** COORDINARE partnered with Illawarra Shoalhaven Local Health District (ISLHD) and Southern NSW Local Health District (SNSWLHD) on strategies to support the Aboriginal community as a highly vulnerable group. This included the rollout of a household / family isolation plan (based on the AHMRC resources¹).
- ▶ **Distribution of educational and planning resources:** COORDINARE served as a distribution site for a suite of culturally sensitive COVID-19 health resources that had been designed by Aboriginal organisations including the AHMRC, or by state and federal health departments. COORDINARE distributed the resources to promote COVID-19 testing and to provide information regarding what to do following testing and during self-isolation. GP respiratory clinics were also provided with culturally appropriate resources and the COORDINARE website housed many online resources for our stakeholders and the community.
- ▶ **Development of COVID-19 social media videos:** COORDINARE partnered with Beyond Empathy, a not-for-profit community, arts and cultural development organisation, to create #swabmob, a campaign featuring videos made by young people, for young people. Two of the social media clips featured young Aboriginal people. The videos were shared across a range of platforms (Facebook, Instagram and Twitter) to encourage young people to undergo COVID-19 testing.

¹ Aboriginal Health and Medical Research Council of NSW. Home Isolation for Patients. <https://www.ahmrc.org.au/resource/home-isolation-for-patients>



Chronic Conditions

Integrated Team Care (ITC)

The Integrated Team Care (ITC) program aims to improve the management of chronic conditions in Aboriginal communities by enhancing care coordination and access to services, as well as by providing supplementary services. The ITC program provides eligible people with a dedicated care coordinator to work closely with them, their GP, practice nurse, allied health practitioners, and specialists as part of ongoing care.

We currently commission 10 full time care coordinators across the region. We partnered with the following organisations to implement the ITC program:

- ▶ Illawarra Aboriginal Medical Service (IAMS), South Coast Medical Service Aboriginal Corporation (SCMSAC), Katungul and Waminda to provide care coordination services for people with chronic disease
- ▶ Grand Pacific Health to provide care coordination services for Aboriginal peoples with chronic disease who access mainstream GP services.

more than 1,050 Aboriginal peoples in South Eastern NSW with chronic conditions received care coordination support from the ITC program in 2019/20



more than 3,680 supplementary services were funded



We are working with current providers to review the strengths and limitations of the current model and to make recommendation on any needed improvements. We have also implemented a data gathering platform to ensure that services and outcomes are captured in a standardised format.

Reconnecting to Country - Clinical Redesign Project

The Reconnecting to Country project aims to provide culturally safe, seamless, appropriate care and positive person-centred experiences for Aboriginal peoples transitioning between acute and community primary health care in the Illawarra Shoalhaven region. The project is part of the Agency for Clinical Innovation Redesign program and is a collaboration between ISLHD, Grand Pacific Health, COORDINARE, and Waminda. Some of the issues tackled in this project are service duplication, inadequate referral processes, delays in primary health care supports and care coordination, and improving understanding of service providers and staff regarding appropriate health service pathways. This project is also supporting two care coordinators to complete a post graduate certificate in Clinical Redesign through the University of Tasmania.

Chronic pain

The Chronic Pain Program aims to ensure people living with chronic pain in South Eastern NSW experience improved functional capacity through better management of their condition. In 2018, COORDINARE partnered with SNSWLHD, St Vincent's Hospital Sydney Pain Clinic and the NSW Agency for Clinical Innovation to implement a quality improvement approach to chronic pain management. The activities include telehealth access to a specialist multidisciplinary chronic pain service provided by the hospital, educational events for local primary health practitioners, and the provision of allied health facilitated Chronic Pain Management Programs (CPMP) for mild-moderate chronic pain sufferers. CPMP was offered as an online program when COVID-19 impacted face-to-face services. In 2019/2020, COORDINARE commissioned CPMP in five locations across Southern NSW.



The proportion of participants in these programs identifying as Aboriginal has increased to 7.2%



Prevention initiatives

Smoking cessation

Since 2018, COORDINARE has commissioned the Australasian Society of Lifestyle Medicine to trial Programmed Shared Medical Appointments (pSMA) for smoking management in our region.

The pSMA program now offers smoking management along with a structured educational component and procedure manual and guides. As the program proved successful among the Aboriginal community at the trial sites, with approximately 18% of participants identifying as Aboriginal, a pilot of pSMA for smoking management was conducted at Waminda. The pSMA program is now being adapted specifically for Aboriginal peoples, re-named as *Medical Yarning*, and is also being extended to include a weight management module.

Health promotion

As part of our inaugural Pitch Night initiative, Coomaditchie United Aboriginal Corporation received funding for their *Deadly Women Deadly Kids* program which offers a unique and much needed approach to meeting the needs of communities who traditionally don't access facilities, or mainstream health services. *Deadly Women Deadly Kids* tackles some of the drivers of poor health outcomes for Aboriginal peoples, by encouraging families to be more active and maintain a healthy diet. Program participants learn about the importance of staying healthy through active participation in exercise and sport activity across their lifespan. They also engage in growing their own food, both traditional and organic, and developing and sharing healthy meals with the produce.

These initiatives successfully transitioned to online in response to COVID-19.



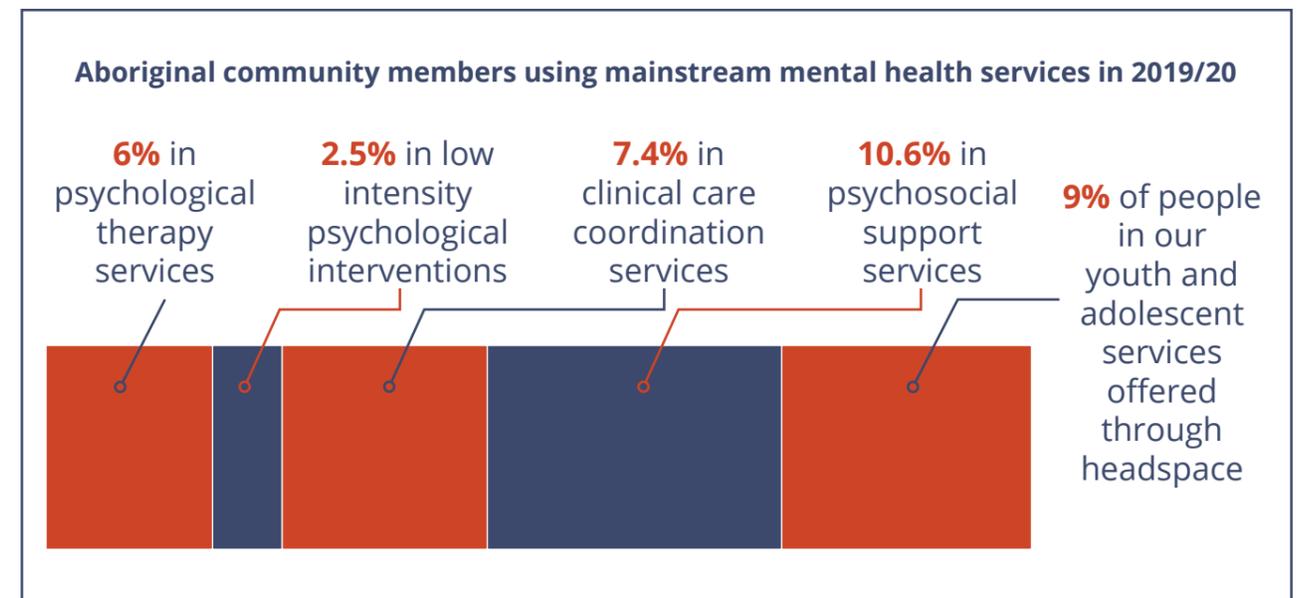
Mental Health

To provide culturally safe mental health support, we commission ACCHOs to deliver mental health services across South Eastern NSW.

We currently commission the following Aboriginal mental health services:

- ▶ SCMSAC focuses on resilience building and psychological support as part of their Strong Foundations program.
- ▶ IAMS, Katungul and Waminda provide mental health services including early intervention and resilience building, psychological therapies, and mental health nursing services Waminda provides an after-hours support line for Aboriginal peoples with mental health and drug and alcohol issues who are at risk of self-harm or suicide.

As well, Aboriginal people can choose to access our mainstream mental health service providers, who report a substantial proportion of Aboriginal consumers in most priority areas:



Bushfire recovery

Community wellbeing is vital to the resilience and recovery of people impacted by bushfires, as well as the emotional healing of individuals. The following were provided to Aboriginal communities affected by bushfires to assist with community recovery and healing:

Mental health services. COORDINARE commissioned services which provided counselling to individuals and families impacted by bushfires. We commissioned Katungul to provide additional mental health clinical services to Aboriginal people experiencing increased distress or trauma as a result of the bushfires.

Natural disaster community grants. Across the region, COORDINARE funded bushfire-affected communities to design and deliver community activities to strengthen social connectedness and emotional wellbeing and assist in their recovery. Community activities included sports, Aboriginal healing and recovery, arts programs, environmental renewal, music and local gatherings. Grassroots community-led health and wellbeing initiatives activities included:

- ▶ Ulladulla Local Aboriginal Land Council - 'Weave & Yarn'
- ▶ Age Matters - 'Elders Cultural Healing Gathering'
- ▶ Narooma High School - 'NAIDOC Week Activities'





Drug and Alcohol

Our commissioned providers continue to increase the number and effectiveness of drug and alcohol treatment services in our region as described below:

- ▶ Waminda is the lead agency for a **community brokerage service** for Aboriginal women and their families who are experiencing alcohol and other drug addictions. The service, which was co-designed with all four local ACCHOs, continues to increase access to necessary services for Aboriginal people in a culturally sensitive way
- ▶ Marathon Health provides **care coordination for young Aboriginal people in Yass** who seek assistance in negotiating care from a range of health and community providers
- ▶ Directions Health Services operates the **South Eastern NSW Pathways** and **Arcadia house (residential withdrawal and rehabilitation program)**, in which 19% of the clients identified as Aboriginal
- ▶ Lives Lived Well oversees the **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 delivers the **Shoalhaven Bridge Program** which provides non-residential treatment and support for individuals and their families, in which 23.7% of the clients identified as Aboriginal.

In 2019, the Network of Alcohol and Other Drugs Agencies (NADA) released the resource, *Treatment guidelines for working with Aboriginal and Torres Strait Islander People in non-Aboriginal settings*. The Guideline was funded and supported by a consortium of six PHNs including COORDINARE and developed with consultation and advice from Aboriginal peoples and communities. The guidelines aim to support services to establish better relationships and linkages with Aboriginal organisations and communities, and to provide practical guides and resources to support workers and organisations to improve their service delivery when working with Aboriginal service users. An audit tool was also developed to help support the implementation of the guidelines. The guideline can be found at www.nada.org.au/wp-content/uploads/2020/06/NADA-Aboriginal-Guidelines-Web-2.pdf



End of life care

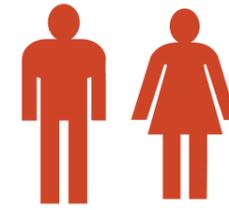
To improve outcomes for patients with palliative needs and their families and carers, we are working towards supporting and strengthening the coordination and management of palliative and end of life care.

The following projects are continuing:

- ▶ Waminda is improving 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 resources to Aboriginal communities and their health care workers
- ▶ COORDINARE is partnering with ISLHD to co-fund an Aboriginal Health Worker in palliative care to ensure there is training and 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 practices in order to enable clinicians to promote the uptake of Aboriginal specific services and health assessments.

In 2019/20, the SPDS project was able to achieve a **5% improvement** in the proportion of people with their Aboriginal status recorded at their primary care service.



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 patients to local specialists and services. In order to refine and document referral pathways for better access to appropriate services for Aboriginal peoples, we have established localised HealthPathways referral guides which have Aboriginal health priorities factored into pathway prioritisation and review processes. It includes referral pathways for the ITC program, Aboriginal health assessments, and training for cultural competencies.



For the ACT & Southern NSW HealthPathways program, **an Aboriginal reference group has been established** so that Aboriginal health professionals are included in pathway development for conditions with high prevalence to the Aboriginal population.



Improving our understanding

COORDINARE is committed to working closely with our Aboriginal communities. We strive to be culturally sensitive, respectful and meaningful in all that we do. We take this opportunity to thank those who have worked with us along this journey of improving our own cultural understanding and sensitivity and weaving this into our daily thinking.



Staff **continued to develop their cultural awareness** by participating in a learning workshop run by Associate Professor Lynette Riley, a Wiradjuri and Gammilaroi woman and Senior Lecturer at the University of Sydney.

COORDINARE launched our **Reflect Reconciliation Action Plan** in October 2019, and we have continued to reflect on and enhance our approach and practices as we work towards a deeper cultural awareness and sensitivity that can be demonstrated in our daily working actions. The RAP defines strategies to foster healing and recognition – providing priorities and guidelines to help us engage more meaningfully with Aboriginal communities, respecting their histories and cultures.



The artwork used in this report was painted by Walbunja woman Loretta Parsley. She is a traditional Custodian of Yuin country and has a strong connection to the South Eastern coast of NSW. The painting is in the form of a cultural map and depicts the South Eastern NSW PHN region.

References

Ghosh A, 2018. Brief Aboriginal health snapshot - 2020, COORDINARE – South Eastern NSW PHN.