

First Nations
Health Equity
Implementation Plan
2022-2025









#### **Artwork Acknowledgment**

We would like to acknowledge artwork produced for Gold Coast Health by Riki Salam, We are 27 Creative, used throughout this document.

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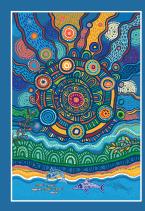
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## **Contents**

nt	roduction	٠5
	Background and context	. 5
	Implementation Plan	٠5
	Monitoring and Evaluation	. 6
mĮ	plementation Plan Actions	. 7
	Performance Measures	13



## Introduction

### **Background and context**

A First Nations health equity-centred approach aims to address factors that lead to poorer health outcomes, specifically addressing barriers to accessing care, including systemic and insitutionalised racism.

First Nations health equity aims to achieve life expectancy parity with Aboriginal peoples and Torres Strait Islander peoples by 2031.

The development and implementation of First Nations Health Equity Strategies by Hospital and Health Services (HHSs) is a legislative requirement under the Hospital and Health Boards Act 2011 (HHB Act) and the Hospital and Health Boards Regulation 2012 (HHB Regulation).

The legislative amendments to the HHB Act and the HHB Regulation form a cornerstone of the First Nations health equity reform agenda to reshape and redesign the delivery of healthcare based on what First Nations peoples need and want to reach their full health potential. The aim of the First Nations health equity reform agenda is to embed First Nations voices across the health system, to see more First Nations peoples working across the health system, and to create a better coordinated and culturally capable health system.

# First Nations Health Equity Strategy Implementation Plan

Gold Coast Hospital and Health Service's (GCHHS) First Nations Health Equity Implementation Plan will operationalise the GCHHS First Nations Health Equity Strategy 2022, detailing the vision, actions and performance measures Gold Coast Health will use to achieve health equity.

This approach promotes a partnership with First Nations peoples in the design, implementation and delivery of services and programs for First Nations peoples. The Gold Coast Aboriginal and Torres Strait Islander Community expect Gold Coast Health to collaborate, internally and externally, in a collective effort to ensure services are culturally relevant to their needs and values.

The Plans focuses on the six co-designed priority areas defined within the GCHHS First Nations Health Equity Strategy 2022. Developed in collaboration with internal and external stakeholders, this plan elevates the Community voice and promotes collaborative action to achieve life expectancy parity.

The intention is clear; design and deliver health services with Aboriginal and Torres Strait Islander peoples, rather than the historical system-user relationship.

- GCHHS First Nations Health Equity Strategy 2022-2025





### Monitoring and evaluation

The First Nations Health Equity Key Performance Measures (KPM) are a legislative requirement under the HHB Regulation (2012). All Hospital and Health Services are required to provide an annual public report on the following set of common measures:

- Decrease potentially avoidable deaths
- Increase the proportion of First Nations babies born to First Nations mothers and non-First Nations mothers with healthy birthweights
- Decrease the rate and count of First Nations suicide deaths
- Increase the proportion of First Nations adult patients on the general care dental waitlist waiting for less than the clinically recommended time
- Elective Surgery increase the proportion of First Nations patients treated within clinically recommended time
- Specialist outpatients decrease the proportion of First Nations patients waiting longer than clinically recommended for their initial specialist outpatient appointment
- Increase the proportion of First Nations people completing Advance Care planning
- Increase the annual year-on-year proportion of First Nations workforce representation to demonstrate progress towards achieving workforce representation at least commensurate to the First Nations population
- Increase the proportion of First Nations people
  who had their cultural and spiritual needs met
  during the delivery of a healthcare service
  (inpatient PREMS survey) no reporting until data
  quality has improved.

A set of measures tailored for Gold Coast Health are included in the inaugural Implementation Plan, and where possible, existing data systems are used to inform effective implementation and monitoring of project outcomes. All services are required to collect appropriate datasets that inform the planning and delivery of services, and report progress toward First Nations Health Equity outcomes. Progress reports will be provided to the:

- Board, to ensure access to health trend data that informs program and policy development to best meet local priorities and need
- Community, in the form of an annual Report Card to promote transparency and informed decision making.

Support with implementation and reporting can be provided by the Aboriginal and Torres Strait Islander Health Service. Contact the First Nations Health Equity team on GCHFirstNationsHealthEquity@health. qld.gov.au for assistance.

First Nations Health Equity is a journey the entire health service is taking together. Everyone has a role to play, and we recognise that collaboration is a vital component of success.

- Kristy Hayes, Senior Director, Aboriginal and Torres Strait Islander Health Service

## **Implementation Plan Actions**

Actions have been developed against each of the Health Equity Strategy's six Key Priority Areas (KPAs):



Actions commenced in 2022 and are based on priorities and sequencing to provide the progressive achievement of outcomes.

Further planning details will be developed from Implementation Plan consultation (accountable leads, baseline data, targets and costings).

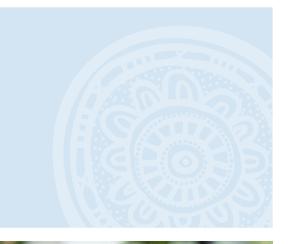


	Key Result Area 1: Cultural Safety		
	2022/2023	2023/2024	2024/2025
What will we see?	Increased accountability through the inclusion of the local First Nation voice advising Gold Coast Health on appropriate programs of work.  Cultural safety embedded in Gold Coast Health facilities, models of care and programs.	Improved reporting of instances of racial discrimination, lateral violence and institutional racism within the service.  The organisation's cultural capacity is supported with evidence-based cultural capability and racial equity education and training.	
What actions will drive change?	<ul> <li>Establish the First Nations Health Equity Committee.</li> <li>Collaborate with Traditional Custodians to include culturally significant practices in the development and design of facilities.</li> <li>Work with First Nations artists to create a welcoming, culturally sensitive, and safe environment at the Tugun Satellite hospital.</li> </ul>	<ul> <li>Develop processes and procedures for escalating and resolving complaints of racism, lateral violence and discrimination.</li> <li>Develop collateral to promote how and why patients can safely report an incidence of racial discrimination and lateral violence.</li> <li>Develop formal cultural capability and racial equity education in the context of Australia's First Nations people in partnership with First Nations Community, as part of mandatory training – support a South East Queensland regional approach.</li> <li>Undertake a gap analysis within the GCHHS Medical Post Graduate Years program against the National Framework for Prevocational Medical training in relation to cultural safety and partner to develop education opportunities to address identified gaps.</li> <li>Establish safe communication spaces, such as "Yarning" to allow for truth telling throughout Gold Coast Health, facilitated in partnership with the Aboriginal and Torres Strait Islander Health Service and Cultural Capability.</li> <li>Implement the matrix for identifying, measuring and monitoring institutional racism within public Hospitals and Health Services biennially.</li> <li>Install and display Acknowledgement of Country across Gold Coast Health facilities.</li> <li>Partner with Traditional Custodians to produce a digital Welcome to Country resource which can be utilised in GCHHS Mandatory training.</li> </ul>	Develop procedures to guide the creation of welcoming, culturally sensitive, and safe environments that promote First Nations cultural beliefs and practices within all facilities.

	Key Result Area 2: Access		
	2022/2023	2023/2024	2024/2025
What will the Community see?	An Aboriginal and Torres Strait Islander Health Service structure which supports attainment of First Nations Health Equity Strategy priorities.  Increased targeted preventative health programs, underpinned by a strengths-based, cultural determinants and collaborative model.  First Nations Subsidy providing patients access to discharge medications from hospital with no out-of-pocket expense.	An integrated consumer care journey through coordinated shared care.	
What actions will drive change?	<ul> <li>Review existing Aboriginal and Torres Strait Islander Health Service establishment and submit establishment changes that support the First Nations Health Equity agenda.</li> <li>Engage Aboriginal and Torres Strait Islander Community in the definition of cultural determinants as strength-based action in program and service design and delivery.</li> <li>Develop collaborative programs in response to GCHHS First Nations Local Area Needs Assessment including:         <ul> <li>Yabbabah Men's Health and Wellbeing program.</li> <li>Sistas Shawl initiative.</li> </ul> </li> <li>Implement and communicate the First Nations Subsidy to Gold Coast Health employees and community.</li> </ul>	<ul> <li>Develop priority waitlists (inpatients and outpatients) where Aboriginal and Torres Strait Islander patients are prioritised (relevant to health need).</li> <li>Develop partnerships with Kalwun and Gold Coast Primary Health Network to provide culturally safe and responsive shared care, transition, and discharge.</li> <li>Develop, implement and evaluate the Sistas Shawl initiative in collaboration with BreastScreen Queensland Gold Coast Service, Kalwun Health and the Gold Coast Primary Health Network.</li> <li>In partnership with Kalwun Health Service, co-design tools and/or resources to support Advanced Care Planning (e.g. My Journey to Dreaming diary).</li> <li>In partnership with the Institute for Urban Indigenous Health, co-design and implement a dental program to provide oral health services for First Nations People who are otherwise unable to access services under existing arrangements.</li> </ul>	<ul> <li>Support the regional development of partnership models for palliative care.</li> <li>Develop a local First Nations service catalogue for communities as part of the Local Area Needs Assessment process.</li> </ul>

What actions will drive change? (continued)

- In partnership with Kalwun and the Gold Coast Primary Health Network establish an Integrated Multidisciplinary Risk Identification and Navigation Team to proactively address predictable risk factors for prolonged hospital admission within community-based clients and facilitate consumer-led solutions for these issues.
- Engage PwC's Indigenous Consulting to undertake a review of the GCHHS Mental Health Services current care for First Nations consumers to identify appropriate care planning and care pathways.





	Key Result Area 3: Determinants		
What will the Community see?	Strong collaboration with Aboriginal and Torres Strait Islander organisations. Increased GCHHS spend within First Nations business sector.		
What actions will drive change?	<ul> <li>Include First Nations business identifier field in procurement processes.</li> <li>Capture within Strategic Agreements, Memorandums of Understanding and project management documentation a range of collaborative initiatives that promote cultural strength, social connections, health promotion.</li> <li>Participate in networking opportunities which translate into collaborative projects and reduced duplication of service.</li> <li>In partnership with the First Nations Community, implement and evaluate an early years hand hygiene program which includes First Nations perspectives and activities.</li> </ul>		

	Key Result Area 4: Service and data enhancement		
	2022/2023	2023/2024	2024/2025
What will the Community see?	Improved accuracy and consistency in Indigenous status identification.  The delivery of equitable care which is evidence -based and culturally informed.		Progress towards a Gold Coast Health Reconciliation Action Plan.
What actions will drive change?	<ul> <li>Deliver education to all staff to ask all consumers if they identify as Aboriginal and/or Torres Strait Islander utilising a system wide policy and procedure alongside the "Don't be Shy! Identify." program.</li> <li>Promote the National Safety and Quality Health Service Standards specific actions for Aboriginal and Torres Strait Islander health in staff education and training programs.</li> </ul>	<ul> <li>Review the mandatory Cultural Practice Program evaluations and identify co-design opportunities for enhancement.</li> <li>Recurrently fund new programs and services for sustainable service delivery.</li> <li>Partner with Queensland Ambulance Service to co-design opportunities and programs which support the front-line emergency response.</li> <li>Support the regional development and implementation of an Aboriginal and Torres Strait Islander Suicide and Aftercare Action Plan.</li> </ul>	<ul> <li>In partnership with Health and Wellbeing         Queensland, empower and upskill First Nations         health professionals in clinical prevention         through education and training and raising         awareness of referral pathways to culturally         appropriate community-based prevention         programs.</li> <li>First Nations staff supported to undertake quality         and/or research initiatives which contribute to a         regional body of knowledge.</li> <li>Support the regional development and         implementation of Aboriginal and Torres Strait         Islander Suicide Prevention and Aftercare Action         Plan.</li> <li>Support collaborative regional research which         promotes models of care that consider Aboriginal         and Torres Strait Islander traditional medicine         and healing practices to offer patient choice of         care.</li> </ul>

	Key Result Area 5: Service delivery and partnerships		
	2022/2023	2023/2024	2024/2025
What will the Community see?	Increased awareness of Aboriginal and Torres Strait Islander Health Service and targeted programs.	Improved service delivery, and seamless treatment and referral pathways.	
What actions will drive change?	<ul> <li>Extend the GCHHS Executive Leadership Team membership to include a First Nations representative with a focus to drive First Nations health equity.</li> <li>Support First Nations representation on key HHS governance committees including GCHHS Clinical Council and Human Research Ethics Committee.</li> <li>Develop a health equity communication and engagement strategy to lead culturally safe and strengths-based communication with Aboriginal and Torres Strait Islander people and provide education, promotion and resources on targeted programs throughout the health service.</li> <li>Increase awareness of Aboriginal and Torres Strait Islander Health Service and targeted programs through an internal and external eNewsletter.</li> <li>Review the Karulbo Network (GCHHS's partnership program), to collaborate and involve the Community in decision making regarding preferred healthcare solutions.</li> </ul>	<ul> <li>Host an annual showcase of exceptional services delivered with the Aboriginal and Torres Strait Islander communities.</li> <li>Collaborate with Health Equity Service Delivery Stakeholders to produce a First Nations health consumer engagement framework and strategy.</li> </ul>	<ul> <li>Develop engagement, consultation and codesign guidelines to be referred to when creating or delivering services that have an impact on Aboriginal and Torres Strait Islander people.</li> <li>In partnership with the education and Community sector, host an annual Aboriginal and Torres Strait Islander health symposium.</li> </ul>



What will the Community see?  Safe, inclusive, and respectful workplaces where staff are valued and supported. Increased Aboriginal and Torres Strait Islander representation within the workforce. A proactive Aboriginal and Torres Strait Islander Employee Network. Engagement of Aboriginal and Torres Strait Islander students in scholarships and traineeships.  Promote Gold Coast Health's commitment to First Nations Health Equity in all role descriptions. Develop, implement and evaluate a Gold Coast Health School-based scholarship program, in partnership with Queensland Aboriginal and Torres Strait Islander formes Strait Islander foundation (QATSIF). Implement and evaluate the Deady Start traineeship program. Host student open-days within the health service to promote opportunities and career pathways within Gold Coast Health. Establish an Aboriginal and Torres Strait Islander Employee Network with a Terms of Reference and Annual action plan supported by Diversity and Inclusion. Create an Aboriginal and Torres Strait Islander Role Description Template category in the GCHHS online Role Description Depository.  Povelop and administer a First Nations employee satifaction survey interview process. Develop and administer a First Nations employee satifactions unverse and include opportunities for student placements, rainceships and as cholarships. Develop and administer a First Nations employee stellar First Nations employee separation exit survey interview process. Develop and administer a First Nations employee stellar first Nations employee separation exit survey interview process. Develop and administer a First Nations employee stellar first Nations employee stellar first Nations employee separation exit survey interview process. Develop and administer a First Nations employee stellar first Nations employee separation exit survey interview process. Develop and administer of First Nations employee stellar first Nations employee separation exit survey interview process. Develop and declared page on the Gold Coast Healt	Key Result Area 6: A strong and capable workforce			
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## **Performance Measures**

KRA 1: Cultural Safety	<ul> <li>Increase the percentage of staff completing Cultural Practice Program to 95%.</li> <li>Increase the percentage of staff reporting "Leaders across my organisation take responsibility for building cultural capability of employees," in the Going For Gold Staff Survey.</li> <li>Improve the biennial score of the matrix for identifying, measuring and monitoring institutional racism within public hospitals and health services.</li> <li>Decrease the number of racial discrimination consumer and/or employee complaints.</li> </ul>
KRA 2: Access	<ul> <li>Decrease potentially avoidable deaths.</li> <li>Increase the proportion of First Nations adult patients on the general care dental waitlist waiting for less than the clinically recommended time.</li> <li>Elective Surgery – increase the proportion of First Nations patients treated within clinically recommended time.</li> <li>Specialist outpatients – decrease the proportion of First Nations patients waiting longer than clinically recommended for their initial specialist outpatient appointment.</li> <li>Decrease the percentage of First Nations people who Discharge Against Medical Advice.</li> <li>Decrease the percentage of First Nations consumers failing-to-attend specialist and non-specialist outpatient appointments to equivalent or less than non-First Nations consumers.</li> <li>Increase the proportion of First Nations consumers receiving First Nations Subsidy.</li> <li>Increase the proportion of First Nations people completing Advance Care planning.</li> </ul>
KRA 3: Determinants	• Increase the annual value of spend with First Nations businesses in procurement activities with a value of greater than or equal to \$5000.
KRA 4: Service and data enhancement	<ul> <li>Decrease the number of 'not stated/unknown' responses in the Indigenous status field towards zero.</li> <li>Increase the proportion of baseline funds allocated to First Nations health services and programs.</li> <li>Increase the proportion of First Nations babies born to First Nations mothers and non-First Nations mothers with a healthy birth weight to 91%.</li> <li>Decrease the rate and count of First Nations suicide deaths towards zero.</li> <li>Increase the proportion of First Nations people receiving face-to-face community follow up within 1-7 days of discharge from an acute mental health inpatient unit.</li> <li>Increase the proportion of First Nations people who had their cultural and spiritual needs met during the delivery of a healthcare service (inpatient Patient Reported Experience Measures survey) – no reporting until data quality has improved.</li> </ul>
KRA 5: Service delivery partnerships	<ul> <li>Increase the number and type of formalised partnerships with First Nations organisations.</li> <li>Increase the engagement of users on the GCHHS Aboriginal and Torres Strait Islander health and wellbeing microsite.</li> </ul>
KRA 6: A strong and capable workforce	<ul> <li>Annual (year-on-year) increase of First Nations workforce representation to demonstrate progress toward achieving workforce representation, at least commensurate to First Nations population.</li> <li>Increase the engagement of First Nations student participation in scholarships, traineeships, and Learning Experience and Academic Placements.</li> <li>Increase the percentage of staff reporting "I feel that my organisation provides a culturally safe work environment for Aboriginal and Torres Strait Islander peoples," in the Going For Gold Staff Survey.</li> <li>Increase the proportion of Identified positions that are filled.</li> </ul>

If the grassroots people are not having the say, then it is not going to go anywhere. All that's going to do is tick boxes and the grassroots people will not have their needs met. Conversations are fantastic in bringing forward what we need to say, and we need more opportunities to do this...







