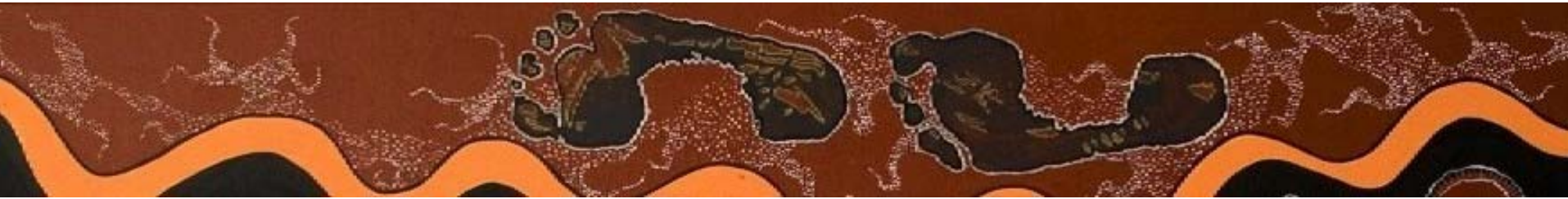


# Workshop 3: Successful engagement of the Aboriginal community



ICAP Artwork by: Marilyn Nicholls

**Participate in Health Conference 2007:  
Making it Work**



# Welcome to Country

- **Melanie Fraser**

Liaison Officer, Health Commissioners Office and member of the Participation Advisory Committee



# Introductions

- **Chair – John Willis**
  - Project Officer, St.Vincent's, Improving Care for Torres Strait Islander Patients (Metro) and member of Participation Advisory Committee
- **Melanie Fraser**
  - Liaison Officer, Health Commissioners Office and member of Participation Advisory Committee
- **Carole Fraser – Consumer**
- **Karen Heap**
  - CEO, Ballarat and District Aboriginal Cooperative
- **Leanne Andrews**
  - Project Officer, DHS, Improving Care for Torres Strait Islander Patients (Rural)



## Goals of Workshop

- Challenges - Experiences of health services from an Aboriginal consumer perspective
- Learnings – What works and what doesn't work
- Success factors - How to gain effective input from the Aboriginal community
- Rural example – Ballarat Health Service/Ballarat and District Aboriginal Coop
- Metro example – St.Vincent's/Victorian Aboriginal Health Service



# Workshop Outline

- Victorian government policy - ICAP
- Aboriginal consumer perspectives
- Consumer complaints process
- Success factors
  - Rural example – Ballarat Health & Ballarat and District Aboriginal Cooperative
- Rural learning's and group discussion
- Success factors
  - Metro example St.Vincent's & Victorian Aboriginal Health Service
- Metro learning's and group discussion
- Summary and Conclusion



# Workshop Progress

- Victorian government policy – John Willis



# Improving Care for Aboriginal and Torres Strait Islander Patients (ICAP)

- Respond to the current health issues facing Aboriginal people
- Address the issue of under-identification and late presentation to hospitals by Aboriginal patients
- Improve the way health services are provided to the Aboriginal community making them more accessible



# Progress and Achievement Focus

- Clear focus on the outcomes
- Cultural change in health services leading to improved identification and health care for Aboriginal patients
- Aboriginal patients are everybody's business
- Establishing and strengthening relationships with Aboriginal people and organisations
- Four key result areas:
  - culturally aware staff
  - relationships with Aboriginal communities
  - discharge planning
  - primary care referrals



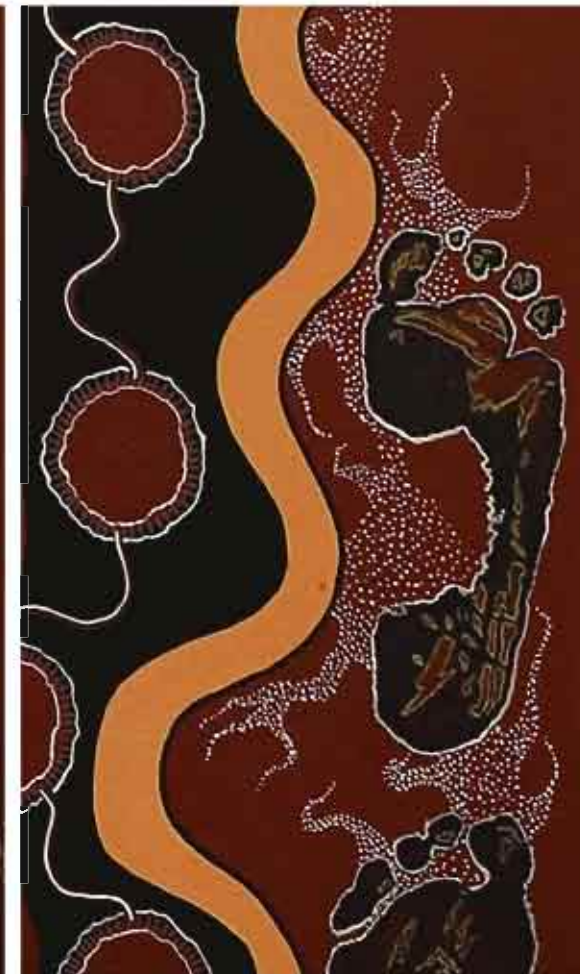
# ICAP Calendar 2007

- Celebration of successful partnerships between health services and Aboriginal organisations
- Acknowledgment of service improvements across the state
- Distribution included:
  - Aboriginal staff in health services
  - Health service management across the state
  - Aboriginal community controlled health orgs across the state
- Artwork by Marilynne Nicholls

# Aboriginal communities and health services working together

Improving Care for Aboriginal and Torres Strait Islander Patients (ICAP)

## Calendar 2007



Artwork by Marilyn Nicholls

[www.health.vic.gov.au/koori/icap](http://www.health.vic.gov.au/koori/icap)

A Victorian  
Government  
initiative



# Partnerships with real outcomes

## Aboriginal Liaison Policy Advisory Committee



*Aboriginal Liaison Policy Advisory Committee: L to R front row: John Willis, Senior Project Officer Improving Care for Aboriginal and Torres Strait Islander Patients (ICAP), Michelle Smith, Koon Mental Health Liaison Officer RCH, John Starway, Executive Director Clinical Support Services Division RCH. Back row left to right: Nina Kirby, Aboriginal Family Support Worker RCH, Jane Miller, Chief Social Worker RCH, Nicole Waddell, Onemda Vic Health Koori Health Administration and Community Development Officer, University of Melbourne, Lin Oke, Chief Occupational Therapist RCH, Rebecca Welsh, Team Leader Administration Team Social Work Dept, RCH, Angela Clarke Deputy Director (community programs), Community Development Worker Onemda, Vic Health Koori Health Unit, University of Melbourne and Senior Consultant on Aboriginal Cultural Issues RCH. NOT IN THE PHOTO Margaret Clarke VACCHO, Selena White Aboriginal Liaison Officer RCH*

The ICAP Program affirms the principles and practices which have long guided the Royal Children's Hospital (RCH). RCH is committed to making our hospital a welcoming and culturally affirming place for Aboriginal children and their families. At RCH we have had an Aboriginal Liaison Policy Advisory Committee (ALPAC) since 1993. The committee is made up of the hospital's Aboriginal staff, other senior staff and representatives of Aboriginal Community Controlled Organisations. This guides our policy decision-making and

helps us work constructively with the community and promote Aboriginal health issues in the hospital.

Our Aboriginal 'safe space' the Aboriginal Family Support Unit welcomes families who want a cuppa, a quiet place to sit out of the hospital environment, or who are looking for the support of the Aboriginal staff. We are one of the few hospitals that also employs a specialist Aboriginal worker in its Mental Health Service. The Mental Health Service has a Memorandum of Understanding with the Victorian Aboriginal

Health Service (VAHS) and has its own Advisory committee. We are committed at Executive and Board level to improving Aboriginal Child Health, demonstrated by our Board Chair raising the flag at the front of the hospital in Journey of Healing Week. We are also very excited about the partnership between the hospital and Aboriginal Hostels that has led to the Aboriginal Health Hostel across the road from the hospital where our families can stay.

**ROYAL  
CHILDREN'S  
HOSPITAL**



# 2007

## May

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26 Sorry Day
27 1967 Referendum Anniversary Reconciliation Week Commences	28	29	30	31		

# Partnerships with real outcomes

Echuca Regional Health working in partnership with Njernda Aboriginal Medical Service



From L to R: Lyn Jefferson, Renal Dialysis Nurse, Echuca Regional Health (ERH), Lindy Nikkolson, Aboriginal Hospital Liaison Officer, John Mitchell, Manager Njernda Aboriginal Corporation (NAC), Gary Givcs, Health Worker NAC, Anna Marsh, Community Nurse NAC, Caroline Weaver, Physiotherapist ERH, Sue Storm, Renal Dialysis Unit Nurse, ERH.

The objective of ICAP is to promote effective partnerships between all healthcare providers for the benefit of Aboriginal patients. However, in the past there have been some complex and difficult relationships between Aboriginal and non-Aboriginal organisations. The journey travelled by Aboriginal people regarding their relationship with mainstream health services has made them strong, resilient and aware of when approaches are inappropriate.

Echuca Regional Health and Njernda Aboriginal Corporation formerly worked in isolation, with the development of the ICAP reform, both organisations have had to remove barriers to patient care and form better working relationships. We now know we can

support each other when delivering services to the Aboriginal community. Over the past year we have put a number of reforms in place, such as the development of the Continuum of Care Committee. The function of this committee, which comprises staff from both organisations, is to ensure that the Aboriginal community has access to the appropriate services to effectively manage their health and well-being.

Here are the observations of the Aboriginal Hospital Liaison Officer at Echuca Regional Health, Lindy Nikkolson:

*'Here in Echuca, we like to view life with a holistic perspective and we use this to our advantage. Both healthcare organisations have*

*developed a Continuum of Care Committee, to deal with business. This committee was formed as a result of inviting consumers from the community to have input and share a few of their own stories, as to how both services could improve on their service delivery. There was evidence to suggest that we needed to take care of business, so staff members from both organisations have moved in a forward direction. We hope you enjoy this ICAP Calendar cause we've certainly enjoyed the journey of working within the new ICAP reforms, delivered in partnership between the Department of Human Services (DHS) and Victorian Aboriginal Community Controlled Organisation (VACCHO).'*



ECHUCA  
REGIONAL  
HEALTH

Njernda Aboriginal Corporation



# 2007

## September

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
30						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21 Term 3 Ends	22
23	24	25	26	27	28	29

# ICAP Identity Poster

- Photo of local community members on poster
- Opportunity to improve identification
- Promote Aboriginal services being offered
- Artwork by Marilyne Nicholls

Are you Aboriginal or Torres Strait Islander?



If you are, please let us know so we can use this information to plan and deliver improved services

If you need further assistance or support,  
please ask to see our Aboriginal Liaison Officer




Ruby Williams  
Koori Hospital Liaison Officer  
03 9594 2290

[www.health.vic.gov.au/koori/icap](http://www.health.vic.gov.au/koori/icap)


# ICAP Identity Poster (cont.)

- Photos organised by Aboriginal staff within each health service
- DHS fund the production of A2, A3 and A4 posters
- If no liaison staff bottom section can be removed
- Common format across the state

Are you Aboriginal or Torres Strait Islander?





Artwork by Marjorie Nicholls, 2005



If you are, please let us know so we can use this information to plan and deliver improved services

If you need further assistance or support, please ask to see one of our Aboriginal staff below

	<p>Kerrie Brown Aboriginal Liaison Officer – Obstetrics (02) 6051 7257</p>		<p>Judy Cue Social Worker – Obstetrics (02) 6051 7246</p>
--	--	---	---

[www.health.vic.gov.au/koori/icap](http://www.health.vic.gov.au/koori/icap)

# ICAP artwork by Marilynne Nicholls

The painting that I have done is about the Aboriginal Hospital Liaison Officer Program, now called the ICAP program. It is painted to reflect the programs cultural strength and uniqueness.

There are key symbols in the painting that bring together important Indigenous messages, for example networking and communication is painted in travel lines and the “Three Message Sticks.”

Other key symbols in the painting are ceremony, identity and spirituality, all of which are examples of the issues in Aboriginal Health care, which, from a holistic view, improve Aboriginal health and wellbeing.



**Marilynne Nicholls, 2005.**



# Workshop Progress

- Victorian government policy - ICAP
- Aboriginal consumer perspectives
  - Introduction – Melanie Fraser
  - Consumer - Carole Fraser



# Workshop Progress

- Victorian government policy - ICAP
- Aboriginal consumer perspectives
- Consumer complaints process – Melanie Fraser



# Workshop Progress

- Victorian government policy - ICAP
- Aboriginal consumer perspectives
- Consumer complaints process
- Success factors
  - Rural example - Ballarat Health & Ballarat and District Aboriginal Cooperative – Karen Heap



## Workshop Progress

- Victorian government policy - ICAP
- Aboriginal consumer perspectives
- Consumer complaints process
- Success factors
  - Rural example - Ballarat Health & Ballarat and District Aboriginal Cooperative
- Rural learning's and group discussion – Leanne Andrews



# Workshop Progress

- Victorian government policy - ICAP
- Aboriginal consumer perspectives
- Consumer complaints process
- Success factors
  - Rural example - Ballarat Health & Ballarat and District Aboriginal Cooperative
- Rural learning's and group discussion
- Success factors
  - Metro example – St.Vincent's Health & Victorian Aboriginal Health Service - John Willis



# Metropolitan health service example

- Long history with community
  - Location and KHLO program
- Commitment from all levels of the service
- Realistic expectations and flexibility
- Aboriginal Health Advisory Committee
  - Key Aboriginal health organisations involved
    - Aboriginal Community Elders Service
    - Victorian Aboriginal Health Service
    - Victorian Aboriginal Community Controlled Health Organisation
  - Advantages – Direct feedback
  - Challenges – High demand on Aboriginal organisations
  - Future ideas – Combined health service committee



## Example of effective consumer involvement

- Undertook review of KHLO program
- Established working group to oversee process
  - Involved Aboriginal organisations
- Engaged Aboriginal consultant
- Feedback from consumers and Aboriginal organisations
- Outcomes (Examples)
  - Created Aboriginal policy position to lead change
  - Doctor orientation to VAHS
  - Improved case management and discharge planning
  - Progress reported back to community



## Workshop Progress

- Victorian government policy - ICAP
- Aboriginal consumer perspectives
- Consumer complaints process
- Success factors
  - Rural example - Ballarat Health & Ballarat and District Aboriginal Cooperative
- Rural learning's and group discussion
- Success factors
  - Metro example – St.Vincent's Health & Victorian Aboriginal Health Service
- Metro learning's and group discussion – John Willis



# Workshop Progress

- Victorian government policy - ICAP
- Aboriginal consumer perspectives
- Consumer complaints process
- Success factors
  - Rural example - Ballarat Health & Ballarat and District Aboriginal Cooperative
- Rural learning's and group discussion
- Success factors
  - Metro example – St.Vincent's Health & Victorian Aboriginal Health Service
- Summary & Conclusion – John Willis



## Conclusion

- Please complete evaluation form for this workshop
- Afternoon tea available

Thanks for coming