

# **Board Communiqué**

**ISSUE 51: FEBRUARY 2023** 

### Werte!

The following topics were discussed at the most recent meeting of the Congress Board of Directors, held on 23
February 2023:

- · Board of Directors Induction Day
- Independent Director reappointments
- Danila Dilba Health Service visits Congress
- Congress CEO seconded to AMSANT
- · Centrecorp update
- · Workforce update
- Have you had your health check?
- Research applications
- CEO's Report to the Board
  - Clinic closures
  - COVID-19
  - Transition to community control for Imanpa, Yulara and Kaltukatjara
  - Congress supports a Voice to Parliament
  - Australian Electoral Commission (AEC) meeting
  - Bilateral Health Agreement workshop

The next meeting of the Congress Board of Directors will be held on 13 April 2023.

#### **Board of Directors Induction Day**

Each year the Board regroups and welcomes new members through a day-long induction.

The induction works through processes, progress and plans for the year, and is an important part of Congress' community controlled governance. It gives the Directors a chance to immerse (or reimmerse) themselves not only in what the organisation does, but also where Congress is headed by revisiting both the Strategic and Corporate Plans. The day also includes program information from general managers and a presentation from Congress Male and Female Cultural Leads, Michael Liddle and Sabella Turner respectively.

This year, the Board welcomed new Director, Janaya Kopp. Janaya joins the Board as the youth representative, appointed casually until the next AGM.

### Independent Director reappointments

The Board is pleased to announce the reappointment of two Independent Director Leanne Milligan was reappointed as Independent Director, Finance and Dr Peter O'Mara as Independent Director, Primary Health Care. Both Directors were reappointed for a period of two years.

Independent Directors are an important element of the Congress Board, complementing the Member Directors through providing expertise in their respective fields.

### Danila Dilba Health Service visits Congress

The Danila Dilba Health Service Executive and Board visited Alice Springs from Darwin and attended various Congress sites and met with service staff, including meeting with the Congress Board. This visit formed part of broader inter-organisation information sharing, a strength of the Aboriginal community controlled sector.

### Congress CEO seconded to AMSANT

Congress CEO Donna Ah Chee has accepted a temporary secondment to the role of CEO of the Aboriginal Medical Services Alliance Northern Territory (AMSANT), the NT's Aboriginal community controlled health sector peak body.

The Congress Board has endorsed David Busuttil to take on Congress' CEO role in an acting capacity for the five-month period.

Presently serving as Congress' Business
Services General Manager, David Busuttil
has extensive experience with Aboriginal
Community Controlled Health Services
along with a deep understanding of primary
health care services and programs from his
twenty years with the Nganampa Health
Council. He will be supported by a strong
executive management team including
Dawn Ross, Brett Capes and Dr John Boffa;
along with the Congress Board of Directors.

The Congress Board would like to assure members that the permanent CEO role remains an Aboriginal identified position.

#### Centrecorp update

Member Director Director (Remote) Dorethea Randall was the Congress endorsed director nomination and was again appointed to the Centrecorp board.

#### Workforce update

The Human Resources General Manager, Brett Capes attended the Board meeting to report on HR operations and was pleased to advise the Board that staff turnover of permanent staff has decreased in comparison to last year.

All effort is being made to improve workforce issues, especially for clinical vacancies. The GMHR reported that Congress had received a record number of applications across all divisions, which will hopefully result in the appointment of great candidates to roles.

Workforce shortages are impacting health service delivery across Australia. Recruiting to positions in remote areas has always been challenging, so this workforce crisis is hitting areas like Central Australia hard. Congress has been advocating strongly in this space, including making very clear recommendations to government about solutions.

In addition, targeted recruitment campaigns are currently running through social media, seeking local and international candidates and promoting working for Congress as an Aboriginal community controlled health service.

#### Have you had your health check?

The Congress Board is provided with lots of information about how clients are using Congress services, and this includes the number of health checks that the community are having. Health checks are a powerful tool in preventing and managing chronic disease.

Many people stopped getting their health checks during COVID-19 as people were encouraged to stay home, but sadly, many people are yet to come back to the clinic for this important check-up.

New season 2023 Deadly Choices shirts are available at all Congress clinics right now, and the Directors would like to see as many of those shirts around town as possible, knowing that each one they see represents a community member taking control of their own health. Have you had your health check?

#### **Research applications**

The Board approved Congress participation in the following proposed research projects:

- Epidemiology and clinical outcomes of clindamycin-resistant Staphylococcus aureus infections in Central Australia; Prof. Chris Rissel.
- Northern Australia Health Program
   (Cooperative Research Centre Northern
   Australia health workforce grant; John
   Wakerman (CI).
- Expression of Interest: Optimising digital solutions to improve access to Comprehensive Primary Health Care (CPHC) services in remote Indigenous communities; John Wakerman.
- Developing Psychological Resilience to the Impact of Drought (Working title: Drought and Psychological Resilience); Mitchell Byrne.
- Diabetes in Pregnancy Co-design –
   Alukura update and proposal; Assoc
   Prof. Renae Kirkham and Louise Maple
   Brown.
- An analysis of the impact of COVID-19
   Pandemic on adherence of secondary prevention of rheumatic fever and rheumatic heart disease at Aboriginal Community Controlled Health Services

- in the Northern Territory; Dr Elizabeth
- The establishment and effectiveness of a culturally safe men's foot health service; James Gerrard.
- Quantifying myocardial inflammation in acute rheumatic fever and rheumatic heart disease; Prof Andrew Taylor.
- Shared Medical Appointments in a Central Australian ACCHO; Laura Stuart
- Repeat Audit: Prevalence and characteristics of youth-onset type 2 diabetes among Aboriginal and Torres Strait Islander young people in northern Australia; Dr Angela Titmuss (CI); Marylin Cariño (Contact Person).
- Whole genome sequencing and molecular epidemiology of Staphylococcus aureus bacteraemic isolates in Central Australia; Dr Danny Tsai.
- Talking About Medicines: Enhancing medicines communication for Aboriginal people in Central Australia (Working title: Talking about medicines project); Tobias Speare.
- Improving Access and Pathways to Care for Aboriginal and Torres Strait Islander Children With Otolaryngology Disease; Professor Kelvin Kong.
- Pockets of promise: Investigating effective models of early childhood education and care in rural and remote locations in the Northern Territory; Dr Elizabeth Adamson.
- Embedding TKC Model of Care: Leveraging Data Linkage for Chronic Conditions; Assoc Professor Gillian Gorham.



Our Board L-R Taren Williams, Janaya Kopp, Leon Chapman, Dorethea Randall, Deputy Chair Ebony Abbott-McCormack, Joseph Hayes, Greg Drew, Tristrum Watkins and Dr Peter O'Mara. Not pictured: Congress Chairperson, Graham Dowling.

#### Updates from the CEO

CEO Donna Ah Chee provided the following updates at the meeting:

#### Clinic closures

As a direct result of our workforce shortages Congress has had to apply temporary clinic closures in town. Northside Clinic is the only remaining closed clinic, with all efforts being made to be able to staff the clinic with adequate workforce to operate safely. Fortunately, no remote communities serviced by Congress have had to close, as maintain access to services in both town and remote areas is prioritised. However, Northside is currently being utilised as the clinic site for Alukura while the Alukura site is undergoing renovations.

#### COVID-19

Although COVID-19 has disappeared from the headlines it continues to be one of the major causes of preventable premature death in Australia. It is, however, now clear that if you keep up to date with vaccination and access Paxlovid (the antiviral) early in the illness if you are eligible, the risk of death is dramatically reduced. All Aboriginal people in central Australia are eligible for this treatment, but it is important that contact is made with Congress to get access to the medicine.

Of the 7919 Aboriginal people registered with the Australian Immunisation register as living in Alice Springs, for those 16 and over, 72% have received three doses. This remains higher than the mainstream Australian national average and demonstrates the level of engagement that Congress has with the community.

Recently, announcements have been made that Aboriginal people over 30 should now have five doses (the fifth is due when it has been more than 6 months since your last booster or alternatively, since last having COVID). You should contact your closest clinic (free call 1800 142 900) to check your vaccine status if you are unsure when you are due.

## Transition to community control for Imanpa, Yulara and Kaltukatjara

The transition of health centres at Imanpa and Yulara has now been completed, and these communities have now had the delivery of their health services transitioned from NT government to Aboriginal community control under Congress. Staff across Congress have been working tirelessly to ensure these transitions goes smoothly; from the medical and clinical operations to the phone lines, computers, keys, signs and a myriad of other details.

Supporting the transition process are quarterly strategic catch-up meetings between Congress, NT Health and the Commonwealth. Congress' Transition Steering Committee continues to oversee internal transition processes and ensures there is a forum for key operational decisions. Responsible project leads meet every three weeks to update on progress, whilst the Transition team meet at least weekly with the NT Health transition manager. Community engagement has

continued, working in with requirements to pause whilst Ceremonial Business has taken place across the transitioning region.

The Imanpa Transition Health Advisory
Group has been meeting monthly to provide
community input and oversight to the
transition process. Feedback from the group
is that the Imanpa community are very
excited for their health care to be provided
by Congress and there is already a strong
sense of ownership by community of the
Congress Imanpa Clinic.

Support for Congress by Kaltukatjara community continues and we look forward to progressing toward their planned transition date of 1 July 2023.

### Congress supports a Voice to Parliament

There is a lot of talk in the media as we get ready for a very important referendum, where Australia will decide about constitutional recognition for Aboriginal people through a Voice to Parliament.

Constitutional recognition through a Voice to Parliament is a body enshrined in the Constitution that would enable Aboriginal and Torres Strait Islander people to provide advice to the Parliament on policies and projects that impact their lives.

A Voice to Parliament gives the Australian Government the opportunity to make policies with Aboriginal and Torres Strait Islander people, rather than for Aboriginal and Torres Strait Islander people. The Congress Board has previously published its position of support for the Uluru Statement from the Heart, and Congress will be actively promoting information about the vote over coming months in the lead up to the referendum.

Recently, Activation Week for the campaign supporting the Voice was marked. Congress advocated internally through a special Q & A with Prof Marcia Langton AO, and externally with an ACTIVist run that caught local attention. We look forward to partnering with other local organisations to ensure that all Aboriginal people are informed about what this means and why it is important for us all.

### Australian Electoral Commission (AEC) meeting

The AEC met with Congress and outlined the range of strategies they are using to increase Aboriginal enrolment to assist the great numbers of Aboriginal people who want their say in the upcoming referendum. Apart from launching a major advertising campaign they have simplified the enrolment process and are now allowing Aboriginal people to complete their application process online even if they do not have an "acceptable" identity document. This way they can be provided with tailored assistance afterwards.

They are also planning to allow a Medicare card to become an acceptable identifying document which will make it much easier for Aboriginal people to enrol, as the vast majority of people have a current Medicare card as this is required for accessing health

services. In this regard, they are looking at ways they can partner with Congress to increase enrolment. This is really important work to increase Aboriginal participation in the electoral process not only for the Voice but for all future elections.

### Bilateral Health Agreement workshop

A sign of the impact that the Closing the Gap Agreement is having, is that our sector has been invited to participate in a workshop to outline the vision of bilateral planning according to the National Health Reform Agreement (NHRA). In the past this level of planning on bilateral agreements was closed to our participation. Now the highest level bureaucrats from the NT and Commonwealth health departments will work with AMSANT and the NTPHN at this level.

Bilateral state-wide planning in primary care aims to strengthen collaborative efforts between State/Territory Department/
Ministry of Health, relevant regional First
Nations Health Stakeholders and the
Commonwealth Department of Health and
Aged Care (DHAC) to improve health service
delivery. It will include a session where each
key stakeholder can share their vision of a
collaborative partnership approach such
as exists through the NTAHF. There is an
opportunity to strengthen how this operates
into the future.