

# Central Australian ABORIGINAL CONGRESS

ABORIGINAL CORPORATION | ICN 7823

### BOARD COMMUNIQUÉ

Issue 6, November 2013

### **Board Meeting Wrap – November**

Held on November 21 2013, the November meeting of the Congress Board of Directors covered the following topics:

- ISO & AGPAL Accreditation
- National Family Partnerships Evaluation
- National ATSI Health Plan
- Proposed Allocation of Funds for Refurbishment of the Gap Road Clinic
- Male Health Remote Communities Summit Report
- Our Clinic and Research Subcommittees
- An AMSANT Meeting in Alice Springs
- A Pilot Restructure of Services
- The Aboriginal Health Practitioner (AHP) Graduation 2013
- Indigenous Land Corporation Offer for Land in Percy Court

- The Chief Minister's NT Government / NGO partnership forum
- Aboriginal Health Portfolio Changes
   under the New Coalition Government
- About Alcohol Protection Orders (APOs)
- Collective Impact Strategic Planning Day Early Childhood
- Our visit from the Chief Minister Adam Giles
- Visit from Nigel Scullion and Warren
   Mundine
- Remediation Plan Update
- Organisational Review Update

#### ISO & AGPAL Accreditation

#### AGPAL

The CQI (Continuous Quality Improvement) team has worked intensively with Congress town teams over a period of 12 months to ensure we were able to meet the Royal Australian College of General Practitioners (RACGP) Accreditation Standards as assessed by Australian General Practice Accreditation Limited (AGPAL). An AGPAL accreditation survey was conducted in early October 2013. Feedback at the end of the survey was very positive; both surveyors being impressed with the facilities, staff, systems and processes that Congress has in place to promote quality health care services with no unmet standards to be addressed.

#### ISO

The ISO organisational accreditation shifts the focus away from the provision of clinical services and concentrates on the organisation's broader administrative and structural processes and systems. In 2012, Congress identified the importance of organisational accreditation to ensure quality outcomes for all internal and external clients, and to facilitate continuous quality improvement activities.

Of the two main accreditation frameworks, Congress has selected the ISO as it is most suitable for its purposes. It provides greater flexibility in the way Congress chooses to document its Quality Management System (QMS). ISO also has a strong management focus aligned with best practice and includes the basic requirements of quality policy and planning. The ISO accreditation processes are being progressively developed and will be rolled out over the next 18-24 months.

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#### National Family Partnerships Evaluation

Outlined in Issue 4 of our Communiqué (August 2013) was Congress' desire to obtain better outcome data in relation to the Nurse Family Partnership Program. Prof Leonie Segal from UniSA has received a 5-year NH&MRC research grant, with which she seeks to explore the cost effectiveness of Primary Health Care, the way that the sum of the parts gives more than the whole for Congress Primary Health Care and the effectiveness of particular programs especially early childhood and family support programs. Her proposal to work with Congress over 3 years in these areas was approved at the last Board meeting. Since then there have been meetings of an operational group to work on the proposed evaluation.

#### National ATSI Health Plan

The National Aboriginal and Torres Strait Islander Health Equality Council (NATSIHEC), has been given the task of overseeing the development of the new plan. Dr Mark Wenitong, a specialist director on Congress' Board is a member of the Council. Consultation has been widespread with many meetings held in Aboriginal communities across Australia. A key issue for the new National Aboriginal and Torres Strait Islander Health Plan (NATSIHP) will be implementation. The Congress Board endorsed the NATSIHP and agreed to work with AMSANT and NACCHO to lobby for the adoption and implementation of the plan by all Australian Governments.

#### Proposed Allocation of Funds for Refurbishment of the Gap Road Clinic

The Board has approved a management submission to allocate funding from the CAAH Trust to the refurbishment of the Gap Road Clinic and Ingkintja. This investment is designed to improve Congress' major community based facility and create longevity of benefits and improvements for the greater number of Congress' clients and patients.

A scope of works is to be developed for the proposed refurbishment plan for the Gap Road clinics (main clinic and Ingkintja clinic).

#### Male Health Remote Communities Summit Report

The report from the Male Health Summit held at Ross River has been received. Although a commitment was given at the Summit from the former Minister for Aboriginal Health that another summit would be funded in 2014, it was not confirmed prior to the federal election and the new Government will not honour this commitment. It is hoped that the enthusiasm and commitment to further action from some of the young male leaders at the summit can be utilised in the revised CASSE project.

### Clinic and Research Subcommittees

The Board has established 6 Subcommittees in the areas of:

- Finance
- Clinics
- Research
- Aged Care
- Youth
- Human Resources

Each of the sub-committees will provide the Board with considered opinion, advice and research in respect of contemporary issues in their respective areas of speciality.

#### AMSANT General Meeting in Alice Springs

The AMSANT General Meeting was held recently in Alice Springs at the Yipirinya School. Key issues discussed included: the new arrangements in Aboriginal Affairs and Aboriginal health under the new Abbott Government; NT Health and Hospital Reform based on information already provided to the board in a previous briefing; the threat to the nKPIs and OCHREStreams following terminations of these data collections and the request from NACCHO for services to provide them with their data so NACCHO can produce its own report; and a paper on 'trauma informed care.' Graham Dowling, Donna Ah Chee and John Boffa delivered key technical papers.

Issue 6, November 2013

#### **Pilot Restructure of Services**

Since the resignation of Services Branch Manager, Lorraine Liddle, Patrick Cooper, has been acting in the role of Services Branch Manager. In this period there have been meetings between Patrick Cooper (in this role), Des Rogers (Deputy CEO) Colin Marchant (GPC) and John Boffa (PHMO) to discuss, implement and review changes within the Services Branch. These changes have focused on two key areas: Services Branch taking a stronger focus on the delivery of primary healthcare and Chronic Disease management is the first. The second is the integration and coordination of child focused services through the Children Services Branch. Several operational changes have been made including:

- The Healthy Lifestyles Program transitioning to Remote Health Services Division.
- The Renal Program coming under management by the Chronic Disease Coordinator.
- The Healthy Kids Clinic and Child Health Outreach Program transitioning to the Children Services Branch.
- Identification of a role for 'Senior Aboriginal Health Worker' to support Services management.

A new Services management structure that includes a Services Branch Manager, GPC, Senior Aboriginal Health Worker, Reception Coordinator, and Chronic Disease Coordinator has been formed. This team meets fortnightly.

These changes have improved efficiencies across Services and Children Services Branches. This has also meant the number of staff reporting directly to the Services Branch Manager is now four, nine fewer in comparison to the thirteen staff less than one year ago.

In light of these changes discussion has been given to the function and requirement for the role of Services Branch Manager. The possibility has been discussed that this position in its current description may not be required. In order to assess this further it has been decided to implement a trial period for Service Branch management with the current GPC acting as the 'Clinical Director' of the branch merging the two positions of GPC and Services Branch Manager for the period of the trial. This trial also includes the appropriate administrative support to this role.

#### Aboriginal Health Practitioner (AHP) Graduation 2013

Eleven Aboriginal Health Practitioners graduated at a ceremony attend by family and friends and some current and former Directors. Joe Hayes presented the graduation certificates on behalf of the corporation to each of the graduands and Chippy Miller was present as one his daughters graduated as an AHP on the night.

In her address on the night, CEO Donna Ah Chee highlighted the feats of Congress as a training organisation, "As many of you probably know Congress was the first Aboriginal community controlled health service in the Northern Territory to train Aboriginal Health Workers, beginning in 1975. However, many are not aware that Congress is now the only Aboriginal health service in the Northern Territory that still trains Aboriginal Health Practitioners. Congress has never stopped and in fact on a very limited budget is able to graduate more Aboriginal Health Practitioners than Batchelor College in spite of the fact that Batchelor has more than ten times the funding that Congress has for this purpose."

Donna also congratulated the graduands and wished them every success in their careers.

#### Indigenous Land Corporation Offer for Land in Percy Court

The ILC has written to Congress inviting the Corporation to lodge an expression of interest for land at the end of Percy Court next to Alukura. This block of land is one that the Alukura Cultural Advisory committee would almost certainly not want to be built on. Congress is developing the scope and nature of its proposal with the objective of maintaining the cultural security of Alukura.

#### Chief Minister's NT Government / NGO Partnership Forum

The Chief Minister has established a regular forum for his office to meet with the heads of the key Non-Government Organisations in the NT both Aboriginal and non-Aboriginal, known as the NT Government / NGO Partnership Group (NNPG). Representatives at these meetings are people who hold positions as CEOs and/or Chairpersons. Congress CEO Donna Ah Chee attended the initial meeting on behalf of Congress.

The group will consider the Framing the Future document that sets out the Government's vision, objectives and priorities for the Northern Territory.

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Issue 6, November 2013

#### Aboriginal Health Portfolio Changes under the New Coalition Government

The new Abbott Government has made changes to the administrative arrangements for Aboriginal health. Substantial changes have limited or diminished the role of Aboriginal and Torres Strait Islander expert and advisory bodies. A broad number of organisational and ministerial changes have resulted in many organisations being abolished and substantial agencies such as OATSIH changing ministries and rolled into a combined department for Rural and Regional Health Services and Indigenous Health. It is too early to determine the impact these changes will have on Congress, but it is reasonable to say that they are cause for concern. Senator Fiona Nash, Assistant Minister for Health is responsible for matters relating to Indigenous health services.

Senator Nigel Scullion has transferred responsibility for Aboriginal Health Performance Reporting, resulting in the cessation of 'self-reporting' from the Health Department on the progress of the key indicators in the Health Performance Framework report and the COAG Closing the Gap report. Senator Scullion is already playing a useful role as an advocate on important issues such as the OCHREStreams/ nKPI reporting.

#### **Alcohol Protection Orders (APOs)**

The Northern Territory Government have decided to proceed with the proposed legislation to enact Alcohol Protection Orders (APOs). These orders will be applied to anyone who has been charged with an alcohol related offence and once on an APO, it will become an additional criminal offence to breach the order. The penalty for a breach includes a 3-month jail term for a first offence. This is regarded by Congress to be overly harsh, regressive and unjust. Congress will continue to advocate for change.

#### Collective Impact Strategic Planning Day Early Childhood

The Pre-birth to 4 Collective Impact Group has scheduled a major strategic planning day with invited experts in early childhood as well as all of the local stakeholders involved. After considering a lengthy analysis of the literature in the area there was clear 'alignment' around some of the key programs that Congress has supported for many years. This includes the Nurse Family Partnership Program and the Abecedarian Educational Day Care Program along with programs that support children in participation and achievement in pre-school. It now remains to be seen how much this group can assist Congress and other organisations in the implementation of further services and programs in this key area. CLC is now a regular participant and it is planned that there will be at least one remote community in the roll out of any initiatives that may stem from this project.

#### Visit to Congress from the Chief Minister Adam Giles

Adam Giles came to Congress and met with the President, William Tilmouth, some of the Directors and CEO Donna Ah Chee. One of the key issues the Chief Minister discussed was alcohol policy which was a concern for his government as well as Congress. There was an open and frank conversation about complex issues including Aboriginal controlled social clubs and price.

The Chief Minister made it very clear that he supports the development of Aboriginal community controlled health services through the regionalisation process and that in addition to this he was prepared to specifically support the transfer of the Ntaria Clinic to Aboriginal community control as soon as practical.

#### Visit from Nigel Scullion and Warren Mundine

Congress had a very early visit from Senator Nigel Scullion and the new Chair of the Indigenous Advisory Council, Warren Mundine. Five board members were in attendance for the visit along with CEO Donna Ah Chee and PHMO John Boffa. The importance of Aboriginal community control of primary health care services and the regionalisation agenda was stressed along with some other issues. Congress made it clear that we want to keep in regular dialogue with the new Minister.

Issue 6, November 2013

#### **Remediation Plan Update**

Congress developed a Remediation Plan in 2012 following the engagement by the Department of Health and Ageing (DoHA) of McGrathNicol to investigate and report on some aspects of the Corporation's business.

The Remediation Plan was designed to strengthen aspects of Congress' administration, systems and processes. The Department of Health and Ageing supported the recommended Remediation Plan and committed financial support to facilitate the progressive implementation of new and additional systems to strengthen the capacity of Congress's business services and accountability structures.

DoHA / OATSIH have provided additional funding to undertake this project and associated works. Congress continues to progressively implement the key features of the Remediation Plan.

### **Organisational Review Update**

The Organisational Review Implementation Plan has been prepared by the Executive Management Team in response to the Organisational Review that was undertaken in April 2013. The review included recommendations that were discussed and endorsed by the Congress Board and also the Executive Management Team (EMT).

This Implementation Plan was drafted in November 2013. The time frame for implementation is primarily until June 2014. The Implementation Plan will be monitored and reviewed during EMT meetings.

Ownership of the Implementation Plan is by the Chief Executive Officer. Divisional General Managers have responsibility for providing input to the Implementation Plan and completing actions under their respective portfolios.

The Congress Board of Directors would like to wish everyone a safe, happy, healthy and prosperous 2014!

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