



### BOARD MEETING WRAP

The following topics were discussed at the last Congress Board of Directors Meeting held 10 August 2017:

- Clinic Incentive Plan Trial Expansion
- Board Policy: Eligibility for Congress Services
- Board Policy: Deliver, Partner or Advocate for/Support Services Affecting the Health and Wellbeing of the Aboriginal Community
- Enterprise Agreement 2017
- Finance, Risk & Audit Subcommittee Report
- Governance Subcommittee Report
- Research Subcommittee Report
- Male Health Subcommittee Report
- Women's Health Subcommittee Report
- CEO's Report:
  - » Meeting with Minister Wyatt
  - » Submission to NT Suicide Prevention Strategy
  - » Arrwekele akaltye-irretyeke apmere – Congress' Early Childhood Learning Centre
  - » NT Alcohol Policy Review
  - » Renal decision support system
  - » NACCHO governance project
  - » Cultural Awareness Orientation Review

### Clinic Incentive Plan Trial Expansion

Late last year the Board approved the Clinic Incentive Plan Trial. This trial has proven to be very effective with clinics achieving key performance indicator targets over the last 3 months. Although the trial is not the only reason for the success of Sadadeen and Larapinta clinics, the results have had the effect of continuing increases in key Medicare items and health performance, including continuity of care.

The Board has voted to extend the Clinic Incentive Plan Trial to all clinic sites including Gap Road, Alukura, Headspace and the five remote clinics.

### Board Policy: Eligibility for Congress Services

The Board noted that concerns have been raised from the remote communities about non-Aboriginal people accessing the clinic and obtaining free medication whilst visiting the community. The Board voted to approve a revised policy which is more stringent in determining eligibility for services. This policy covers eligibility to access Congress services in town as well as remote. Understanding that there is sometimes complexity in circumstances, the policy allows for a degree of flexibility, at the discretion of the General Manager of Health Services.

### Board Policy:

### Deliver, Partner or Advocate for/Support Services Affecting the Health and Wellbeing of the Aboriginal Community

Linked to Congress' 2015-18 strategic plan, this policy provides clear criteria to assist with making an assessment about what approach to take concerning providing support, partnership or co-delivery of services that are designed to improve Aboriginal health and wellbeing.

The Board voted to approve the policy.

### Enterprise Agreement 2017

The Board was briefed on negotiations for a new enterprise agreement. The existing enterprise agreement has a nominal expiry date of 30 June 2017. The proposed enterprise agreement retains key employment conditions currently enjoyed by Congress staff, guarantees wage increases during its term and introduces a number of new provisions that will help Congress deliver better client services. The proposed enterprise agreement adopts 'plain English' language and, if approved, will apply for a longer term than the existing enterprise agreement (4 years). The proposed enterprise agreement has been reviewed by legal practitioners and other professionals who specialise in Industrial Relations.

The Board voted to recommend its approval. Congress staff will now be asked to vote to approve the proposed enterprise agreement.



*The Board has voted to extend the Clinic Incentive Plan Trial*

## Finance, Risk & Audit Subcommittee Report

The Board noted the Business Services report for the period ending 30 June 2017.

Income generated through Medicare and the Practice Incentives Program has continued to improve, thanks to a continuing commitment from staff.

There has been a total increase of \$6.1M including a 48% increase in health checks, a 35% increase in GP management plans and a 31% increase in team care plans. Mental health care plans have also increased and there has been an 182% increase in Practice Incentives Program registrations.

Congress' surplus at the end of the financial year has shown to be \$1.2M and our solvency ratio at the end of 30 June 2017 has been noted as 1.92:1.

## Governance Subcommittee Report

*The Board noted the report of the Governance Subcommittee.*

The Board considered a proforma document designed to assist with the assessment of a conflict of interest relating to more complex and/or major transactions. The form was approved to be included with the Conflict of Interest Third Party Transaction policy.

The Board also discussed the proposed rule book changes, including the addition of a map defining Central Australia, to be tabled for approval by the members at the 2017 Annual General Meeting.

## Research Subcommittee Report

*The Board noted the report of the Research Subcommittee.*

The Board discussed the extra funding received by Congress for the Central Australian Academic Health Science Centre. The Board resolved to support the use of these funds for administrative support, the Aboriginal Research Engagement officer positions, seeding support to the HTLV1 maternal and infant transmission project, and a project to demonstrate the effectiveness of Aboriginal Community Controlled Health Services.

The Board also voted to support participation in the project entitled "Development of Resources to Prevent Methamphetamine ("Ice") Related Harm in the Aboriginal and Torres Strait Islander Population" subject to capacity and available funds.

## Male Health Subcommittee Report

*The Board noted the report of the Male Health Subcommittee.*

The Board discussed the CASSE Project which is aimed at providing support and assistance to Aboriginal males upon release from prison. This is a community driven project. The Board also acknowledged that further support should be provided to Aboriginal families generally.

The Board noted that the subcommittee had suggested changing the name of Congress' male health clinic "Ingkintja" to "warra apa artweke ampare" which means boy and man place. It is expected that the Board will be asked to make a decision to support this recommendation when it meets on 5 October.

## Women's Health Subcommittee Report

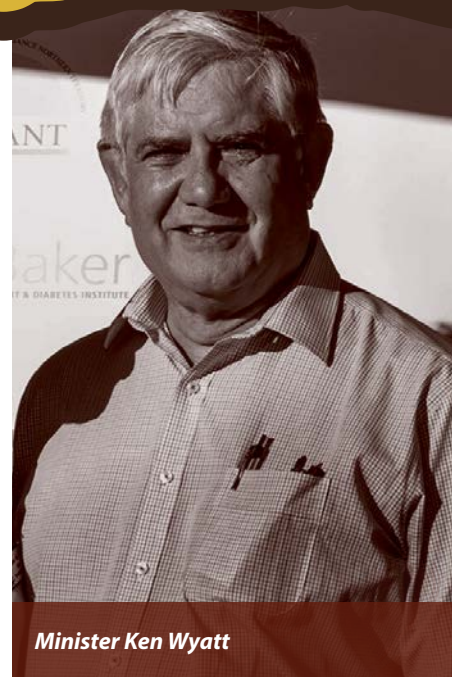
*The Board noted the report of the Women's Health Subcommittee.*

The policy detailing male access at Alukura has now been finalised.

Planning for the upcoming Alukura 30th anniversary celebrations is continuing, with an event planned to include cultural activities, food and refreshments.

Work is progressing to finalise the establishment of a Midwifery Group Practice at Alukura which, it is hoped, will help reduce the rate of caesareans.

The Board supported the recommendation from the Women's Health subcommittee to employ a second person as part of the Good Sports Program and that it be a female identified position.



Minister Ken Wyatt

## CEO's Report

*The following items were presented to the Board at the August meeting:*

### Meeting with Minister Wyatt

On Wednesday 5 July Congress met with Minister Wyatt. The Deputy Chair, Graham Dowling, led the meeting in the absence of our Chairman who was unwell.

Congress presented evidence that health improvement in the NT has been driven by developments within the health system including improved access to Aboriginal community controlled health services.

However, we also explained that the social determinants still need addressing, including overcrowding, early childhood, alcohol and other drugs.

### Submission to NT Suicide Prevention Strategy

The NT Suicide Prevention strategy is currently under review. Congress made a submission to this review, raising the following key issues:

- Suicide in Aboriginal communities is fundamentally linked to disempowerment, disadvantage and the social determinants of health.
- Unhealthy brain development, self-regulation and coping skills in early childhood are linked to suicide. This is a key issue for young Aboriginal people who are falling well behind in the Australian Early Development Census by age five.



- Contact with the justice system and out-of-home care is a major risk factor for suicide in young Aboriginal people. There are currently more than 1000 Aboriginal children in out of home care in the NT and the incarceration of young Aboriginal people is at least 28 times the national average.
- Alcohol misuse by parents is related to the unhealthy development of children and lack of self-regulation, and is also a direct catalyst for suicide.
- Due to the ongoing impact of colonisation and policies such as the forcible removal of children from their families, there is a need for trauma-informed, culturally secure services provided by Aboriginal community-controlled health services.
- There is a need for holistic and integrated services across physical, mental and social and emotional wellbeing, delivered by one provider. For Aboriginal people this should be through Aboriginal community-controlled health services.

### **Arrwekele akaltye-irretyeke apmere – Congress' Early Childhood Learning Centre**

There was a small and informal celebration of the Arrwekele akaltye-irretyeke ampere centre on July 5. Congress Director, Ricky Mentha, gave a powerful speech on behalf of the Board. The other directors present included fellow steering committee member Joseph Hayes, Deputy Chair, Graham Dowling, and Sheralee Taylor.

The manager of Child and Family Services, Dawn Ross, was the MC for the event and there were many children and their parents in attendance. A testimony was read from a parent about how much the centre has already helped her 2 children. Other guests included the AMSANT CEO, John Paterson, Minister Fiona Nash and the First Assistant Secretary of the Indigenous Health Division, Bobbi Campbell; the latter 2 having played a major role in getting the centre funded.



*Clockwise from top: 1) Toddler Zavanhu MacMillan 2) Mural design by Marie Ryder 3) Left to right– Isaiah Grant, Congress staff member, Cassie Boyle with Sheana Heffernan and Tristan Stagg 4) Congress staff member, Emma Bell with Hannah Swan*



## NT Alcohol Policy Review

Congress provided a submission to the current NT alcohol policy review led by the former Chief Justice Trevor Riley. The submission was based on existing Congress policy documents on alcohol. One of the policy areas that is now better supported by evidence is the development of tightly regulated social clubs in some Top End Aboriginal communities. These have been shown to be an effective harm minimisation strategy and the Congress submission supports these types of social clubs in remote communities, where they are wanted by the community. Congress also gave evidence at the public hearing in Alice Springs on Friday 21 July along with many other organisations and individuals. It was very encouraging to hear the grasp on key policy issues amongst the review team, including the possibility of an alcohol floor price in the NT.

## Renal decision support system

CEO Donna Ah Chee and CMO Dr John Boffa attended a meeting convened by the Menzies School of Health Research to consider ways to better manage renal disease in the primary health care setting to try to prevent more people requiring dialysis. The meeting concluded that there is merit with considering the establishment of a renal decision support centre that would enable a renal physician and specialist renal nurses to review the medical records, for both primary health care services and hospitals, of high risk renal patients and provide an electronic letter directly into the patient's file that would make recommendations for improved management. Consultation and further development of the idea will continue.

## NACCHO governance project

On 29 June NACCHO held a consultation meeting in Alice Springs with NT members on governance reform with the Chair, Deputy Chair and CEO representing Congress. Some of the key recommendations supported by the meeting included:

- The need to have both individual Aboriginal community controlled health services and state and territory peak bodies as members
- The need to ensure that directors or staff of the state and territory peaks are not eligible to be elected to be directors of NACCHO due to conflicts of interest
- A reduction in size to 7-9 Aboriginal and Torres Strait Islander directors for optimum effectiveness with skills relevant to NACCHO's role.
- That half of the serving directors should retire every 3 years to give stability and continuity.
- The elected directors will themselves choose their chair which is very different to the current direct election process for the chair.



Congress Aboriginal researcher,  
Roxanne Highfold

## Cultural Awareness Orientation Review

Roxanne Highfold, an Aboriginal researcher with Congress, has obtained a Fellowship to undertake an evaluation of the Congress cultural awareness orientation program. The review includes a literature review and consultation with key staff under the leadership of the Aboriginal Staff Advisory Committee. The revised program is likely to include key elements such as workshops, site visits and then an assessment process to demonstrate that staff have understood what has been delivered and can demonstrate cultural competence. There is also a suggestion that Congress should nominate key Aboriginal staff as "Cultural advisors" so that staff know who to go to for guidance. Roxanne has met with the Congress Board Women's Health Subcommittee and will meet with IAD and Akeyulerre. The review will ensure that there is consistency of information with the Congress cultural safety framework and the developing community and health service based operational protocols.



The next Central Australian Aboriginal Congress Board meeting  
will be held on 5 October 2017