ABORIGINAL HEALTH CULTURAL SAFETY PLAN

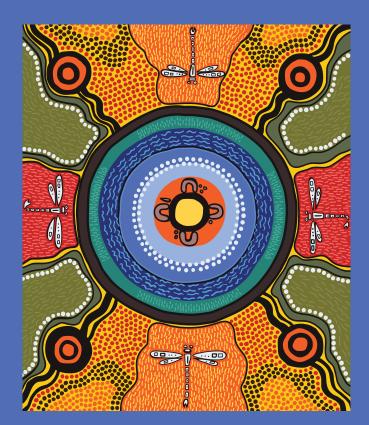
January 2019 - December 2021







Western Health respectfully acknowledges the Wurundjeri and BoonWurrung peoples of the Kulin Nation as the Traditional Owners of the lands on which Western Health sites are located and pay our respects to their Elders past and present.



Artwork: Delgaia by Annette Joy, (Gourmjanyuk and Wergaia) 2018.

Delgaia means to be good, means to be well (Wemba Wemba language).

The colours represent Mother Earth:

Yellow - the sun, warmth and freshness

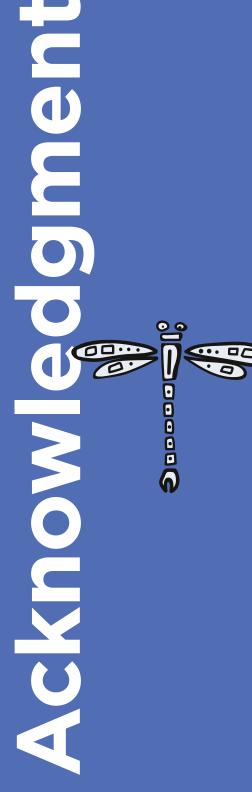
Black/Brown – our people, strong, powerful, safety, warmth and the land

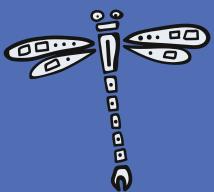
Red - earth, love and strength

Green - Growth, nature

- Blue calming, sky and water
- Orange energy, creativeness and self respect.

The black and white dragon flies symbolise transformation, change and life. In the centre are our people coming together and joining with everyone to be well and safe.





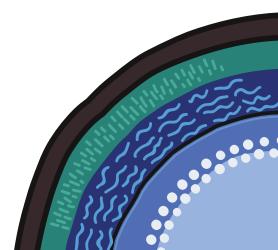
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GALINJERA MATERNITY PROGRAM





I acknowledge the traditional owners of the lands on which all our sites are located, the Wurundjeri and Boon Wurrung people of the Kulin Nation, I would like to further acknowledge and pay respect to Aboriginal and Torres Strait Islander Elders, people, consumers, staff and volunteers past and present.

I am pleased to present Western Health's Aboriginal Health Cultural Safety Plan 2019-2021. This Plan demonstrates our ongoing commitment and genuine progress in delivering a health service that provides opportunities for all Western Health staff and volunteers to understand and respect cultural differences and needs and apply this in their various roles. It allows our staff and volunteers to truly engage with our Aboriginal and Torres Strait Islander community.

We know that good health enables Aboriginal and Torres Strait Islander children to have the best possible start to life, and adults to lead active, full and productive lives. Western Health shares the national and state vision of improving health outcomes and closing the gap in life expectancy for Aboriginal and Torres Strait Islander peoples. Western Health is an official signatory to the National Close the Gap Statement of Intent, and in line with this commitment, the health service actively supports the objectives and priorities of the Victorian Government's Korin Korin Balit-Djak Aboriginal Health, Wellbeing and Safety Strategic Plan 2017-2027.

This Plan builds on the achievements of previous plans that have delivered many successful outcomes for Aboriginal and Torres Strait Islander patients, their families and communities in the West. It will further guide and challenge us to continue to achieve essential changes to our education, policies, planning and practices while working collaboratively with partner organisations.

The Plan was developed through extensive consultation with Western Health Aboriginal Health steering committee members, members of the Aboriginal and Torres Strait Islander community, Western Health staff, the Department of Health & Human Services and other relevant organisations. I would like to acknowledge and thank all those involved for their time and invaluable expertise in developing this Plan.

Western Health is committed to delivering culturally safe care to our patients and their families. This Plan sets the direction for the next steps in achieving this vision, and acknowledges that it will require continued focus and targeted effort. I believe that our Plan and its strategies will ensure our shared vision is realised.

Russell Harrison

Chief Executive



INTRODUCTION

In August 2018, Western Health staff, Western Health Aboriginal Health steering committee members, invited Aboriginal Community members and other relevant organisations to participate in a full day review of the Western Health Aboriginal Health Roadmap 2015-2018 which included discussion and planning to work collaboratively together to deliver more successful services and programs for a further three years.

The outcomes of the Roadmap, requirements of the National Safety and Quality Health Service Standards (NSQHS), consultation with stakeholders and feedback given at the planning day have all informed the Western Health Aboriginal Health Cultural Safety Plan 2019 - 2021.

We would like to acknowledge Karen Milward, Indigenous Consultant for facilitating and drafting recommendations from the planning day to inform this plan.

It was agreed a Cultural Safety Plan is the key to acknowledging respect for the individual needs of Aboriginal and Torres Strait Islander patients and families. It demonstrates a commitment to providing a culturally safe environment and to delivering culturally appropriate care and support services as outlined in our objectives and actions over the next three years.

From the 2011 to the 2016 Australian Bureau of Statistics Census the Aboriginal and Torres Strait Islander population in the Western region has grown quite significantly indicating a growth of 40.8%. Western Health continues to commit to improving health outcomes and providing opportunities for Aboriginal and Torres Strait Islander people, their families and respective communities and our organisations staff and volunteers to be active participants in all aspects and areas of the Cultural Safety Plan.

The Cultural Safety Plan has been prepared to guide and inform what we will be doing as part of our work and build on previous Aboriginal Health strategic plans, to empower, educate and better inform those involved in our organisation. This will enable staff and volunteers to provide a culturally safe environment which nurtures, supports and values the cultural values, perspectives, views and experiences of Aboriginal people.

Cultural Safety will enrich, strengthen and add value to our service and program delivery for planned events and activities. This includes all levels for all participants, including the Western Health Board, leadership team, staff and volunteers.

Through respect and genuine partnerships we can build on the good work Western Health has previously done and continues to do.



BACKGROUND

Employing approximately 7000 staff and more than 600 volunteers, Western Health has a strong philosophy of working with its local community to deliver excellence in patient care.

Western Health has long-standing relationships with health providers in the western region of Melbourne and strong affiliations with numerous colleges and academic institutions.

Western Health manages three acute public hospitals: Footscray Hospital; Sunshine Hospital and Williamstown Hospital. It also operates the Sunbury Day Hospital and a Transition Care Program at Hazeldean in Williamstown. A wide range of community based services are also managed by Western Health along with a large Drug and Alcohol Service.

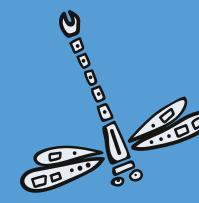
Western Health recognises key health and human services indicators that impact on Aboriginal Victorians' health, wellbeing and safety that reflect the legacy of trans-generational trauma and systemic racism. Key indicators include:

- Health status of mothers and babies
- Prevalence of Family Violence
- Out-of-home care
- Justice health and wellbeing
- Access to housing and homelessness
- Use of tobacco, alcohol and other drugs

The Department of Health and Human Services snapshot of Aboriginal Health in Victoria indicates the life expectancy for Aboriginal people are 9.5 years less for women and 10.6 years less for men when compared to non-Aboriginal people. Chronic disease is responsible for 64 per cent of disease burden, with presentations to Victorian hospital emergency departments by Aboriginal people double the rate compared to non-Aboriginal people.

Closing the Gap in Aboriginal and Torres Strait Islander Health and Wellbeing is a national priority that the Australian Government and all State and Territory governments are committed to addressing. As a public health service, Western Health is committed to continuing to respond to key state-wide priorities. This includes, improving access to culturally appropriate services for Aboriginal and Torres Strait Islander communities. Additionally the National Safety and **Quality Health Service Standards** (NSQHS) have provided six actions to specifically meet the needs of Aboriginal and Torres Strait Islander people. These actions will guide our actions to be implemented during 2019 - 2021 (Appendix 1).

A growing body of evidence suggests Aboriginal and Torres Strait Islander families have better and longer-term health and wellbeing outcomes when engaging with culturally responsive services.³



3. Korin Korin Balit-Djak, 2017.

^{1.} Korin Korin Balit-Djak Aboriginal health and wellbeing and safety strategic plan 2017-2027, pg. 14

^{2.} Human Rights and Equal Opportunity Commission, 2008

At Western Health, we are proud of our
achievements to partner with and support
our Aboriginal Community.The Strategic Direction outlined in
our 2015-18 Aboriginal Health Plan
was a commitment to becoming
a leader in Aboriginal and Torres
Strait Islander health, by providing
a culturally respectful, high quality.Western Health's Aborigin
Hospital Liaison Officers
western Health's hospital
developing pathways and
processes to various dependent.

Seven outcomes were identified against this commitment, with the highlights of activity and achievements over 2015-18 summarised below:

safe, collaborative and holistic

health care organisation.

INCREASED ORGANISATIONAL WIDE CULTURAL RESPONSIVENESS

Over 1,000 Western Health staff and volunteers have undergone cultural responsiveness training between 2015-2018.

Cultural responsiveness training has been provided by the Western Health Aboriginal Health Unit, the Victorian Aboriginal Community Controlled Health Organisation (VACCHO) and an Aboriginal owned Consultancy Business. Training has focused on cultural appreciation, as well as best practice guidelines for collecting Indigenous status and Aboriginal Mental Health First Aid. An online Cultural Awareness Training Package will be launched in 2019 to support face to face training.

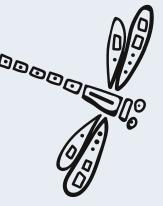
INCREASED PATIENT IDENTIFICATION AND REFERRALS TO THE ABORIGINAL HEALTH UNIT

The annual number of WH inpatients identified as Aboriginal has risen from 931 in 2014 (0.92% of WH inpatients) to 1716 (2.1%) in 2018. Western Health's Aboriginal Hospital Liaison Officers (AHLO) have supported patients to navigate Western Health's hospital systems, developing pathways and referral processes to various departments, attending Mental Health tribunals and support services, assisting families through grieving processes and developing staff through cultural awareness and identification process. The AHLO's receive on average 10 referrals a month and their efforts have informed a steady increase in the number of Western Health inpatients identified as Aboriginal.

INCREASED ABORIGINAL EMPLOYMENT OPPORTUNITIES

The number of Aboriginal staff at Western Health has increased from 11 in 2015 to 30 at the start of 2019.

The formation of a Western Suburbs Employer, Aboriginal Employment Pipeline Committee has supported and provided oversight to a number of Aboriginal employment Partnerships and Programs. These include a Graduate Nurse Program specifically for Aboriginal people, a traineeship program established with secondary schools in the West, a relationship with AFL Sportsready to align employment opportunities at Western Health with candidates, and a relationship with Kangan Institute to align candidates and education opportunities. In addition. personalised recruitment support has been introduced for Aboriginal applicants to Western Health positions.



Journey

JUC



INCREASED CULTURAL AWARENESS ACTIVITIES AND PROGRAMS

Western Health has co-ordinated 11 cultural events across all sites between 2015-2018, as well as leading and/or participating in significant community events.

NAIDOC and Reconciliation Week events have been held consistently across Western Health and have promoted and facilitated cultural awareness and identification training and activities. Western Health has also partnered with community organisations to support a range of community health days, forums and seminars. Western Health led the Western Region NAIDOC 2018 Photo Exhibition 'Celebrating Aboriginal and Torres Strait Islander Women of the West - Because of Her We Can' project. The exhibition travelled throughout the Region and raised the profile or Aboriginal and Torres Strait Islander communites in the Western Metropolitan Region. In addition, 20 Western Health Nurses and Midwives have trained in remote Northern Territory Communities for six week blocks between 2016 - 2018 as part of the Western Health and Remote Area Health (Corp) Partnership - Remote Nursing Program.

INCREASED LEVEL OF COLLABORATIVE PROJECT AND PROGRAM ACTIVITY WITH MAINSTREAM AND ABORIGINAL ORGANISATIONS

There have been over 50 referrals to Koolin Balit Early Years Project Consortium Workers based in the Western Health Aboriginal Health Unit.

Western Health has established numerous partnerships and collaborated on a number of projects with local community and health services partnerships. A key partnership has been with

the Koolin Balit Early Years Project Consortiums driving the Babaneek Booboop and Footprints to Success programs. These projects aim to provide early intervention support to Aboriginal and Torres Strait Islander families in Western Metropolitan Melbourne to improve the health and wellbeing of children. This partnership involves the Victorian Aboriginal Child Care Agency (VACCA), Councils, DHHS, Tweedle, Victoria University, Women's HealthWest, CoHealth, and Djerriwarrh Health Service. Two Consortium key workers are based in the Western Health Aboriginal Health Unit based at Sunshine Hospital once a week, enabling families to access services.

INCREASED IMPLEMENTATION OF EVIDENCE BASED PRACTICE AND ACHIEVEMENT OF OUTCOMES

Since December 2016, Western Health's Koori Maternity Service Co-ordinator has attended 5 births, supported 137 Aboriginal women through antenatal care and 131 women with post-natal care.

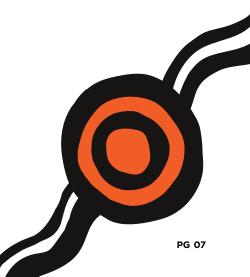
Koori Maternity Services (KMS) are uniquely Victorian and provide flexible, inclusive and culturally safe maternity care to Aboriginal women, babies and families. KMS are provided by eleven Aboriginal community-controlled organisations and Western Health has become one of three public health services to provide KMS. Western Health has also engaged in a multi-site research program entitled 'Women's Journey' which aims to improve the health of Aboriginal mothers and babies through continuity of midwifery care.

In October 2017, a 'Galinjera' team was formed to support Aboriginal patients accessing maternity services at Sunshine Hospital. Galinjera means 'to come together and connect with love'. Since October 2017, 87 women have entered the Galinjera Midwifery program, with 60 babies born. The team has grown to accommodate community need and now comprises a Koori Maternity Services Co-ordinator, 4 Midwives, 2 Obstetricians, a Research Midwife and Social Worker. Western Health has also arranged with Tweedle Child and Family Health Service to accept our Aboriginal women as a priority, with fees waived.

INCREASED PARTICIPATION OF THE ABORIGINAL COMMUNITY IN PROGRAM DESIGN AND BEST PRACTICE AT WESTERN HEALTH

Over 70 patients have been supported through the Closing the Gap 'CtG' Pharmacy Program.

Participation of the Aboriginal Community has led to a number of innovative progams to support culturally sensitive health needs. These include a sustainable Closing the Gap 'CtG' Pharmacy Program to improve access to PBS Medicines for Aboriginal patients who are living with, or are at risk of chronic disease; Care for Aboriginal patients through a Special Needs Dental Program established at Williamstown Hospital; and provision of capes for Aboriginal women to use during group-based breast cancer screening sessions.



While the Aboriginal and Torres Strait Islander population in the Western region is relatively small compared to the non-Aboriginal population, having a strong and healthy Aboriginal community is crucial to the overall health of the region.

Western Health's catchment includes the following local government municipalities. The following Aboriginal and Torres Strait Islander population is based on the Australian Bureau of Statistics 2016 Census indicating a growth of 40.8% since the 2011 Census.

TABLE 1: Aboriginal and Torres Strait Islander people living inWestern Health's Local Government Area (LGA) Catchments

| | 2011 | 2016 | | |
|---|-------------|-------------|--|--|
| LGA | No. Persons | No. Persons | | |
| Brimbank | 701 | 815 | | |
| Hobsons Bay | 394 | 488 | | |
| Hume | 1,049 | 1,461 | | |
| Maribyrnong | 324 | 429 | | |
| Melton | 790 | 1,286 | | |
| Moonee Valley | 317 | 430 | | |
| Moorabool | 261 | 368 | | |
| Wyndham | 1,144 | 1,735 | | |
| Total Persons | 4,980 | 7,012 | | |
| Total change in No. Persons since 2011 | + 2, | 032 | | |
| Overall % change since 2011 | + 40.8% | | | |



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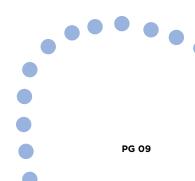
TABLE 2: Western Health inpatients with an Aboriginal and/or Torres Strait Islander status flagged on their Inpatient Record

(by year, by Western Health catchment, by total no. of patients and by total no. of episodes).

| | | (| 0 | 100 | 200 | 300 | 400 | 500 | 600 | 700 | 800 | 900 |
|------------|-----------------------------|-----------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| | Not Western Health | No. of Patients | 163 | | | | | | | | | |
| () | Catchment | No. of Episodes | 371 | | | | | | | | | |
| 2015-16 | Western Health Primary | No. of Patients | 275 | | | | | | | | | |
| 201 | Catchment | No. of Episodes | 646 | | | | | | | | | |
| | Western Health Secondary | No. of Patients | 108 | | | | | | | | | |
| | Catchment | No. of Episodes | 136 | | | | | | | | | |
| | Not Western Health | No. of Patients | 160 | | | | | | | | | |
| | Catchment | No. of Episodes | 384 | | | | | | | | | |
| 2016-17 | Western Health Primary | No. of Patients | 353 | | | | | | | | | |
| 201 | Catchment | No. of Episodes | 870 | | | | | | | | | |
| | Western Health Secondary | No. of Patients | 98 | | | | | | | | | |
| | Catchment | No. of Episodes | 140 | | | | | | | | | |
| | Not Western Health | No. of Patients | 218 | | | | | | | | | |
| ω | Catchment | No. of Episodes | 423 | | | | | | | | | |
| 2017-18 | Western Health Primary | No. of Patients | 398 | | | | | | | | | |
| 20 | Catchment | No. of Episodes | 981 | | | | | | | | | |
| | Western Health Secondary | No. of Patients | 126 | | _ | | | | | | | |
| | Catchment | No. of Episodes | 189 | | | | | | | | | |
| <u>(</u> | Not Western Health | No. of Patients | 99 | | | | | | | | | |
| (Dec YTD) | Catchment | No. of Episodes | 132 | | | | | | | | | |
| | Western Health Primary | No. of Patients | 252 | | | | | | | | | |
| 2018-19 | Catchment | No. of Episodes | 643 | | | | | | | | | |
| 201 | Western Health Secondary | No. of Patients | 93 | | | | | | | | | |
| () | Catchment | No. of Episodes | 150 | | | | | | | | | |

2017-18 shows approximately 10.58% (including patients in other catchments) of the Aboriginal community are accessing our services. Please note that the above tables do not take into consideration the high proportion of Aboriginal people accessing our Emergency Departments.

There is a clear growth in access to our services. This plan will provide the guidance required for better outcomes. The plan aims to educate and empower Western Health staff and volunteers to embrace and apply these actions to create a culturally safe and respectful space as part of our core values.





The term 'cultural safety' has been circulated for many years and became popular in academic circles in the 1980's, particularly through the work of a Maori nurse Irihapeti Ramsden.

TABLE 3:

Cultural Safety -Definitions

'Cultural Safety is a philosophy of health care that aims to improve the health of all Indigenous peoples in first world colonised countries, by providing culturally appropriate health care services' (Smith 2007).

'An environment which is safe for people; where there is no assault, challenge or denial of their identity, of who they are and what they need. It is about shared respect, shared meaning, shared knowledge and experience, of learning together with dignity, and truly listening' Williams (2003, p3)

'Ensuring that those individuals and systems delivering health care are aware of the impact of their own culture and cultural values on the delivery of services, and that they have some knowledge of, respect for and sensitivity towards the cultural needs of others' The Committee of Deans of Australian Medical Schools (CDAMS, 2004).

Unsafe Cultural Practice - Definition

'Unsafe cultural practice is any action which diminishes, demeans or disempowers the cultural identity and wellbeing of an individual'

(National Aboriginal and Torres Strait Islander Health Workers Association 2013)

It is important to understand that cultural safety is a process, and achieving it requires an acceptance and respect of cultural and individual difference. Health professionals need to undertake a process of personal reflection of their own cultural identity to enable them to recognise the impact that their own culture has upon their health care practice (Nursing Council of New Zealand 2002).

"Safety means when I come to Western Health I get the service I need, staff are friendly and respect my cultural needs and perspectives which includes embracing my culture and ensuring my family members who visit me are supported too"

Aboriginal community member

ultur

TABLE 4: It is well understood that there are three steps in the process of achieving culturally safe practice. These include:4

1. CULTURAL AWARENESS

Cultural Awareness is an essential first step in creating culturally safe health care for all Australians. One cannot move onto the next step unless this step is achieved. Cultural Awareness means understanding and acknowledging that there is cultural 'difference' and being open to change. (Ramsden 2002).

2. CULTURAL SENSITIVITY

Cultural Sensitivity is about legitimising this difference through understanding, accepting, respecting and validating cultural difference. Becoming culturally sensitive requires us to undergo a process of selfexploration, introspection, and personal transformation so that we can understand how we formed our own beliefs and values. (Ramsden 2002; Bird-Rose 2005; Regan 2005).

This process then allows us to see how our own life experience impact upon others, especially in our role as a health professional. It can also help us to understand how our own beliefs, values and attitudes, when imposed on others, can have a negative impact.

(Dept Health WA 2000; Ramsden 2002; Thompson 2005; Eckermann, Dowd et al. 2006).

3. CULTURAL SAFETY

Cultural Safety is a safe service, as defined by those who receive the service – the people, clients, patients and their families (Ramsden 1992). This requires openness, honesty, acceptance, reflection, commitment, and respect. It is important to recognise that actions often speak louder than words. The ways we move, our approach, the expression on our face, and the look in our eyes, are all signs that make any words, actions, or reactions to be truthful.

Crucial to informing this is the development of partnerships with Indigenous peoples and recognition that only the person who has truly lived this experience can speak with authority. As such, Cultural Safety enables Indigenous peoples to retain their right to determine if the process or outcome of experience (past and present) is culturally appropriate. (Ramsden 2002).

These three steps to achieving Cultural Safety in health practice should not be trivialised. It takes time, reflection, a questioning of our personal values and beliefs and an acceptance that it is ok to be different – it is something to celebrate and respect.⁵

4 Ramsden 2002; Thompson 2005; Eckermann, Dowd et al. 2006, cited Smith 2007, p 63 5 Smith 2007

STRATEGIC ALIGNMENT

The Western Health Aboriginal Health Cultural Safety Plan 2019-2021 is informed by and aligns with Western Health's Vision, Values and the Western Health Strategic Plan 2015-2020.

OUR VISION

Together, caring for the West. Our patients, staff, community and environment.

OUR VALUES

Compassion Accountability Respect Excellence Safety

STRATEGIC AIMS

AIM 1

Growing & improving the delivery of safe, high quality care

AIM 2

Connecting the care provided to our community

AIM 3

Communicating with our patients, our partners & each other with transparency & purpose

AIM 4

Being socially responsible & using resources sustainably

AIM 5

Valuing & empowering our people



Engaging the strategic plan through leadership in Aboriginal and Torres Strait Islander health and providing a culturally respectful, high quality, safe, collaborative and holistic health care organisation.

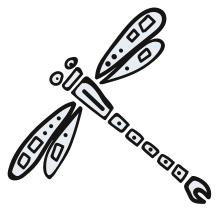
Our vision embodies Reconciliation and has made a firm commitment towards Closing the Gap in terms of health by building on our previous Aboriginal Health plans. Through the implementation of this Cultural Safety Plan we will continue to commit to and influence change for Aboriginal and Torres Strait Islander people in the western region of Melbourne by acknowledging the importance of:

- Respectful relationships between our staff and all Aboriginal and Torres Strait Islander people using our services and programs; and
- Supporting staff to take the time to make relationships respectful and meaningful, and partnerships balanced and fair.

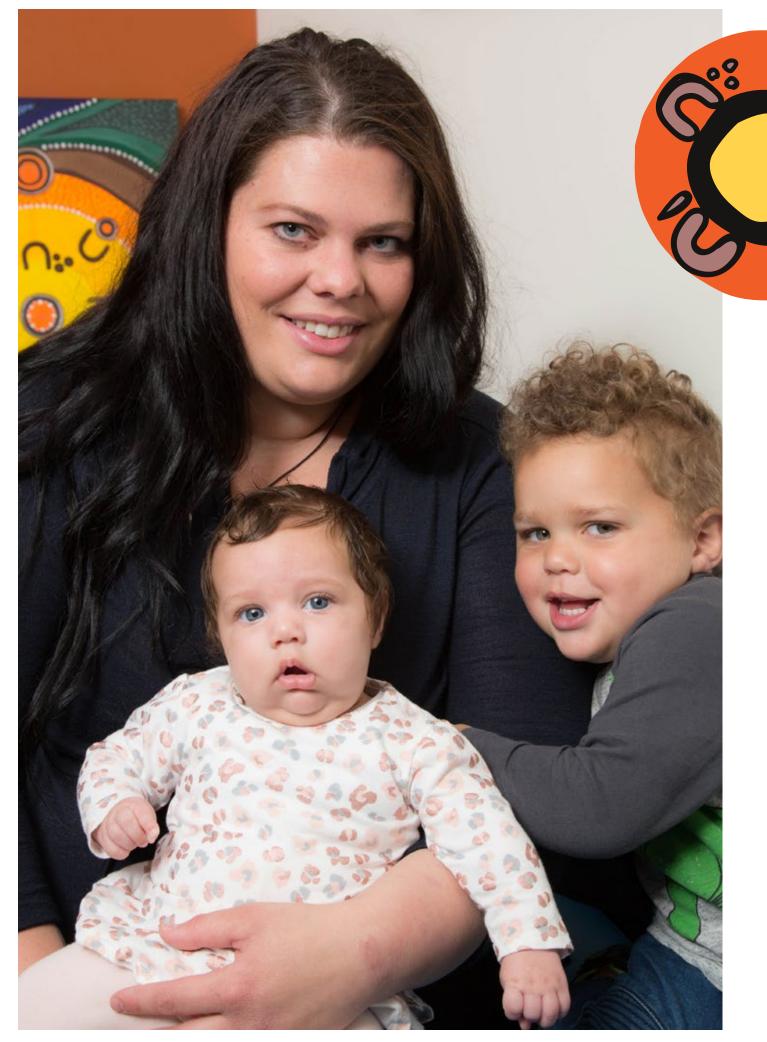
GUIDING PRINCIPLES

The governance, staff employment and work practices are founded on principles that support the uptake of culturally responsive practices:

- Cultural respect is achieved when the health system is safe.
- Accessible and responsive for Aboriginal and Torres Strait Islander people and cultural values, strengths and differences are respected.
- Health professionals reflect on their own realities, beliefs and attitudes.
- The ability to self-identify without judgement.







Objectives

The Western Health Aboriginal Health Steering Committee and Western Health Board and Leadership team are committed to implementing the following objectives in line with the actions that focus on meeting the needs of Aboriginal and Torres Strait Islander people, highlighted in the National Safety and Quality Health Service Standards (Appendix one).

TABLE 5: OBJECTIVES

| Objective | Western Health Cultural Safety Plan 2019 - 2021 |
|-------------|---|
| Objective 1 | Improve Communication and Create a Safe and Welcoming Environment by: Western Health will improve communication and create a safe and welcoming environment that recognises the importance of the cultural beliefs and practices of Aboriginal and Torres Strait Islander people. (NHQHS Clinical Governance for Health Service Organisations 1.21). |
| Objective 2 | Western Health to have a Culturally Reflective Workforce including their Volunteers. (NHQHS Clinical Governance for Health Service Organisations 1.21). |
| Objective 3 | Western Health has evidence of Aboriginal Health quality improvement, planning and research. (NHQHS Clinical Governance for Health Service Organisations 1.4). |
| Objective 4 | Western Health will improve access to culturally appropriate services for Aboriginal and Torres Strait Islander people. (NHQHS Clinical Governance for Health Service Organisations 1.4). |

WESTERN HEALTH ABORIGINAL HEALTH CULTURAL SAFETY PLAN



OBJECTIVE 1: Western Health will improve communication and create a safe and welcoming environment that recognises the importance of the cultural beliefs and practices of Aboriginal and Torres Strait Islander people

| Actions to be implemented | Resources | Timelines | Success Indicator | Responsibility |
|---|---|----------------|--|--|
| Review membership of the Steering Committee and invite other key community and Western Health staff stakeholders as required. | Aboriginal Health Unit | 2019 | Steering Committee membership is confirmed for 2019-2020. | Executive Sponsor |
| Provision of a room in the birthing suite that is welcoming and culturally sensitive for Aboriginal and Torres Strait Islander women | Aboriginal Health Unit and Executive | 2020 | A minimum of one room in the birthing suite displays elements that make it culturally welcoming to Aboriginal and Torres Strait Islander women. | Women's and Children's Koori Maternity Services, Aboriginal Health Unit |
| Utilise opportunities to enhance Western Health gardens at all sites to meet Aboriginal and Torres Strat Islander needs by incorporating native plants, and/or Aboriginal designed sculptures/artworks, and/or a smoking ceremony area. | Aboriginal Health Unit, Environment and Sustainability, Volunteers | 2020 | Western Health gardens at all sites are reflective of Aboriginal culture. | Aboriginal Health Team Environment team |
| Flag Poles fly the Aboriginal Flag and Torres Strait Islander Flag at each Western Health hospital site. (no flag poles at Sunbury, more required for Footscray and Sunshine). Investigate alternative options where flag poles are not possible. | Executive Team | 2021 | Flags are flying at all Western Health sites. | Executive Sponsor Manager, Aboriginal Health Unit |
| Enhance communication of Aboriginal and Torres Strait Islander cultural safety initiatives for internal and external stakeholders including posting news and events. Provide regular updates for Western Health staff via 'The Pulse'. Utilise opportunities to enhance social media presence. | Aboriginal Health Unit and Public Affairs | 2020 | Western Health staff and volunteers are informed of Aboriginal specific initiatives. Aboriginal community are informed of news and events. | Aboriginal Health Team |
| Develop a process that supports a culturally appropriate feedback mechanism from Aboriginal community members about program and service delivery at Western Health. | Executive sponsor | 2019 | Aboriginal community feedback surveys are developed and Aboriginal community feedback meetings are held twice yearly. | Manager, Aboriginal Health Quality, Safety and Patient Experience Team |
| Western Health develops Aboriginal communication and branding that is in place across Western Health and includes: An Aboriginal language name for the Aboriginal Health Unit (consult Wurundjeri and Boon Wurrung). Incorporation of Aboriginal Health brand that incorporates cultural safety practices into relevant pages of the intranet and internet. Enhance the Aboriginal Health Unit social media presence and utilisation that makes regular posts. | Executive, Aboriginal Health Unit, Public Affairs | 2019 | Aboriginal communication mechanisms and branding is in place and reflective of Aboriginal cultural safety practices. | Executive Sponsor Manager, Aboriginal Health Unit |
| Cultural Safety audit tool progressively utilised clinical departments at all Western Health Sites. Reviewing the physical environment. Reflection of how each department works with Aboriginal patients/families. | Aboriginal Health Unit and Managers | Bi- Monthly | Recommendations and support for Managers to make changes. Increased education for staff. | Aboriginal Health Team |

OBJECTIVE 2: Western Health to have a Culturally Reflective Workforce including their Volunteers

| Actions to be implemented | Resources | Timelines | Success Indicator | Responsibility |
|---|--|--------------------|---|---------------------------|
| Review the content of the Western Health Aboriginal Cultural Awareness Training and Cultural Immersion programs and activities and update content to be reflective of: Delivering cultural safety and supportive approaches Team based commitment and approaches to implementing cultural safety How to work more effectively with the Aboriginal Health Unit and Steering Committee Asking the Indigenous status question and understanding why Is reflective of personal stories about experiences at Western Health Supports managers to be comfortable to ask questions Visits to other hospital locations to understand best practice | Aboriginal Health Unit and People and Culture | 2019 | The Western Health Aboriginal Cultural Awareness Training and Cultural Immersion Programs and activities are in line with the Cultural Safety Plan. | Aboriginal Health Team |
| Employees at Western Health participate in Aboriginal Cultural Awareness Training Programs and Cultural Immersion programs that are supported by the Western Health Aboriginal Steering Committee, including on-line and face to face. Three tier system that includes: Highly recommended - for front line staff and volunteers; Recommended - for staff and volunteers with little contact with patients and families; Optional - for staff and volunteers that have no patient contact. | Funds to support staff participation in ACAT programs and training dates are set and posted on line. | Every 12 months | Employees who have contact with Aboriginal people, children and families have completed either on-line and/or face to face training. | Aboriginal Health Unit |
| Develop a plan that supports school visits and career pathways that increases the number of school based traineeships at Western Health. | Aboriginal Health Unit, People and Culture and Education Centre | 2020 | School based traineeships are successfully retaining Aboriginal students. | Aboriginal Health Team |
| Evaluate and refresh current Western Health Aboriginal Employment Plan 2016-19 | People and Culture, Aboriginal Health Unit | 2019 | Plan evaluated and further 3 year plan implemented. An increase in Aboriginal employment opportunities/staff at Western Health | People and Culture |



OBJECTIVE 3: Western Health has evidence of Aboriginal Health quality improvement, planning and research

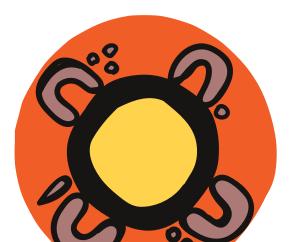
| Actions to be implemented | Resources | Timelines | Success Indicator | Responsibility |
|--|---|-----------|---|---|
| Ensure Western Health's Board and Executive leadership commitment and support to the implementation of the Western Health Aboriginal Health Cultural Safety Plan 2019-2021. | Board and Executive team. | Ongoing | Leadership practices are reflective of Aboriginal Health Cultural Safety approaches. | Executive |
| Review Western Health policies and procedures and update to reflect the NSQHS Version 2 Guidelines. | Aboriginal Health Unit, Quality and Safety | 2019 | Western Health policies and procedures reflect the NSQHS Guidelines. | Manager, Aboriginal Health Unit |
| Write up case studies into a publication of current initiatives and investigate the retrospective write up of previous successes. Establish a round table with key people at Western Health to explore funding opportunities for research that will have the most impact. | Aboriginal Health Unit, Public Affairs, Research and Development | 2020-2021 | Western Health Aboriginal patient and community experience case studies publication is launched and distributed across Western Health and to the broader community. | Manager, Aboriginal Health Unit Research Team |
| Look at opportunities to enhance Aboriginal Health Unit resources to enhance services • Research projects • Grant opportunities | Executive, Aboriginal Health Unit, People and Culture, Research and Development Volunteers | 2020 | Aboriginal Health Unit enhances its capacity and capability to support Aboriginal community members and patients across Western Health. | Executive Sponsor Manager, Aboriginal Health |

OBJECTIVE 4: Western Health will improve access to culturally appropriate services for Aboriginal and Torres Strait Islander people

| Actions to be implemented | Resources | Timelines | Success Indicator | Responsibility |
|--|---|-----------|---|--|
| Explore the opportunity to pilot a dedicated Aboriginal community outpatient's day with a specialist service, expanding on the principles and factors that have led to the successful Galinjera midwifery program. | Executive, Aboriginal Health Unit, Clinical Support and Specialist Clinics | 2020 | Smooth transition of Aboriginal community members in outpatients for selected service. | Leadership Group |
| Continue, expand and extend 'Aboriginal Iden- tification' Training and improve all entry points including self-check-in and accept the response. | Aboriginal Health Unit, Education Centre | 2019 | Improved responses by Western Health staff to asking the Indigenous Status Question and recording of cultural needs. | Aboriginal Health Team Education |
| Identify how Western Health can support the increasing number of Aboriginal community members who come from regional Victorian locations (particularly Mildura) for care provision in cardiac, midwifery, diabetes and renal at Western Health. This includes: Connection with Mildura and District Aboriginal Service and Mildura Hospital Identify culturally responsive support services and care needs | Aboriginal Health Team and external health providers. | 2020 | Aboriginal community members from regional Victorian areas have their care needs and supports provided in a culturally safe way. | Aboriginal Health Team |

OUTCOMES AND SUCCESS: Evaluate and Report on the Western Health Aboriginal Health Cultural Safety Plan 2019-2021

| Actions to be implemented | Resources | Timelines | Success Indicator | Responsibility |
|--|---|---|---|---|
| A reporting dashboard is developed to assist in monitoring key success indicators from the Cultural Safety Plan, including: Staff engagement in cultural awareness education Rates of patients identifying as Aboriginal or Torres Strait Islander Rate of referrals to the Aboriginal Health Unit Aboriginal employment rates Rate of engagement of Aboriginal patients in specific programs | Time is allocated to identify current and potential future data sources, and compile into a dashboard. | Initial development by July 2019, then updated quarterly. | Performance is monitored and outcomes are clearly reported to key groups, including the Aboriginal Health Steering Committee, Best Care Committee, Executive and Board. | Executive Sponsor Manager, Aboriginal Health Unit |
| The Western Health Aboriginal Health Unit provides 6 monthly reports on the progress on the Cultural Safety Plan implementation to the Western Health Executive and the Board Quality and Safety Committee. | Time is allocated to collate data & other relevant information | Every 6 months | Western Health Aboriginal Health Cultural Safety Plan implementation is reported to staff. | Executive Sponsor Manager, Aboriginal Health Unit |
| The Western Health Aboriginal Health Unit provides quarterly reports on the progress on the Cultural Safety Plan implementation to the Western Health Aboriginal Health Steering Committee. | Time is allocated to collate data & other relevant information | Quarterly | Western Health Aboriginal Health Cultural Safety Plan implementation is reported to staff. | Executive Sponsor Manager, Aboriginal Health Unit |
| The Western Health Aboriginal Health Unit provides annual progress reports on the Aboriginal Health Cultural Safety Plan implementation at staff meetings and to the Aboriginal community. | Time is allocated to collate data & other relevant information | Annually | Western Health Aboriginal Health Cultural Safety Plan implementation is reported to staff and community. | Executive Sponsor Manager, Aboriginal Health Unit |
| The Western Health Aboriginal Health Cultural Safety Plan – Evaluation Framework template is completed by all Western Health services. | All services | Annually | Evaluation Framework template is completed by all services and 80% of outcomes has been achieved. | Executive Leadership Group |



REFERENCES

Aboriginal and Torres Strait Islander Social Justice Commissioner, Steering Committee for Indigenous Health Equality. Close the Gap: national Indigenous health equality targets. Sydney: Human Rights and Equal Opportunity Commission; 2008.

Australian Bureau of Statistics (ABS) https://www.abs.gov.au/Aboriginal-and-Torres-Strait-Islander-Peoples.

Bird-Rose, 2005, cited in Smith, J, Australia's Rural, Remote and Indigenous Health – 3rd Edition, 2016.

Committee of Deans of Australian Medical Schools (CDAMS) published the Indigenous Health Curriculum Framework (Phillips 2004),

Eckermann, A., Dowd, T., et al, Bridging cultures in aboriginal health. Churchill Livingstone Elsevier, Sydney; 2006. Korin Korin Balit-Djak: Aboriginal health, wellbeing and safety strategic plan 2017-2027. [online] Available at: https://www2.health.vic.gov.au/about/ healthstrategies/aboriginal-health/korinkorinbalit-djak [Accessed 18 Dec. 2018].

National Aboriginal and Torres Strait Islander Health Workers Association (NATSHIWA): Cultural Safety Framework, https://www.natsihwa.org. au/sites/default/files/natsihwa-cultural_ safety-framework_summary.pdf.

Nursing Council of New Zealand. (2002). Guidelines for cultural safety, the treaty of Waitangi, and Maori health in nursing and midwifery education and practice. Wellington: Nursing Council of New Zealand.

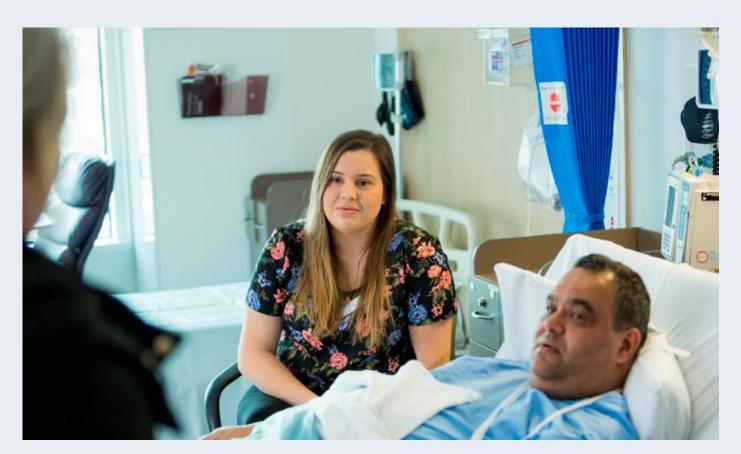
Ramsden, I, Cultural safety and nursing education in Aotearoa and Te Waipounamu. University of Wellington, Wellington; 2002.

Smith, J, Australia's Rural and Remote Health: A Social Justice Perspective, Cornell University Tertiary Press, 2007. The Wardliparingga Aboriginal Research Unit of the South Australian Health and Medical Research Institute. National Safety and Quality Health Service Standards user guide for Aboriginal and Torres Strait Islander health. Sydney: Australian Commission on Safety and Quality in Health Care.

Thomson, N, Cultural respect and related concepts: a brief summary of the literature, Australian Indigenous HealthBulletin Vol 5 No 4 October, 2005.

Western Health Strategic Plan 2015 - 2020. (2015). [online] Available at: http://whstrategicplan.com.au/ [Accessed 18 Dec. 2018].

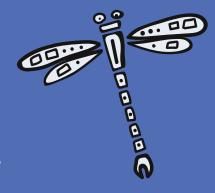
Williams, R. 'Cultural Safety – what does it mean for our work practice?' (1999) 23(2), Australian and New Zealand Journal of Public Health 213, p 213.





GLOSSARY

| Aboriginal | Throughout this document, the term Aboriginal is used to refer to all Australian Aboriginal and Torres Strait Islander people. It is inclusive of people in Victoria who identify as Indigenous Australian, Koori and Koorie. |
|------------------------------------|--|
| Community | A collective of Aboriginal and Torres Strait Islander people. |
| Communities | Defined language groups or regional groups that reflect the diversity within the Aboriginal and Torres Strait Islander population. A specific community may be referred to. |
| Cultural Awareness | A basic understanding of Aboriginal and Torres Strait Islander histories, peoples and cultures. There is no common accepted practice to reflect cultural awareness, and the actions taken depend on the individual and their knowledge of Aboriginal and Torres Strait Islander culture. Generally accepted as a necessary first step and a foundation for further development, but not sufficient for sustained behaviour change. |
| Culturally reflective workforce | Reflecting on one's own cultural norms and beliefs, and how these impacts on others from a different cultural and spiritual background. Cultural safety does not propose that people become experts on other cultures, but rather it places an emphasis on understanding. |
| Cultural respect | The recognition, protection and continued advancement of the inherent rights, cultures and traditions of Aboriginal and Torres Strait Islander people. Cultural respect is about shared respect. It is achieved when the health system is a safe environment for Aboriginal and Torres Strait Islander people, and cultural differences are respected. It is a commitment to the principle that the design, model of care and provision of services offered by the Australian healthcare system will not knowingly compromise the legitimate cultural rights, practices, values and expectations of Aboriginal and Torres Strait Islander people. The goal of cultural respect is to uphold the rights of Aboriginal and Torres Strait Islander people to maintain, protect and develop their culture, and achieve equitable health outcomes. |
| Cultural safety | Identifies that health consumers are safest when health professionals have considered power relations, cultural differences and patients' rights. Part of this process requires health professionals to examine their own realities, beliefs and attitudes. Cultural safety is defined not by the health professional but by the health consumer's experience - the individual's experience of the care they are given, and their ability to access services and to raise concerns. The essential features of cultural safety are: An understanding of one's culture An acknowledgement of difference, and a requirement that caregivers are actively mindful and respectful of difference(s) Informed by the theory of power relations; any attempt to depoliticise cultural safety is to miss the point An appreciation of the historical context of colonisation, the practices of racism at individual and institutional levels, and their impact on First Nations people's living and wellbeing, in both the present and the past Presence or absence is determined by the experience of the recipient of care and not defined by the caregiver. |



APPENDIX

Appendix 1: The six actions in the National Safety and Quality Health Service Standards that focus specifically on meeting the needs of Aboriginal and Torres Strait Islander people.

| Standard | Action |
|--|--|
| Partnering with Consumers | 2.13 The health service organisation works in partnership with Aboriginal and Torres Strait Islander communities to meet their healthcare needs |
| Clinical Governance for Health Service Organisations | 1.2 The governing body ensures that the organisation's safety and quality priorities address the specific health needs of Aboriginal and Torres Strait Islander people |
| | 1.4 The health service organisation implements and monitors targeted strategies to meet the organisation's safety and quality priorities for Aboriginal and Torres Strait Islander people |
| | 1.21 The health service organisation has strategies to improve the cultural awareness and cultural competency of the workforce to meet the needs of its Aboriginal and Torres Strait Islander patients |
| | 1.33 The health service organisation demonstrates a welcoming environment that recognises the importance of the cultural beliefs and practices of Aboriginal and Torres Strait Islander people |
| Comprehensive Care | 5.8 The health service organisation has processes to routinely ask patients if they identify as being of Aboriginal or Torres Strait Islander origin, and to record this information in administrative and clinical information systems |

For further information, please see following link:

https://www.safetyandquality.gov.au/our-work/ assessment-to-the-nsqhs-standards/improving-carefor-aboriginal-and-torres-strait-islander-people/







